

Francis Report

Chapter 6: Patient and Public Local Involvement and Scrutiny Recommendations and Local Implications

No.	Recommendation	Action for the Health Overview and Scrutiny Committee
43	Those charged with oversight and regulatory roles in healthcare should monitor media reports about the organisations for which they have responsibility	Systematic monitoring of local papers by the Health Overview and Scrutiny Committee Support Officer and Committee Members to identify any issues reported
145	There should be a consistent basic structure for local HealthWatch throughout the country, in accordance with the principles set out in Chapter 6: Patient and public local involvement and scrutiny	Committee to determine if an update on Barnet HealthWatch should be reported to 4 July 2013 meeting
146	Local authorities should be required to pass over the centrally provided funds allocated to its Local HealthWatch, whilst requiring the latter to account to it for its stewardship of the money. Transparent respect for the independence of Local HealthWatch should not be allowed to inhibit a responsible local authority – or HealthWatch England as appropriate – intervening.	Committee to determine if an update on Barnet HealthWatch should be reported to 4 July 2013 meeting
147	Guidance should be given to promote the coordination and cooperation between Local HealthWatch, Health and Well-Being Boards, and local government scrutiny committees.	Committee to determine if Barnet should develop an NHS / Scrutiny Protocol which takes into account the new health structure and regulations. Engagement should take place with all stakeholders.
148	The complexities of the health service are such that proper training must be available to the leadership of Local HealthWatch as well as, when the occasion arises, expert advice.	Committee to determine if an update on Barnet HealthWatch should be reported to 4 July 2013 meeting
149	Scrutiny committees should be provided with appropriate support to enable them to carry out their scrutiny role, including easily accessible guidance and benchmarks.	Scrutiny receives support from dedicated support officers, public health and performance as and when requested.

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150	Scrutiny committees should have powers to inspect providers, rather than relying on local patient involve	Committee to determine if informal visits should be scheduled to local wards and care homes to gain a better understanding and overview of the services. This would provide an opportunity to see how wards/homes are working and speak to patients/residents to inform the work of the Committee.
151	MPs are advised to consider adopting some simple system for identifying trends in the complaints and information they receive from constituents. They should also consider whether individual complaints imply concerns of wider significance than the impact on one individual patient.	Committee to determine if they should receive regular complaints data from NHS and Social Care services to identify any trends to inform the work of the Panel.