# HEALTH & WELL-BEING SCRUTINY COMMITTEE 6<sup>th</sup> September 2011

# **ANNUAL WORK PROGRAMME 2011-12**

## **REPORT OF THE CHIEF EXECUTIVE**

### 1. Purpose of Report

1.1 For the Committee to receive an updated work programme for 2011-12.

#### 2. Background

2.1 The Scrutiny Committee is responsible for setting its own work programme within the following remit:

Social Care (Adults); Welfare Rights; Relationships and scrutiny of health services; Healthy life and lifestyle choices for adults and children; Public Health; Citizenship (Adults); and External inspections (Adult Services)

2.2 The work programme can be amended during the year and any Member of the Committee can add an item of business.

#### 3. Current Position

- 3.1 In addition to the items taken at the scheduled meetings the following activities have taken place since the last meeting.
- 1. <u>Children's Heart Services Health Impact Assessment</u>

At the Scrutiny Committee on 8<sup>th</sup> June 2011 Members were updated about the ongoing the consultation on the reconfiguration of children's heart services in England.

The consultation follows the national 'Safe and sustainable review' which is proposing four options to reduce the number of hospitals providing children's heart surgery from 11 to either six or seven. No decisions about the future of any of the centres under review will be made until after the consultation. A decision on the proposals is expected in November 2011. The Committee responded to the consultation in support of Option A which was for seven surgical centres including the Freeman Hospital, Newcastle.

The Committee was informed that an independent report on the outcome of the consultation would be available in August 2011. The interim Health Impact Assessment (HIA) report for the Safe and Sustainable review on the future of children's congenital heart services was published on 5 August 2011 following detailed analysis to identify the potential health impacts of the recommendations, including those on vulnerable communities. The HIA process involved 26 workshops, a number of focus groups with vulnerable communities and one-to-one interviews with stakeholders and families.

The interim report states that concentrating surgical expertise onto fewer sites and bringing non-surgical care closer to home will benefit patients. The development of strong congenital cardiac networks is acknowledged to be one of the benefits to vulnerable groups as they will increase equity of access and improve the delivery of care.

The final HIA report, taking account of the outcome of public consultation, will be made available in October, prior to the decision on the proposals which is expected in November. The full HIA report is available from the following link:

http://www.specialisedservices.nhs.uk/library/30/Health Impact Assessment Interim Report. pdf

#### 2. End of Life Facilities

In July Committee members were notified that the PCT was starting to consult on proposals regarding a new hospice facility to be provided in Sunderland to replace St Benedict's at Monkwearmouth. The project required that an Outline Business Case (OBC) was submitted to the SHA over the summer. A full business case will then be developed and submitted to SHA later in the year (and scrutiny will be consulted fully at that stage through Committee).

#### 3. Policy Review – Evidence Gathering Session

Members were notified in July that evidence gathering for the policy review would require an additional, daytime, meeting in November to hear from a number of witnesses. The date notified to the committee is Wednesday 23 November.

#### 4. Conclusion & Recommendation

- 4.1 That Members note the updated work programme.
- 5. Background Papers None

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