



Public Document Pack  
**HEALTH IN DACORUM COMMITTEE  
AGENDA**

**Wednesday 9 December 2015 at 7.30 pm**

**DBC Bulbourne Room - Civic Centre**

*Scrutiny making a positive difference: Member led and independent, Overview & Scrutiny Committee promote service improvements, influence policy development & hold Executive to account for the benefit of the Community of Dacorum.*

The Councillors listed below are requested to attend the above meeting, on the day and at the time and place stated, to consider the business set out in this agenda.

**Membership**

Councillor Brown  
Councillor Guest  
Councillor Hicks  
Councillor Maddern

Councillor McLean  
Councillor Timmis  
Councillor W Wyatt-Lowe

**Outside Representatives:**

Dacorum Hospital Action Group: B Harris  
Patients' Forum: Tony Gallagher, R Trigger

**Contributors:**

Herts Valleys Clinical Commissioning Group: Dr Trevor Fernandes/ Dr Keith Hodge  
West Herts Hospitals Trust Care Quality Commission Inspection: Helen Brown (Director of Strategy and Corporate Services West Hertfordshire Hospital NHS Trust)  
West Hertfordshire Strategic Review: David Radbourn and Simon Eckett  
Get, Set, Go Dacorum: Claire Lynch and Emily-Rae Maxwell  
HCC Health Scrutiny Update: Councillor Guest  
Hertfordshire County Council Health Localism/ Health Wellbeing Board Update: Councillor W Wyatt-Lowe

For further information, please contact: Louise Collins, Member Support Officer on tel: 01442 228633

# AGENDA

## 1. MINUTES

To confirm the minutes of the meeting held on 9 September 2015.

<https://democracy.dacorum.gov.uk/ieListDocuments.aspx?CId=161&MId=249>

## 2. APOLOGIES FOR ABSENCE

To receive any apologies for absence

## 3. DECLARATIONS OF INTEREST

To receive any declarations of interest

A member with a disclosable pecuniary interest or a personal interest in a matter who attends a meeting of the authority at which the matter is considered -

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent

and, if the interest is a disclosable pecuniary interest, or a personal interest which is also prejudicial

- (ii) may not participate in any discussion or vote on the matter (and must withdraw to the public seating area) unless they have been granted a dispensation.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Members' Register of Interests, or is not the subject of a pending notification, must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal and prejudicial interests are defined in Part 2 of the Code of Conduct For Members

[If a member is in any doubt as to whether they have an interest which should be declared they should seek the advice of the Monitoring Officer before the start of the meeting]

## 4. PUBLIC PARTICIPATION

An opportunity for members of the public to make statements or ask questions in accordance with the rules as to public participation

## 5. WARD ISSUES FROM OTHER COUNCILLORS

Councillors have been invited to raise any issues within their ward.

**6. WEST HERTS HOSPITALS TRUST CARE QUALITY COMMISSION INSPECTION**

Helen Brown, Director of Strategy and Corporate Services (West Hertfordshire Hospitals NHS Trust) to provide an update on the Care Quality Commission Inspection Report

**7. WEST HERTFORDSHIRE STRATEGIC REVIEW (Pages 4 - 26)**

David Radbourne and Simon Eckett to provide Members with an update on the West Hertfordshire strategic review – “Your Care, Your Future” and the proposed next steps

**8. GET, SET, GO DACORUM (Pages 27 - 28)**

**9. HERTS VALLEYS CLINICAL COMMISSIONING GROUP UPDATE**

Dr Trevor Fernandes to provide Members with a Herts Valleys Clinical Conditioning Update update since the last meeting held on 9 September 2015.

**10. HERTFORDSHIRE COUNTY COUNCIL HEALTH LOCALISM/HEALTH WELLBEING BOARD UPDATE**

Councillor W Wyatt-Lowe to provide Members with an update since the last meeting

**11. HERTFORDSHIRE COUNTY COUNCIL HEALTH SCRUTINY UPDATE (Pages 29 - 30)**

**12. DATE OF THE NEXT MEETING**

The next meeting will be held on Wednesday 9 March 2016.

