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Meeting	Health Overview and Scrutiny Committee
Date	3 October 2013
<b>Subject</b>	<b>NHS Health Checks Scrutiny Review</b>
Report of	Scrutiny Office
Summary	This report provides the Committee with an update on the joint Barnet / Harrow NHS Health Checks Scrutiny Review.

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Officer Contributors	Andrew Charlwood, Overview and Scrutiny Manager
Status (public or exempt)	Public
Wards Affected	All
Key Decision	N/A
Reason for urgency / exemption from call-in	N/A
Function of	Health Overview and Scrutiny Committee
Enclosures	Appendix A – Barnet / Harrow NHS Health Checks Scrutiny Review Project Plan
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## **1. RECOMMENDATIONS**

- 1.1 The Committee note the Barnet / Harrow NHS Health Checks Scrutiny Review Project Plan attached as Appendix A to this report and make appropriate comments and/or recommendations to refer to the Member Working Group.**

## **2. RELEVANT PREVIOUS DECISIONS**

- 2.1 None.

## **3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS**

- 3.1 The Overview and Scrutiny Committees must ensure that the work of Scrutiny is reflective of the Council's priorities.
- 3.2 The three priority outcomes set out in the 2013 – 2016 Corporate Plan are: –
- Promote responsible growth, development and success across the borough;
  - Support families and individuals that need it – promoting independence, learning and well-being; and
  - Improve the satisfaction of residents and businesses with the London Borough of Barnet as a place to live, work and study.
- 3.3 In relation to the **NHS Health Checks Task and Finish Group**, the following outcomes and targets are relevant to the work of the Group:

“To sustain a strong partnership with the local NHS, so that families and individuals can maintain and improve their physical and mental health; and

“We will work with the local NHS to encourage people to keep well by increasing the availability of health and lifestyle checks for those aged between 40 and 74, and promoting better use of green space and leisure facilities to increase physical activity.”

“Increase the number of eligible people who receive an NHS Health Check to 7,200”

## **4. RISK MANAGEMENT ISSUES**

- 4.1 As set out in the attached Project Plan, it is intended to commission an external facilitator to engage with residents and patients as part of the review process. Detailed costings for this activity will be developed as part of the Consultation Plan. Funding for this engagement activity will be drawn from the existing Public Health budget and procurement of the external facilitator will be in compliance with the Contract Procedure Rules.
- 4.2 As part of the bid to the Centre for Public Scrutiny, the review will be receiving five days of Expert Advisor support. Funding for the Expert Advisor will be provided by the Centre for Public Scrutiny who are in turn being funded by the

## **5. EQUALITIES AND DIVERSITY ISSUES**

- 5.1 Equality and diversity issues are a mandatory consideration in decision-making in the council pursuant to the Equality Act 2010. This means the council and all other organisations acting on its behalf must have due regard to the equality duties when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.
- 5.2 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the role of the Committee is to perform the Overview and Scrutiny role in relation to:
- The Council's leadership role in relation to diversity and inclusiveness; and
  - The fulfilment of the Council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.

## **6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)**

- 6.1 None in the context of this report.

## **7. LEGAL ISSUES**

- 7.1 Section 244 of the National Health Service Act 2006 and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013/218; Part 4 Health Scrutiny by Local Authorities provides for the establishment of Health Overview and Scrutiny Committees by local authorities.
- 7.2 Health and Social Care Act 2012, Section 12 – introduces section 2B to the NHS Act 2006 which imposes a new target duty on the local authority to take such steps as it considers appropriate for improving the health of people in its area.

## **8. CONSTITUTIONAL POWERS (Relevant section from the Constitution, Key/Non-Key Decision)**

- 8.1 The scope of the Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Council's Constitution.
- 8.2 The Terms of Reference of the Scrutiny Committees are included in the Overview and Scrutiny Procedure Rules (Part 4 of the Council's Constitution).

The Health Overview and Scrutiny Committee has within its terms of reference responsibility:

- i) To perform the overview and scrutiny role in relation to health issues which impact upon the residents of the London Borough of Barnet and the functions services and activities of the National Health Service (NHS) and NHS bodies located within the London Borough of Barnet and in other areas.
- ii) To make reports and recommendations to the Executive, Health and Well-Being Board and/or other relevant authorities on health issues which affect or may affect the borough and its residents.
- iii) To receive, consider and respond to reports and consultations from the NHS Commissioning Board, Barnet Clinical Commissioning Group, Barnet Health and Well-Being Board and/or other health bodies.

## **9. BACKGROUND INFORMATION**

9.1 In April 2013, the Centre for Public Scrutiny (CfPS) launched a programme to support local authority scrutiny functions to review their local approach to NHS Health Check and improve take up. A bid for support was made by the London Boroughs of Barnet and Harrow (who have a shared Public Health function) and the bid was successful. Work on this project will take place between June and November 2013. This project will be managed by scrutiny officers from Barnet and Harrow and will link directly to each council's overview and scrutiny committees. Support for the project will primarily be provided a CfPS Expert Adviser and the Joint Director for Public Health. In accepting the support offer, Barnet and Harrow have committed to the following:

- Completing the review by November 2013
- Using the CfPS Return on Investment (ROI) model
- Participate in Knowledge Hub online discussions
- Keep an action log which will be utilised to co-produce a case study
- Participate in Action Learning Events

9.2 NHS Health Checks are a mandatory service which local authority public health functions have been required to deliver from 1 April 2013. Participation in the CfPS Health Checks programme provides both Barnet and Harrow with an opportunity to:

- Review previous performance;
- Consider the budget envelope, planned approach and commissioning strategy for both authorities;
- Utilise the support of an independent expert advisor;
- Enable engagement with commissioners, health service professionals (particularly GPs) and service users to understand perceptions of Health Checks;

- Enable Scrutiny Members to assist health and wellbeing boards, clinical commissioning groups and the Director of Public Health to develop the strategic approach Health Checks; and
- Identify the potential impact of improved uptake of the Health Checks by applying the CfPS ROI model to the review.

9.3 The Task and Finish Group review is seeking to:

- Identify ways in which NHS Health Checks can be promoted within each borough under the leadership of the Joint Director of Public Health;
- Explore the extent to which NHS services promote the NHS Health Checks to eligible residents;
- Consider the capacity of GPs, local pharmacies or other suitable settings to undertake Health Checks;
- Determine the extent to which secondary services are available to those who have been identified as having undetected health conditions or identified as being at risk of developing conditions without lifestyle changes;
- Identify examples of best practice from across England to inform the approach of Barnet and Harrow to commissioning and monitoring the NHS Health Checks Programme; and
- Utilise the CfPS ROI model to undertake an analysis of the cost/benefit of the NHS Health Checks Programme. The outcomes from this will influence the review recommendations.
- Explore whether GPs could be organised on a cluster basis to deliver NHS Health Checks in each borough.

9.4 The joint Barnet / Harrow Task and Finish Group met on 18 September 2013 to receive a summary of activity to date, review and agree the project plan, receive the results of a data mapping exercise undertaken by the public health team and to agree the approach to engaging with key stakeholders and residents / patients.

9.5 The Barnet Members of the Task and Finish Group are Councillors Alison Cornelius, Graham Old and Barry Rawlings.

9.6 The Committee will receive a verbal update on any further progress with the review at the meeting.

## 10. LIST OF BACKGROUND PAPERS

10.1 None.

<b>Cleared by Finance (Officer's initials)</b>	<b>JH/AD</b>
<b>Cleared by Legal (Officer's initials)</b>	<b>LC</b>