

Policy and Scrutiny Scoping Document

| Committee | HEALTH OVERVIEW & SCRUTINY | | | | |
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| Торіс | WEST ESSEX HEALTH SERVICES Ref:HOSC-SCR- SCRUTINY 02 | | | | |
| Objective | To review the way in which the West Essex PCT plans for and commissions services to meet projected changes in demands and the impact of reconfiguration or change in provision. | | | | |
| Reasons for undertaking review | Concerns had been raised by the Health Overview & Scrutiny Committee regarding the provision of GP services in West Essex relating to housing growth, development and capacity, particularly in light of a recent closure of a branch surgery and proposal to relocate a surgery. The funding situation had also been raised as an issue with a 2% year on year growth in population, but with delays for the funding to follow the patient, putting a strain on resources. | | | | |
| | At the meeting of the Health Overview & Scrutiny Committee held on 2 April 2008, the Chairman proposed a review to look at the strategic commissioning of primary care services, particularly in light of housing growth, development and capacity to ensure robust plans and infrastructure are in place. The proposal was agreed by the Committee. | | | | |



| Method Initial briefing to define scope Task & Finish Group Commission | The Review will be undertaken by a Task & Finish Group as agreed at the meeting of the Health Overview & Scrutiny Committee on 2 April 2008. The PCT to be invited to provide the following information to the Group's first meeting: | | | |
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| • Full Committee | How the PCT is funded | | | |
| - 1 un communec | Amount per capita | | | |
| | Comparison with other parts of the country | | | |
| | How growth is funded | | | |
| | How the cake is currently sliced | | | |
| | Who commissions and who provides | | | |
| | Current and future role of Practise Based Commissioning | | | |
| | Cross border health flows | | | |
| | A series of meetings will be held as outlined in the Work Programme section of this document to consider the issues to be addressed and develop findings and recommendations to go into the final report. | | | |
| | The final report will be submitted to the Health Overview & Scrutiny Committee to be ratified and then sent to the PCT for a full response to the recommendations and proposed actions. | | | |
| Membership Only complete if Task and Finish Group or Commission | R Gooding (Chairman) E Godwin (Co-opted Uttlesford District Council Member) E Johnson J Whitehouse - TBC (Epping Forest District Council) A Naylor | | | |
| | Consideration to be given to co-opting a patient representative as voting or non-voting member of the group. | | | |
| Issues to be addressed | Building on the foundation provided by the background information the Group to investigate, develop findings and recommendations as to how the PCT plans and commissions to meet the following: | | | |
| | Population growth New housing Immigration Changes to services Reconfiguration, including the Darzi and East of England SHA reviews Retirements & closures of GP surgeries, dental practises (including removal of NHS lists) Changes in health needs Demographics – age, numbers of single person dwellings Health map Health Inequalities LAA targets Partnership working & pooled budgets How the PCT engages with the public over potential service changes | | | |

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| | Pre-consultation engagement on options Formal consultation | | | | |
| | Identification of best practice | | | | |
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| Sources of Evidence and witnesses | PCT representatives & nominees Local Medical Committee and individual GPs Royal College of Nursing, Amicus ECC Adult Care, Health & Wellbeing Service; Schools Childrens & Families; Highways & transport District Councils Voluntary Sector LINk | | | | |
| | A letter to be sent to potential witnesses and a press release issued inviting interested groups and members of the public to provide oral and/or written evidence. The letter to include a Guide to Providing Evidence document. All sessions, other than briefing and planning meeting, to be "hearings in public" not public meetings. | | | | |
| Work Programme | 1st meeting in mid September PCT requested to provide background papers - at this stage the focus to be on funding and roles rather planning for | | | | |
| | changes in service Officer review of the papers to provide a briefing note and suggested lines of questioning Briefing and planning meeting in private for the Group either the day before or immediately before the first public meeting. The meeting to consider what other information the Group will require, visits etc before moving into formal evidence sessions A formal list of questions to be developed to address the | | | | |
| | issues 2 nd meeting October | | | | |
| | PCT to respond to the initial list of questions arising from 1st meeting | | | | |
| | PCT to consult with the Group on their new strategies | | | | |
| | 3rd meeting late October Witnesses session Group to identify any additional issues to be addressed by the PCT | | | | |
| | 4th meeting early November PCT to respond to issues from witness session – separation of this from the witness session to make it clear that the PCT is responding to the Group rather than members of the public/organisations Group develop findings and recommendations for Governance Officer to include in a draft report | | | | |
| | 5th meeting end NovemberGroup review draft report | | | | |

| Indicators of Success | The Group will produce a report with findings and recommendations on the future planning and commissioning of health services in West Essex. Success will be demonstrated through the response of the PCT to that report with clear actions and outcomes. Success will also be demonstrated by the response of the Health Overview & Scrutiny Committee to the Review and any recommendations to extend the Review to other PCTs within the county of Essex. | | | | |
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| Meeting the CfPS Objectives Critical Friend Challenge to Executive Reflect Public voice and concerns Own the scrutiny process Impact on service delivery | Reflect Public Voice & Concerns – Analysis of the way in which West Essex PCT engages with the public over proposed service changes. Inviting Members of the public to provide oral or written evidence to the review. Impact on service delivery - Consideration of the provision of health services to patients living in West Essex and the effects of changes to services and changes in health needs. Developing recommendations for future planning and commissioning of services. | | | | |
| Date agreed by Committee | Wednesday 2 April 2008. | | | | |
| Future Action | The Chairman of the Group to have a preliminary meeting with the Chief Executive of West Essex Primary Care Trust – July 2008. | | | | |
| Governance Officer | David Moses, Head of Member Support & Governance | Committee Officer | Sophie Campion | | |
| Service Lead Officer(s) | West Essex Primary Care Trust Adults, Health & Community Wellbeing, ECC Schools, Children & Families, ECC Highways & Transportation, ECC | | | | |