**13. EXCLUSION OF THE PUBLIC**

To consider passing a resolution in the following terms:

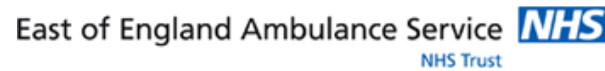
That, under s.100A (4) of the Local Government Act 1972 Schedule 12A Part 1 as amended by the Local Government (Access to Information) (Variation) Order 2006 the public be excluded during the item in Part II of the Agenda for this meeting, because it is likely, in view of the nature of the business to be transacted, that if members of the public were present, during this item there would be disclosure to them of exempt information relating to:

**14. HEALTH IN DACORUM WORK PROGRAMME 2015/16 (Page 31)**



# Update to Dacorum Health Committee

9<sup>th</sup> December 2015





# Our vision

*Our vision is that people are healthier; we want to prevent people from becoming ill in the first place. We want people to get the care they need in the right place - often close to where they live - at the right time. More joined up community health and social care services will help people stay well and get the support they need. It will also help us live within our means.*



# Key objectives

- Progress update
- New vision for health and care in West Herts
- Next steps



# *Your Care, Your Future*

The review has been addressing the following four questions:

1 How well (how effectively and efficiently) are patients' needs met by the current health and social care system across West Hertfordshire?

2 What are the opportunities to meet future health and social care needs of the West Hertfordshire population more effectively and efficiently?

3 How should health and social care services across West Hertfordshire be configured to realise these opportunities?

4 What organisational form(s) and commissioning/contracting model(s) best support the deliver of the preferred future configuration of services?

# What we have heard

## Key themes that emerged from extensive stakeholder engagement to date include:

- ✓ More effective prevention to support people to stay well
- ✓ More patient-centred care and care closer to home;
- ✓ Better access to services, particularly primary care;
- ✓ Better signposting to services and services being more joined-up;
- ✓ Making efficient use of facilities and estates; and
- ✓ Better community care for older people.

Page 8



Working together for a healthier West Hertfordshire

The case for change







## And we've listened...

- Our vision is to ensure more people can access the care and support they need in their own community, rather than travel to hospital unnecessarily.
- By 2024 we would like 40% of current hospital trips shifted to a community setting.
- Patients' experience and the quality of care they receive will be better. We also want to ensure care is joined-up and better co-ordinated.

**“We must challenge the status quo. Our health and social care services must be organised around patients' needs. We need to remove the boundaries between GPs, community based staff such as pharmacists, hospital doctors and the social care workforce.”**

*Geoff Brown, Chief Executive of Healthwatch Hertfordshire*

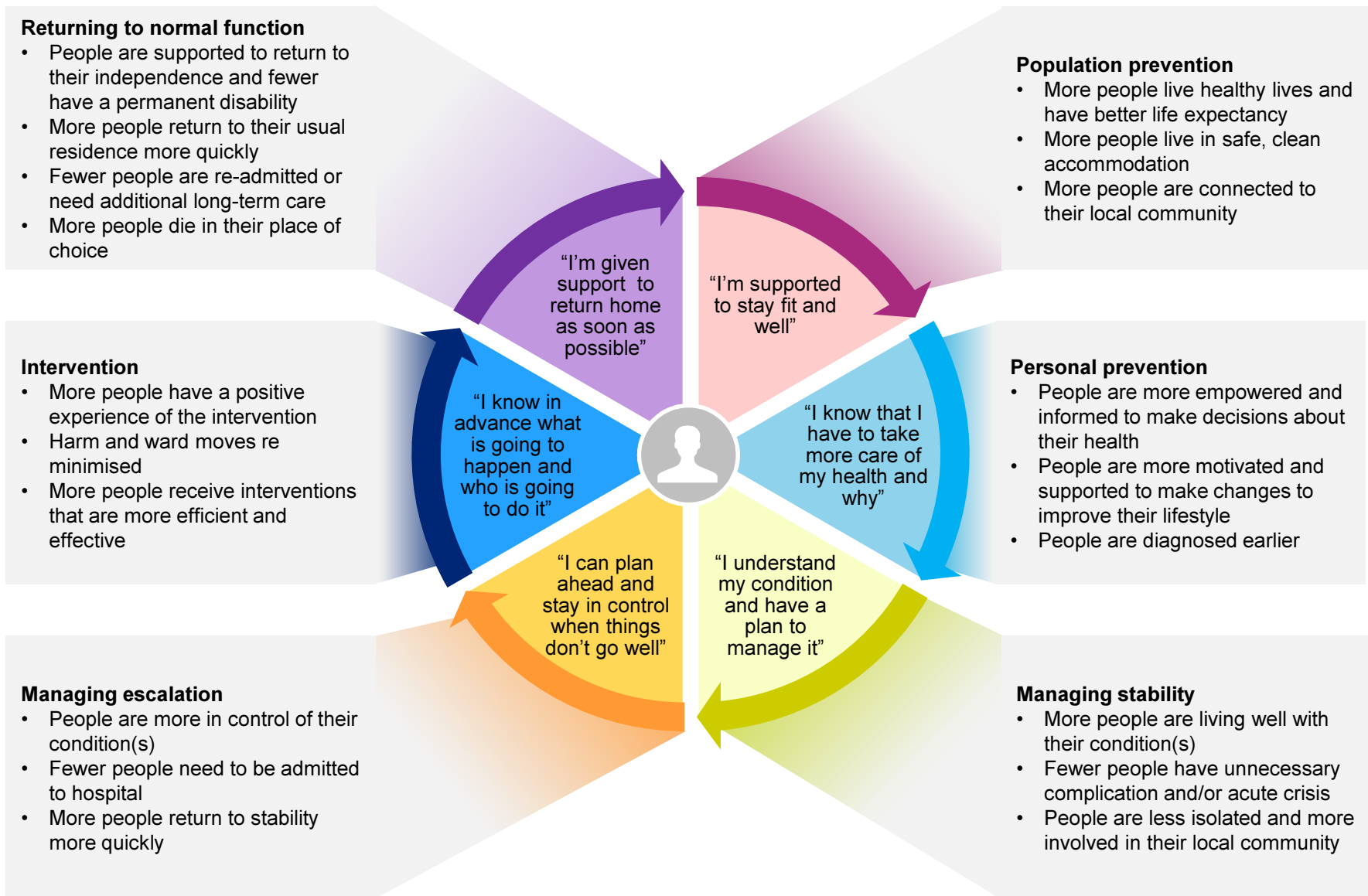
**“Expanding care closer to where people live will mean high quality and safer services for local people. People will experience more joined up care as local providers will work together in a network of health, social care, wellbeing and community services, reducing the need for people to travel to hospital.”**

