

# **Health Scrutiny Committee**

**12 February 2007** 

Report of the Head of Civic, Democratic and Legal Services

# Annual Health Check 2006/2007

## **Summary**

1. This report is to ask members to consider how they wish to respond to the Healthcare Commission's annual health check process in 2007

### **Background**

- 2. The Healthcare Commission is an independent body which is responsible for assessing and reporting on the performance of NHS and other healthcare organisations.
- 3. In 2005/6 they introduced a new system of assessment for the NHS – the annual heath check. This looks at a broader range of performance than the previous system of star ratings. A key part of the annual health check is the rating of every NHS organisation on quality of services and use of resources. The aim is to ensure that healthcare organisations offer high quality services as well as value for money.
- 4. The first year of the annual health check concentrated on ensuring that basic core standards were being met. This will continue into year two but with an increasing focus on whether NHS bodies are driving improvement in the commissioning and delivery of healthcare.
- 5. To demonstrate achievement of the core standards NHS trust boards are required to make a self assessment and a public declaration on the extent to which they consider that they have met the standards. These declarations can be supplemented by third party comments from partners in the community such as local authority overview and scrutiny committees (OSCs). These are considered to be important as they substantiate the self-assessments and ensure that different perspectives are included in the returns. OSCs can provide important feedback

to the Healthcare Commission from communities and their elected representatives that can help develop understanding as to how the trusts are performing. Also third party commentaries help the commission to ensure that trusts are putting patients and the public at the heart of everything they do.

- 6. The former Social Services and Health Scrutiny Committee participated in the first health check in 2005/6. In order to prepare for this the Committee held an informal seminar in October 2005 with the Patient and Public Involvement Forums and representatives of the NHS Trusts. The Trusts were asked to discuss their draft declarations and then Committee members held a formal meeting to agree which of the core standards they wished to comment on.
- 7. There will be no draft declaration for 2006/7 and final declarations will be due by the end of April 2007. There is a briefing event to be held between the time of writing and the meeting on 12 February to which representatives of this Committee have been invited and which will provide further information on the process.

#### Consultation

8. Considerable consultation and co-ordination with the relevant NHS Trusts will be required to make the contribution of the Health Scrutiny Committee.

### **Options**

9. Members are asked to consider whether they wish to make a commentary on the Annual Healthcheck of the three NHS Trusts. If so, and in view of the short timescales involved, would they be prepared to delegate the preparation of this to the Chairman and one or more representatives of the Committee, in conjunction with the Scrutiny Officer, as necessary.

### **Analysis**

10. If members do provide evidence-based information about how patients and the public are experiencing NHS services it will form a valuable contribution to the self-assessment. OSCs are invited to comment because the Healthcare Commission recognise that information collected in Scrutiny reviews and through discussions between Health OSCs and NHS Trusts about the planning and development of health services can provide a view of patient and public experience that cannot be collected from anywhere else.

11. There is only one more scheduled formal meeting of the Health Scrutiny Committee before the contributions to the declarations will need to be sent to the NHS Trusts. Because of the ongoing work on the effects of North Yorkshire and York PCT's financial recovery plan members have an extremely high workload which is likely to extend into the next municipal year.

## **Corporate Priorities**

12. Relevant to Corporate Priority 7 – Improve the health and lifestyles of the people who live in York, in particular among groups whose levels of health are the poorest.

## **Implications**

13. There are no known Financial, HR, Equalities, Legal, Crime and Disorder, IT or other implications at this stage.

# **Risk Management**

14. In compliance with the Councils risk management strategy.

There are no risks associated with the recommendations of this report.

#### Recommendations

15. Members are asked to delegate to the Chairman and one or more other members of the Committee the task of creating a commentary on the declarations of any of the NHS Trusts that they feel appropriate, with a view to reporting back to a future meeting of this Committee.

Reason: In order to carry out their duty to promote the health needs of the people they represent.

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Specialist Implications Officer(s)	None
Wards Affected:	All $\sqrt{}$
For further information please contact the author of the report	
Annexes	
None	
Background Papers None	