

**DERBYSHIRE COUNTY COUNCIL
HEALTH IMPROVEMENT AND SCRUTINY COMMITTEE**

2 September 2013

Report of the Director of Legal Services

WORK PROGRAMME 2013/14

1. Purpose of the Report

To consider the Health Improvement and Scrutiny Committee's work programme for 2013/14.

2. Information

A response has been provided to recommendations made on the Improvement and Scrutiny Review into Chronic Pain Services by a multi-agency steering group, attached at Appendix A.

A paper outlining a revised approach to the Improvement and Scrutiny review of Hospital Discharge is attached at Appendix B. The Committee had agreed at its 15 July meeting to continue a review started by the former People's Committee. A working group was established and considered the original scope of the review to be too broad to be effective.

An overview of the Committee's work programme for 2013/14 is attached at Appendix C. The Director of Public Health has requested that the Committee be consulted on proposals to re-procure a number of public health services during the year. This will be undertaken in tranches, with the first one taking place in November with subsequent outlined on the work programme.

is also recognised that there needs to be a degree of flexibility with any work programme and the Committee should note that it may be necessary to vary its work programme through the year should more pressing matters requiring scrutiny arise.

3. Considerations (to be specified individually where appropriate)

In preparing this report the relevance of the following factors has been considered: financial, human relations, legal and human rights, prevention of crime and disorder, equality and diversity, environmental, health, property and transport considerations.

4. Officer's Recommendations

- 4.1 That the Committee receives and notes the response to the recommendations arising from the Improvement and Scrutiny Review of Chronic Pain Services.
- 4.2 That the Committee approves the revised scope and approach to the Improvement and Scrutiny Review of Hospital Discharge.
- 4.3 That the Committee receives and notes the work programme for 2013/14

John McElvaney
Director of Legal Services

**DERBYSHIRE COUNTY COUNCIL
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2 September 2013

**IMPROVEMENT AND SCRUTINY REVIEW OF CHRONIC PAIN SERVICES
UPDATE REPORT**

1. Background Information

A review of Chronic Pain services in Derbyshire was completed in January 2013 by the former Improvement and Scrutiny Committee – People. The review report was presented to the Council's Cabinet and the shadow Health and Well Being Board in March 2013.

In summary, the review found that services available were of a good quality and well received by users. However, it did identify the need for improvements to be made, particularly in addressing inequity of some service provision and making professionals, particularly those in Primary Care, as well as the public, aware of the range of services available.

A multi-agency steering group has been convened to consider and respond to the recommendations made in the report. A response against the recommendations, following an initial meeting on 22 July 2013, is provided below.

2. Summary of recommendations

The Improvement and Scrutiny Review of Chronic Pain Services in Derbyshire made five recommendations for consideration by the Council (Public Health), local NHS Clinical Commissioning Groups and providers of chronic pain services. They were:

1	A chronic pain needs assessment should be undertaken in Derbyshire to determine the prevalence and need of chronic pain sufferers. The results of which should be used to inform the planning/reconfiguration of services and ensure resources are being targeted at the right areas.
2	Development and implementation of clear referral guidelines for GPs and other Primary Care Professionals.
3	Improve the quality of public information to include details on signposting who can help, where to go, and on how to cope with living with chronic-pain – promotion of existing self-help guides e.g. The Pain Toolkit.
4	Consideration should be given to the commissioning of community based services to reach more rural areas and vulnerable people subject to outcome of the needs assessment.

5	Ensure that access to chronic pain services is supported by multi-disciplinary assessment team(s) and multi-disciplinary pain teams including physiotherapy and psychological therapy support.
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A Chronic Pain Steering Group meeting was held on 22 July 2013 at County Hall, Matlock, to consider the recommendations and, where appropriate, look at how they could be actioned. The steering group comprised representatives from:

- Derby Hospitals NHS Foundation Trust
- Derbyshire Community Health Services NHS Trust
- Derbyshire County Council – Adult Care
- Chesterfield Royal Hospitals NHS Foundation Trust
- NHS Erewash Clinical Commissioning Group
- NHS North Derbyshire Clinical Commissioning Group
- NHS South Derbyshire Clinical Commissioning Group

Responses to the recommendations are provided below and also incorporate responses from those unable to attend the steering group meeting including the Council's Director of Public Health.

Recommendation	Feedback	Action
<p>1. A chronic pain needs assessment should be undertaken in Derbyshire to determine the prevalence and need of chronic pain sufferers. The results of which should be used to inform the planning/reconfiguration of services and ensure resources are being targeted at the right areas.</p>	<ul style="list-style-type: none"> • Whilst there is NICE approved guidance for undertaking Public Health Needs Assessments of a population there is no capacity to undertake such a study at the present time. The Council's Public Health service is already committed to a review of all the contracts for public health services in Derbyshire that expire in March 2014. • GPs and providers of pain clinic and pain related services already hold a lot of epidemiological information on the needs/requirements of patients with regards to their condition which could be used more effectively by commissioners and providers. 	<ul style="list-style-type: none"> • Recommendation should be revised to undertake mapping exercise of current provision. • The mapping exercise has been agreed by steering group as suitable way forward. • Purpose being to map existing service provision across all service areas to help identify gaps and areas for improvement.
<p>2. Development and implementation of clear referral guidelines for GPs and other Primary Care Professionals.</p>	<ul style="list-style-type: none"> • Steering group highlighted the implications of only having referral guidelines. Referral to another service should not be seen as the default position as it will not always be appropriate for an individual. • Any guidelines should advise on all possible options available that would be appropriate to a patient. • The Steering Group were mindful that the British Pain Society has been developing a series of 'pain pathways' for use by commissioners and providers, particularly in primary care settings, for assisting in the management of pain conditions. Their aim is to have these incorporated into a future NHS Quality Outcomes Framework for use by clinicians and commissioners. The first five pathways have now been published. 	<ul style="list-style-type: none"> • Suggested that this be re-worded to "...<i>clear <u>management guidelines</u></i>..." • Guidelines should be developed following completion of mapping exercise and in conjunction with British Pain Society pathways.