*Dr Michael Van der Watt, Consultant Cardiologist, West Hertfordshire Hospitals NHS Trust*



# Outcomes

*This will ensure improvements in patient's experience, quality and safety of care*



# Strategic Outline Case

- Future models of care co-designed with hundreds of local clinicians, patients and community representatives
- Strategic Outline Case built on what we've heard from a wide range of stakeholders
- All boards met on 23 October to consider the Strategic Outline Case as the framework for service transformation over coming years.
- The website has been updated to promote the vision for the future
- Individual boards have met to adopt the Strategic Outline Case



Your Care, Your Future  
Working together for a healthier West Herts

Hertfordshire  
Organisations in West Hertfordshire

NHS  
Organisations in West Hertfordshire

Improving health and social  
care in West Hertfordshire  
A new vision for the future

Autumn  
2015



# Implementing the proposals in Dacorum

- Agreed to take forward the development of a network of care and 'hub (s)' that delivers better outcomes and more support closer to home across Dacorum
- Kick off a stakeholder design and delivery forum – January, learning from Borehamwood
- It will define the route map for what we can do in the short term, using opportunities such as the marlowes development during 2016 and roll out of rapid response as well as planning for the longer term e.g commercial feasibility and design of the hemel hub



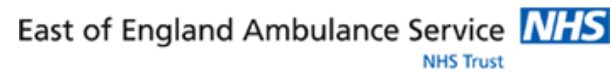


## Next Steps

- Refreshing programme governance to best enable implementation and factor into 2016+ commissioning plans
- On-going engagement with local community, stakeholders, patients and carers on implementing joined-up services closer to people's homes
- Building on best existing services to make improvements quickly
- Developing networks of integrated care, close to home: develop multi-disciplinary implementation teams to design and develop local services relevant to local populations
- Acute care options: work up detailed business case and identify preferred option
- Set up the Dacorum stakeholder design and delivery group
- Build the Dacorum specific road map which will set out improvements in 2016 and subsequent years



Thank you





# Improving health and social care in West Hertfordshire

A new vision for the future

# Foreword



**Dr Nicolas Small**  
Chair - *Your Care, Your Future* Programme

We've reached an important milestone. Following months of work with local people: patient representatives, service users, carers, clinicians, voluntary sector colleagues and other stakeholders, we've developed a new approach to expand local services. This document summarises this new approach.

