

Agenda Item:

# Dorset Health Scrutiny Committee

9

**Dorset County Council**



Date of Meeting	13 September 2013
Officer	Director for Adult and Community Services
Subject of Report	<b>Learning for Health Scrutiny practice in Dorset from the Francis Inquiry – Update on action plan</b>
Executive Summary	<p>At the meeting of the Committee on 30 May the Committee considered a report by the Director for Adult and Community Services which highlighted aspects of the Francis Inquiry final report which directly addressed the role of scrutiny committees in the failures of Mid-Staffordshire NHS Foundation Trust, with the aim of identifying specific learning that applied to the existing health scrutiny arrangements in Dorset, as well as any changes to practice that might be required as a result.</p> <p>Although it was the view of the Chairman that in Dorset minutes contained the right level of detail and were of a high standard it was agreed that in accordance with the action plan the Head of Legal and Democratic Services would review the current practice for recording health scrutiny meetings in the light of the comments in the Francis report.</p> <p>The criticisms in the Francis report include that the minutes, particularly those of the Borough Council, were brief to the point of being uninformative, there was no summary of the debate and the minutes gave little idea of what members of the Committee actually contributed. Somehow the Francis Inquiry was left with the clear impression that such minutes were common local government practice and in need of review.</p> <p>In addition to reviewing past minutes of the Dorset Health Scrutiny Committee the Head of Legal and Democratic Services has also</p>

	<p>met with the Senior Democratic Services Officer who supports meetings of the Dorset Health Scrutiny Committee and the Democratic Services Manager. The Dorset Health Scrutiny Committee minutes do not provide a verbatim record of what was said and by whom. Consistent with the findings of the Francis Inquiry Dorset's minutes are not a transcript but they do provide a summary of the debate. The Head of Service considers the minutes of the meeting held on 14 September 2012 to be a good example of the inclusion of a helpful and informative level of detail without going too far and providing a "he said, she said" account.</p> <p>At the meeting on 30 May many members were of the view that all members should be identified by ward, so that they could be held personally accountable for their comments. Again, the minutes from September 2012 are considered a good example of when this is, and is not, appropriate. For the Supporting People update at that meeting, (an item of whole Dorset relevance) contributions were described as being from "the Committee" and "one member asked" and individual officer holders (the member champion for Supporting People and the Cabinet member for adult social care) were identified by office. However, for the item at that same meeting on proposed changes to NHS services in Dorset, where there were specific local issues the County Council member for Wareham was identified by ward. Again, these minutes provide a good example (minutes 72.4 - 72.8) of how the current approach captures the key issues in debate.</p> <p>Having reviewed the position the Head of Service has advised that the current approach provides a proper legal record and one that meets the expectations of the Francis Inquiry. By their nature minutes of the previous meeting are before the Committee at each of its meetings and so it is suggested that the level of detail in minutes is kept under general review when the minutes of previous meetings are approved.</p> <p>The Committee resolved to monitor implementation of the action plan at their next meeting and then at regular intervals thereafter. The meeting of 30 May requested an amendment to the action plan and this alteration has been made. The amended action plan is attached and has been updated to reflect the progress made (Appendix 1).</p>
Impact Assessment	<p><u>Equalities Impact Assessment</u> Not applicable</p> <p><u>Use of Evidence</u> Minutes from 30 May 2013 meeting of Dorset Health Scrutiny Committee and updated action plan</p>

Page 3 – Learning for Health Scrutiny practice in Dorset from the Francis Inquiry – Update on action plan

	<p><u>Budget</u> No implications</p>
	<p><u>Risk Assessment</u> None undertaken.</p>
	<p><u>Other Implications:</u> None.</p>
Recommendation	That the Committee scrutinises and comments on the report.
Reason for Recommendation	The work of the Committee contributes to the County Council's aim to protect and enrich the health and well-being of Dorset's most vulnerable adults and children.
Appendices	<ol style="list-style-type: none"> <li>1. Updated Action Plan – Learning for Health Scrutiny practice in Dorset from the Francis Inquiry – September 2013</li> <li>2. Briefing sent out to all Town and Parish councils</li> </ol>
Background Papers	<ol style="list-style-type: none"> <li>1. Report by Director for Adult and Community Services to Dorset Health Scrutiny Committee, 30 May 2013 - The Francis Enquiry - Lessons for Health Scrutiny in Dorset.</li> <li>2. Minutes of the meeting of Dorset Health Scrutiny Committee 14 September 2012.</li> </ol>
Report Originator and Contact	<p>Name: Lucy Johns, Health Partnerships Officer          Tel: 01305 224388          Email: <a href="mailto:lucy.johns@dorsetcc.gov.uk">lucy.johns@dorsetcc.gov.uk</a></p>

**Appendix 1**

**UPDATED Action Plan – Learning for Health Scrutiny practice in Dorset from the Francis Inquiry  
September 2013**

<b>Recommendation in Francis Report</b>	<b>Change in practice required</b>	<b>Actions needed</b>	<b>By whom</b>	<b>By When</b>
<b>Rec. 47</b> Working with the Care Quality Commission (CQC)	Strengthen existing practice	<ol style="list-style-type: none"> <li>1. Chair and another nominated member to meet on a regular basis with CQC Compliance Manager (South Region).</li> <li>2. Share minutes of meetings and relevant scrutiny reports ( already in place).</li> <li>3. Discuss areas of concern as they arise.</li> </ol>	<ol style="list-style-type: none"> <li>1. Chairman</li> <li>2. Democratic Services</li> <li>3. Health Partnerships Officer</li> </ol>	<p>Dates for meetings in 2013/14 identified.</p> <p>Minutes of DHSC meetings sent to Compliance Manager together with Agendas and reports.</p> <p>Compliance Manager to address whole Committee at November meeting.</p>
<b>Rec. 119</b> Learning and information from complaints	New practice	<ol style="list-style-type: none"> <li>1. When relevant provider Trusts and NHS commissioning bodies to be asked for information on complaints and for that information to be considered by Committee and act on the information supplied by making appropriate recommendations.</li> <li>2. Share information with Local Healthwatch whenever possible and practical to do so.</li> <li>3. Information on the role of the Committee should be sent to Town and Parish</li> </ol>	Health Partnerships Officer	<p>Information to be requested in relation to reports being presented.</p> <p>Healthwatch Dorset contacted re NHS 111 to gather intelligence of public perceptions.</p> <p>Briefing on role of the Committee</p>

