

REGIONAL HEALTH SCRUTINY UPDATE

Summary

The Committee is requested to consider an update on the work of the regional health scrutiny committees. Some recent health-related developments impacting on the Tees Valley and / or wider North East and North Cumbria footprint are also highlighted.

Detail

Tees Valley Joint Health Scrutiny Committee

1. Stockton-on-Tees Borough Council (SBC) hosted (providing the Chair and support function) this Committee during 2023-2024.
2. The last meeting was held on 15 March 2024 and included the following agenda items:
 - Minutes of the meeting held on 15 December 2023 (see **Appendix 1**) (*note: clarity was sought on what was agreed at the conclusion of agenda item 5 (Office for Health Improvement & Disparities – Community Water Fluoridation), with some Members stating that they supported the consultation recommendation, but not necessarily the stated proposals for the expansion of community water fluoridation across North East*)
 - North East and North Cumbria Integrated Care Board (NENC ICB): Update on Recent Restructure (see **Appendix 2**)
 - Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV): Quality Account 2023-2024
 - North East Ambulance Service NHS Foundation Trust (NEAS): Quality Account 2023-2024

Regarding the TEWV and NEAS items, third-party statements on behalf of the Committee will be collated and shared with Members for comment / approval once the Trusts circulate their draft Quality Account documents.

3. Following a Committee request, an informal briefing on Tees, Esk and Wear Valleys NHS Foundation Trust's (TEWV) use of physical intervention / restraint (a source of previous Member concern) was arranged and took place on 4 March 2024. The Committee heard that the Trust was now seeking to take the least restrictive approach when there was a need for some form of intervention, and that an evidence-based plan was in place with every incident reported in detail.
4. As part of the established rotational arrangements, support of the Committee has transferred to Hartlepool Borough Council for 2024-2025. The first meeting of the new municipal year is still to be confirmed.

Sustainability and Transformation Plan / Integrated Care System Joint Health Scrutiny Committee

5. Following a lengthy hiatus, Durham County Council (who support this Joint Committee) contacted scrutiny teams across the region in November 2022 with the intention of arranging a meeting for late-November / early-December 2022. However, following liaison with senior NENC ICB representatives, it was deemed that in light of the ongoing ICS briefings to the Tees Valley Joint Health Scrutiny Committee, a meeting of this Joint Committee (which involved similar Councillors) was likely to be a duplication and would not add value.
6. In wider regional health matters, NENC ICB continues to provide guidance in relation to staying well and assisting services. Its '*Here to Help this spring*' webpage follows on from similar winter season advice, and promotes a range of advice on:
 - Looking after yourself
 - Think pharmacy first
 - GP practices
 - NHS 111
 - Urgent Treatment Centres
 - A&E and 999
 - Looking after your mental health
 - COVID-19 spring vaccinations

Further details can be found at <https://northeastnorthcumbria.nhs.uk/here-to-help-spring/>.

7. A unique partnership of North East organisations raising awareness of chronic pain (an issue considered by the SBC Adult Social Care and Health Select Committee in February 2023 – see [link](#) for presentation) and supporting those affected in the Tees Valley has been named a gold winner in the highly-acclaimed Health Service Journal's (HSJ) annual Partnership Awards. Thought to affect around 43% of people regionally, chronic pain is more prevalent in the North East than any other part of England and opioid prescription rates in the area are 300% higher than in London. A first-of-its-kind public and private sector collaboration was forged to tackle the issue head on. It aimed to directly reach those living with chronic pain, overcome barriers to physical exercise and challenge outdated perceptions and beliefs relating to pain management and treatment.

Further details can be found at <https://northeastnorthcumbria.nhs.uk/news/posts/north-east-health-campaign-takes-home-gold-at-prestigious-national-awards/>.

8. Developments in relation to urgent care services (a topic considered by the Tees Valley Joint Health Scrutiny Committee during 2023-2024) across Tees Valley were highlighted in February 2024 – see <https://northeastnorthcumbria.nhs.uk/news/posts/nhs-urgent-care-services-in-tees-valley-to-be-jointly-run-by-health-groups/>.

North East Regional Health Scrutiny Committee

9. No meetings are currently scheduled.

IMPORTANT: REMINDER OF CHANGES TO HEALTH SCRUTINY ARRANGEMENTS

10. In early-2024, the Department of Health and Social Care (DHSC) confirmed that the anticipated new health scrutiny arrangements would come into force from 31 January 2024. The main focus of the changes was the removal of the power of health overview and scrutiny committees (HOSCs) to formally refer matters of concern relating to major service reconfiguration to the Secretary of State. Instead, the Secretary of State may act proactively, further to a request that he or she may receive from anyone – although such action will be

subject to consultation with the HOSC, amongst others. Further details can be found at <https://www.cfgs.org.uk/blog-dhsc-confirms-new-health-scrutiny-arrangements-to-start-in-january/>.

11. In order to assist colleagues to meet the challenging deadline for engaging with neighbouring Councils, NHS commissioners and NHS providers to understand how local systems and arrangements will need to change, the Centre for Governance and Scrutiny (CfGS) produced a short guide which can be found at <https://www.cfgs.org.uk/?publication=health-scrutiny-and-the-new-reconfiguration-arrangements>.
12. CfGS hosted a webinar (with DHSC personnel present) on 16 January 2024 where it was stated that the intervention of the Secretary of State would be seen a last resort, with the anticipation that all local mechanisms must first be exhausted as part of efforts to resolve any issues in relation to service reconfiguration. Critically, there would still be a strong expectation that NHS commissioners and providers fully consult with local HOSCs regarding proposals for service change.

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