

Item 6: Proposal to establish informal HOSC liaison groups.

By: Paul Wickenden, Overview, Scrutiny and Localism Manager

To: Health Overview and Scrutiny Committee – 25 March 2011

Subject: Proposal to establish informal HOSC liaison groups

1. Introduction.

- (a) Members of the Health Overview and Scrutiny Committee have expressed the view that there is a need to receive more information on a regular basis concerning matters relating to the planning, provision and operation of health services in Kent. Meetings of the Committee have tended to focus on looking at one or more subjects in depth in order, and there needs to be a process of prioritisation to determine which topics are selected for consideration in a formal meeting.
- (b) One way of realising this twin challenge of deepening Members' understanding of health services in Kent and improving the process of prioritisation is potentially through the establishment of informal HOSC liaison groups.
- (c) There are a number of ways in which these groups could work, but one suggested way is that a particular Member of the Committee volunteer to lead one of the groups and, with one or two others, meet up with representatives from the major providers of healthcare in Kent and Medway 2-4 times each year for an informal update about issues relating to that specific Trust. The lead Member would then take responsibility for providing occasional updates to the rest of the Committee. It may be possible that the other Members of the groups will be drawn from outside of HOSC.
- (d) Once Members have expressed an interest, the relevant Trusts will then be contacted to see if they would be willing to participate. It is suggested that the following trusts be contacted:
- Dartford and Gravesham NHS Trust
 - East Kent Hospitals NHS University Foundation Trust
 - Kent and Medway NHS and Social care Partnership Trust
 - Kent Community Health NHS Trust (as of 1 April 2011)
 - Maidstone and Tunbridge Wells NHS Trust
 - Medway NHS Foundation Trust
 - South East Coast Ambulance Service NHS Foundation Trust
- (e) It would be more appropriate if the Members involved in a group relating to a specific Trust had no current formal relationship with that Trust.
- (f) One possible role for these groups will be to contribute to the development of the annual Quality Accounts that provider Trusts are

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required to produce. Further information of the Quality Accounts is set out in the next section.

2. Quality Accounts

- (a) The requirement to produce Quality Accounts formed part of the Health Act 2009 and the first statutory ones were produced in June 2010. The requirement currently only applies to larger providers of NHS services, excluding primary care and continuing care services. This may change in the future and community health services will be included for the first time in 2011/12.
- (b) The main purpose of Quality Accounts is “is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer.”¹
- (c) There are some mandatory parts to a Quality Account and others that may be determined locally. The following must be included:
 - A statement from the Board on the quality of NHS services provided.
 - Priorities for quality improvement within the organisation in the coming year.
 - A series of statements as set out in regulations.
 - A review of the quality of services within the organisation.
- (d) Organisations producing Quality Accounts are required to send copies to the appropriate HOSC, LINK and Primary Care Trust for comment prior to publication and these comments are for inclusion in the published version (up to 1000 words are allowed for the HOSC comment). HOSCs are not required to make comments.
- (e) The number of Trusts in Kent and the limited time allowed by the process to produce comments has meant this has not been possible in the past.

3. Recommendations

- (a) Members of the Committee are asked to approve the establishment of informal HOSC liaison groups and express their views if they wish to lead or be part of a particular group.
- (b) Members are asked to delegate authority to the Head of Democratic Services in consultation with the Chairman to invite local district/borough Councillors to be part of these liaison groups where there are vacancies.

¹ Department of Health, *Quality Accounts Toolkit 2010/11*, December 2010, p.8, http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_122540.pdf