Recommendation in Francis Report	Change in practice required	Actions needed	By whom	By When
		Councils and a press release should be issued to re-emphasise the role of the Committee.		(Appendix 2) sent to all Town and Parish Councils. DCC Communications Unit advise that press release on work of Committee is linked to publication of next scrutiny review undertaken by the Committee in order to maximise coverage and impact.
<b>Rec.147</b> Co-ordination of local public scrutiny bodies	Strengthen and develop existing practice	1. Build on existing relationships within Dorset context to ensure co-ordination in activity and the sharing of appropriate information.	Health Partnerships Officer	Ongoing work to develop practical working relationships.
<b>Rec. 149</b> Expert assistance	New practice	1. Ensure members are provided with access to relevant supporting / additional information when presented with reports / proposals from commissioners and providers to help further develop effective scrutiny.	Health Partnerships Officer and Democratic Services	Relevant information requested in relation to reports for September meeting from Dorset Mental Health Forum and Healthwatch Dorset.  Information will need to be requested on a meeting by meeting basis determined by agenda items.
<b>Rec. 150</b> Inspection powers	Strengthen and develop existing practice	1. Work with Local Healthwatch to develop a mutually supportive relationship which provides timely and relevant information for both bodies through the use of the Healthwatch Enter and View powers.	Health Partnerships Officer	Health Partnerships Officer has met with Healthwatch Dorset community engagement lead.

Recommendation in Francis Report	Change in practice required	Actions needed	By whom	By When
				<p>Healthwatch Dorset are keen not to duplicate where engagement with patients and service users is being undertaken already through existing patient/ service user groups. Healthwatch Dorset will focus on engaging with individuals / communities not being reached.</p> <p>New protocol needs to be developed (awaiting publication of Health Scrutiny Regulations from Department of Health) - Ongoing action.</p>
<p><b>Rec. 246</b> Quality accounts</p>	<p>Strengthen and develop existing practice</p>	<ol style="list-style-type: none"> <li>1. Continue with the existing task and finish group approach to scrutinising the Quality Accounts.</li> <li>2. Ensure Local Healthwatch is invited to be engaged in this process.</li> <li>3. Ensure Quality Accounts are cross referenced with information from CQC on compliance with Quality Standards and this is reflected accurately.</li> <li>4. Ensure Quality Accounts are cross referenced with any information on</li> </ol>	<p>Task and Finish Group Elected members supported by the Health Partnerships Officer and Democratic Services</p>	<p>On-going process with dates for all meetings during 2013-2014 Quality Account cycle scheduled.</p> <p>Healthwatch Dorset will not participate in meetings but be included in terms of information sharing and commentary made by the Committee.</p> <p>Cross-referencing with CQC reports / complaints will take</p>

Recommendation in Francis Report	Change in practice required	Actions needed	By whom	By When
		complaints provided by Trusts outside of the Quality Account process.		place on a meeting by meeting basis.
Helping to ensure an effective Local Healthwatch	New Practice	<ol style="list-style-type: none"> <li>1. Work with Local Healthwatch in a pragmatic way and develop a mutually supportive protocol in this regard.</li> <li>2. Feed into the contract monitoring arrangements of the County Council for the Local Healthwatch contract in terms of reporting on the Committee's experience of working with Local Healthwatch</li> </ol>	<ol style="list-style-type: none"> <li>1. The Committee supported by the Health Partnerships Officer.</li> <li>2. The Chairman supported by the Health Partnerships Officer and DCC contract monitoring officers.</li> </ol>	<p>Commence discussion with Healthwatch representatives and with DCC contract monitoring staff now.</p> <p>Protocol development delayed - awaiting publication of new Health Scrutiny Regulations from Department of Health that were due to be published in April 2013.</p>
Awareness of Safeguarding	Strengthen and develop existing practice	<ol style="list-style-type: none"> <li>1. Provide appropriate training for members to enable them to identify issues within an NHS service that could give rise to potential safeguarding cases and know how to raise such concerns, particularly with regard to Quality Accounts.</li> <li>2. Ensure any potential safeguarding concerns raised are reported appropriately.</li> </ol>	<ol style="list-style-type: none"> <li>1. DCC Safeguarding Managers co-ordinated by the Health Partnerships Officer.</li> </ol>	<p>These will be addressed as part of the scrutiny training being organised by Democratic services for October 2013. Safeguarding Manager is aware.</p>

<b>Recommendation in Francis Report</b>	<b>Change in practice required</b>	<b>Actions needed</b>	<b>By whom</b>	<b>By When</b>
Recording of Health Scrutiny meetings	Strengthen and develop existing practice	1. The Head of Legal and Democratic Services to review current practice for recording health scrutiny meetings in light of the comments made within the Francis Report.	1. DCC Head of Legal and Democratic Services	Review of practice undertaken by Head of Legal and Democratic Services and reported to the Committee in body of the report.