Recommendation	Feedback	Action
3. Improve the quality of public information to include details on signposting who can help, where to go, and on how to cope with living with chronic-pain – promotion of existing self-help guides e.g. The Pain Toolkit.	<ul style="list-style-type: none"> • A portal of information available to public and professionals would be helpful but would have to provide 	<ul style="list-style-type: none"> • To be developed following outcome of mapping exercise.
4. Consideration should be given to the commissioning of community based services to reach more rural areas and vulnerable people subject to outcome of the needs assessment.	<ul style="list-style-type: none"> • Steering group felt that the mapping exercise for service provision would aid in highlighting where service provision could be lacking. This would have to be compared with location of existing service users. 	<ul style="list-style-type: none"> • To be considered following outcome of mapping exercise.
5. Ensure that access to chronic pain services is supported by multi-disciplinary assessment team(s) and multi-disciplinary pain teams including physiotherapy and psychological therapy support.	<ul style="list-style-type: none"> • The Steering Group are supportive of this approach but recognise that it requires re-commissioning to plan this type of service model. • Consideration would also have to be taken into account for patients who access services from providers outside of Derbyshire. • As with previous recommendations the results of the mapping exercise 	<ul style="list-style-type: none"> • To be considered following outcome of mapping exercise.

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**IMPROVEMENT AND SCRUTINY REVIEW CARE PLANNING AT ADMISSION
TO ACUTE TRUSTS – UPDATE**

Information

A review of Care Planning at Admission to Acute Trusts was originally proposed by the former Improvement and Scrutiny Committee – People in 2012. The Health Improvement and Scrutiny Committee agreed to continue the review at its first meeting on 15 July 2013, and established a Member Working Group to undertake the review. The working group met on 5 August 2013 and, on revisiting the scope of the review felt that it was too broad and lacked a clear focus.

In order to progress a review in this area, views have been sought from the Derbyshire Clinical Commissioning Groups and also the Council's Adult Care Service. The overwhelming response has been that a review should continue and that it should look at the whole pathway of admission through to hospital discharge to support in the community.

It is therefore proposed that, instead of task and finish based review, the working group host a summit meeting of local commissioners and providers of health and social care services to ascertain what is being done locally to reduce hospital lengths of stay (acute and community hospitals) and the number of delayed transfers of care with a particular focus on frail and elderly people.

The summit will also consider the wider topic of how people are entering the acute system and whether that is an appropriate environment for them to be in. In essence this will focus more on the role of local health services to ensure that people are accessing the right services for their needs.

It is proposed to hold the summit in late October and so will, therefore, be a useful opportunity to scrutinise plans on winter preparedness in relation to this topic. A follow-up summit could be held in late spring or early summer 2014 to look at how services fared during the winter period.

The period in the build-up to the summit will be used to collect data to inform the working group of lines of inquiry which will help shape the focus of the summit.

Health Improvement and Scrutiny Committee: Work programme 2013-14

Agenda Item 8c

Meeting	Issue	Member/Officer
2 September 2013	Foundation Trust Update – Derbyshire Community Health Services NHS Trust	Tracy Allen, <i>Chief Executive</i> Dr Ben Lobo, <i>Medical Director</i> Jo Hurst, <i>Deputy Chief Nurse</i>
	5 Year Financial Plan	Peter Handford, <i>Director of Finance</i>
	Tier 4 Psychological Therapy Services Update	David Gardner, <i>Assistant Director Procurement and Commissioning, NHS Hardwick CCG</i>
	Healthwatch Derbyshire standing item	Jas Dosanjh, <i>Community Involvement Worker</i>
	Work Programme Report: a. Chronic Pain Service review Update b. Hospital Discharge review Update c. Work Programme timetable 2013/14	Councillor Sean Bambrick, <i>Chair I&S Health</i>
4 November 2013	5 Year Financial Plan	Anne Western, <i>Council Leader and Cabinet Member for Strategic Policy & Budget</i> , Peter Handford, <i>Director of Finance</i>
	Integrated Care Proposals	TBC
	Public Health Services Procurement Programme	TBC
	Healthwatch Derbyshire standing item	Jas Dosanjh, <i>Community Involvement Worker</i>
	Work Programme Report a. Work programme timetable 2013/14	Councillor Sean Bambrick, <i>Chair I&S Health</i>
20 January 2014	Healthwatch Derbyshire standing item	Jas Dosanjh, <i>Community Involvement Worker</i>
	Work Programme Report a. Work programme timetable 2013/14	Councillor Sean Bambrick, <i>Chair I&S Health</i>
24 March 2014	Public Health Services Procurement Programme	TBC
	Healthwatch Derbyshire standing item	Jas Dosanjh, <i>Community Involvement Worker</i>
	Work Programme Report a. Work programme timetable 2013/14	Councillor Sean Bambrick, <i>Chair I&S Health</i>