

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

DATE	5 th October 2022
REPORT OF SUBJECT	Assistant Chief Executive (Statutory Scrutiny Officer) Tracking the recommendations of the Health and Adult Social Care Scrutiny Panel
STATUS	Open

CONTRIBUTION TO THE COUNCIL PLAN/STRATEGIC AIMS

The scrutiny panels act as a reviewing mechanism for decisions made relating to the strategic policy, performance and resources required to deliver the ambitions of the Council and its key partnerships. The aim of the scrutiny process is to make sure decision making is robust by providing constructive challenge. This contributes to the Council being effective and efficient and therefore is integral to the delivery of the Council Plan.

EXECUTIVE SUMMARY

The scrutiny panels have adopted a template in order to track their recommendations.

MATTER(S) FOR CONSIDERATION

Members are asked to look at the progress against the recommendations and agree to sign off any recommendations that have been completed, so that they can be removed from the table.

1. BACKGROUND AND ISSUES

Each scrutiny panel has a standard agenda item so that they can check progress against the recommendations they have previously made.

Members are asked to look at the progress against the recommendations in Appendix A and agree to sign off any recommendations that have been completed, so that they can be removed from the table.

2. RISKS AND OPPORTUNITIES

Risk assessments will already have been carried out on the reports that these recommendations have come from.

Any actions which the council may undertake as a result of recommendations made by scrutiny will be the subject of further reports, which will include risk assessment(s) by the author(s) concerned.

3. OTHER OPTIONS CONSIDERED

Not applicable to this report.

4. REPUTATION AND COMMUNICATIONS CONSIDERATIONS

The panel's tracking report demonstrates that the panel monitors progress on its recommendations and required actions. This report further demonstrates the breadth of matters considered by scrutiny.

5. CHILDREN AND YOUNG PEOPLE IMPLICATIONS

There are no impacts on health and adult social care as a direct result of this report. The reports that these tracked items have come from will have been assessed for impact on health and adult social care.

6. FINANCIAL CONSIDERATIONS

There are no financial considerations included within this report, beyond scrutiny's enhanced future role in monitoring delivery of the council's budget and medium-term financial plan.

7. MONITORING COMMENTS

In the opinion of the author, this report does not contain recommended changes to policy or resources (people, finance or physical assets). As a result, no monitoring comments have been sought from the Council's Monitoring Officer (legal), Section 151 Officer (finance) or Strategic Workforce Lead (human resources).

8. WARD IMPLICATIONS

Potentially impacts on all wards.

9. BACKGROUND PAPERS

Minutes from the Health and Adult Social Care Scrutiny Panel - <http://www.nelincs.gov.uk/committees/>

10. CONTACT OFFICER

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HELEN ISAACS
Assistant Chief Executive
(Statutory Scrutiny Officer)

**TRACKING OF RECOMMENDATIONS – HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL
2022/2023**

DATE	RECOMMENDATION	RESPONSIBLE	PROGRESS/COMMENTS
15.7.20	<p><u>SPH.10 Haematology Service Update</u></p> <p>The patient journey on the new service be presented to a future panel meeting.</p>	Scrutiny & Committee Advisor	Update: Further to the request for information a briefing paper is being completed and will be sent to the panel ahead of the November 2022 meeting.
4.8.21	<p><u>SPH. 9 Integrated Care System</u></p> <p>Progress of the ICS be received at a future meeting of this panel.</p>	Chief Executive	Update: Scheduled for the meeting on the 30 th November 2022.
2.2.22	<p><u>SPH.51 Adult Safeguarding Annual Report</u></p> <p>The panel be provided with the number of people against the total number of DoLs since April 2020.</p>	Director for Adult Social Care	Update: Completed email sent to the panel 6.9.22
3.8.22	<p><u>SPH.8 Director of Public Health Annual Report 2021</u></p> <p>The panel to receive a briefing paper on the new Maternal Mental Health Service that was launched in May 2022.</p> <p>A request to Navigo for information on what targeted work was in place to reach people most in need of mental health services, hence aiming to reduce health inequalities.</p> <p>The panel to receive an update if limits on the amount of time birth partners could be present in the hospital had been removed or were still in place.</p>	Director of Public Health	<p>Update: Maternal mental health service has now been implemented and is accepting referrals – Completed.</p> <p>Update: Information request sent to officers.</p> <p>Update: Information request sent to officers.</p>

	<p>Mental health services for individuals aged 16-18 years be added to the work programme so that members could understand if there was a gap in services.</p> <p>The panel received an email on how A & E attendances for mental health related reasons were categorised, specifically whether attendances related to drug and alcohol abuse had their own categorisation, or whether they were represented within the complaints listed in table 4 of the report.</p> <p>The panel received a copy of the domestic abuse strategy that went to the Communities Scrutiny Panel in February 2022.</p> <p>An update be provided on whether the health visiting service was using the Ages and Stages Questionnaire (ASQ) emotional screening tool, as outlined in the report.</p>		<p>Completed – Added to the work programme for a future panel meeting in 2022-23.</p> <p>When someone attends A & E, the information recorded includes the ‘chief complaint’ which someone presents with, as well as the ‘diagnosis’ which that person is given. Table 4 contains information on the chief complaints; however, the diagnosis field includes the following terms related to substance misuse: ‘alcohol dependence’, ‘alcohol intoxication’, ‘illicit drug use’, and ‘uncomplicated alcohol withdrawal’. The proportion of mental health A & E attendances recorded in Table 4 which were diagnosed according to the above terms (so were diagnosed as being due to substance misuse) is 4%.</p> <p>Completed</p> <p>The service confirmed to that the health visiting service started undertaking the ASQ social and emotional screening tool for all children from the 1st April this year as part of the 2 year review. This is undertaken by a Community Health Practitioner or Health Visitor dependent on need. Prior to this, the tool was only used for children where a need had already been identified.</p>
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3.8.22	<p><u>SPH.9 Health & Adult Social Care Scrutiny Panel Work Programme – Review 2021/22 and Work Programme 2022/23</u></p> <p>That EMAS and NLAG to be invited to the meeting on the 5th October 2022</p>		Update: Completed on the agenda for the meeting on the 5 th October 2022
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