

	<p style="text-align: center;">Health Overview and Scrutiny Committee</p> <p style="text-align: center;">6 July 2015</p>
<p style="text-align: right;">Title</p>	<p>Healthwatch Barnet Enter and View Reports</p>
<p style="text-align: right;">Report of</p>	<p>Governance Service</p>
<p style="text-align: right;">Wards</p>	<p>All</p>
<p style="text-align: right;">Status</p>	<p>Public</p>
<p style="text-align: right;">Enclosures</p>	<p>Appendix A- The Oaks Enter and View</p> <p>Appendix B – Oakleigh House Enter and View</p> <p>Appendix C - Appendix C -Thames Ward</p>
<p style="text-align: right;">Officer Contact Details</p>	<p>Anita Vukomanovic – Governance Team Leader anita.vukomanovic@barnet.gov.uk – 020 8359 7034</p>

Summary
<p>The reports at Appendix A, B and C provide the Committee with an outline of Enter and View reports conducted by Healthwatch Barnet.</p>
<p>Representatives from Healthwatch Barnet will attend the meeting to respond to questions.</p>

Recommendations
<p>1. That the Committee note the reports and make appropriate comments and/or recommendations to Officers from HealthWatch Barnet.</p>

1. WHY THIS REPORT IS NEEDED

- 1.1 The consideration of Enter and View reports provides the committee with an oversight of the quality, care and safety in residential and health care settings from the view of a lay-person.

2. REASONS FOR RECOMMENDATIONS

- 2.1 The recommendation provides the Committee with the opportunity to highlight issues of interest and concern, and to make recommendations on any arising matters to Healthwatch Barnet.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 Not applicable.

4. POST DECISION IMPLEMENTATION

- 4.1 Any recommendations made by the Committee will be followed up by the Governance Service with Healthwatch Barnet., with any requests for information being disseminated as appropriate.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1 The Overview and Scrutiny Committee must ensure that the work of Scrutiny is reflective of the Council's principles and strategic objectives set out in the Corporate Plan 2015 – 2020.
- 5.2 The strategic objectives set out in the 2015 – 2020 Corporate Plan are: –

The Council, working with local, regional and national partners, will strive to ensure that Barnet is the place:

- Of opportunity, where people can further their quality of life
- Where people are helped to help themselves
- Where responsibility is shared, fairly
- Where services are delivered efficiently to get value for money for the taxpayer

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 The Healthwatch Contract was awarded by Cabinet Resources Committee on 25 February 2013 to CommUNITY Barnet. The Healthwatch contract value is £197,361 per annum. The contract commenced on 1 April 2013 and expires on 31 March 2016; the contract sum received is £592,083. The contract provides for a further extension of up to two years which, if implemented,

would give a total contract value of £986,805.

5.2.2 There are no direct resource implications arising from this report.

5.3 Legal and Constitutional References

5.3.1 Sections 221 to 227 of the Local Government and Public Involvement in Health Act 2007, as amended by Sections 182 to 187 of the Health and Social Care Act 2012, and regulations subsequently issued under these sections, govern the establishment of Healthwatch, its functions and the responsibility of local authorities to commission local Healthwatch.

5.3.2 The Council's Constitution (Responsibility for Functions) sets out the terms of reference of the Health Overview and Scrutiny Committee as having the following responsibilities:

“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.”

“To receive, consider and respond to reports, matters of concern, and consultations from the NHS Barnet, Health and Wellbeing Board, Health Watch and/or other health bodies.”

“To scrutinise and review promotion of effective partnerships between health and social care, and other health partnerships in the public, private and voluntary sectors.

5.4 Risk Management

5.4.1 Healthwatch Barnet has a group of Authorised Representatives. The Representatives are selected through a recruitment and interview process. Reference checks are undertaken. All representatives must complete a Disclosure and Barring Service check. All Authorised Representatives are required to undergo Enter and View and Safeguarding training prior to participating in the programme.

5.4.2 Ceasing to carry out the visits removes the opportunity for an additional level of scrutiny to assure the quality of service provision

5.5 Equalities and Diversity

5.5.1 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the committee should consider:

- 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.

5.3 Equalities and Diversity Equalities and Diversity

5.3.1 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 fulfil its equality duty 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.

5.3.2 The specific duty set out in s149 of the Equality Act is to have due regard to need to:

Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;

Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation. 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.

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5.6 Consultation and Engagement

5.6.1 None.

6 BACKGROUND PAPERS

6.1 None.