Change really is needed. Our lifestyles mean that too many of us are living with a health condition that we could have prevented. People are making unnecessary journeys to hospitals, which are already overloaded. Our health and care services face a financial shortfall of millions of pounds and far too many of our buildings are not fit for modern health and social care.

The lack of joined-up care and information-sharing among health and social care professionals is adding

to these pressures, with people's experience and support being affected every day.

***Our vision is that people are healthier – we want to prevent people from becoming ill in the first place. We want people to get the care they need in the right place - often close to where they live - at the right time. More joined up community health and social care services will help people stay well and get the support they need. It will also help us live within our means.***

The feedback we have received is very clear. You've told us that we should focus on preventing ill health, expanding local services and joining up care. Read about our plans on pages 6,7 and 8.

Some people will continue to need expert care in hospital. We need to re-organise the way we provide hospital care and you can read more about this on page 9. There is some excellent care being provided in West Hertfordshire – in our hospitals and our communities - and we thank all the staff for all the great work they do.

There is a considerable amount of work to do to ensure our vision becomes a reality. Thank you for your continued interest and involvement in the review – we really want you to stay involved and help us expand local services.



**Cllr Colette Wyatt-Lowe**  
Chair - Hertfordshire Health and Wellbeing Board and Cabinet Member for Health and Adult Care





# Summary of the vision

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The *Your Care, Your Future* review has a clear purpose - to consider what changes are needed to ensure the people of West Hertfordshire have access to the best possible health and social care services.

To inform the review - and consider what needs to change - we have undertaken extensive engagement work and listened to a range of views from people across the four localities: Dacorum, St Albans & Harpenden, Watford & Three Rivers and Hertsmere.

## Expanding local services

Our vision, based on the extensive feedback we have received, is to ensure more people can access the care and support they need in their own community, rather than travel to hospital unnecessarily.

By 2024 we would like 40% of current hospital trips shifted to a community setting. Patients' experience and the quality of care they receive will be better. We also want to ensure care is joined-up and better co-ordinated.

To deliver this, we will develop health and wellbeing hubs in local communities across West Hertfordshire. Some GP and other primary care services will be available at the hubs. In addition to the health and wellbeing hubs many older and disabled people, and people with dementia and other conditions, will continue to receive the care they need in their own home.

We know we need to improve connections between health and social care services as well as other parts of the community such as public libraries, gyms and services provided by voluntary organisations.

There are many different services available – but too often they are fragmented. We need to make it easier for people to access the care they need.

***“We must challenge the status quo. Our health and social care services must be organised around patients’ needs. We need to remove the boundaries between GPs, community based staff such as pharmacists, hospital doctors and the social care workforce.”***

Geoff Brown, Chief Executive of Healthwatch Hertfordshire



## Acute care at hospital

Acute services in West Hertfordshire have also been considered as part of the overall *Your Care, Your Future* review.

The development of more local care will mean that some services that are currently provided at Watford (or another district general hospital) will be available to patients locally.

Turn to page 9 to find out more about the work going on to consider how we best organise acute hospital care (such as care in an emergency or for a planned operation) in the future.

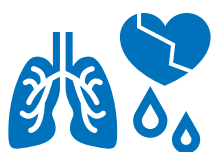
# Introducing Your Care, Your Future

The *Your Care, Your Future* review was launched in November 2014. It involves NHS organisations in West Hertfordshire working together with Hertfordshire County Council to consider how to organise health and social care to best meet the needs of people now and for future years.

Visit: [www.yourcareyourfuture.org.uk](http://www.yourcareyourfuture.org.uk) - for up-to-date information on the review.



## Why is change needed?



About 140,000 people in West Hertfordshire have one or more long term conditions such as diabetes, heart or lung disease



On average, people living in Chorleywood West live 10 years longer than those in Borehamwood



More than 1 in 10 expectant mums in West Hertfordshire smoke during pregnancy



At least 26,000 children in 2012/13 were seen by urgent care or A&E staff but were not admitted to hospital



**£320 million – the estimated gap in required income for health and social care by 2024/25**

There is broad agreement among members of the public and clinicians that leaving health and social care services in West Hertfordshire as they are is not a viable option.

As in other areas across the UK:

- There's a changing population
- More people are living with complex health and social care needs
- We need to agree how we can best live within our means.

# The vision for health and social care services in West Hertfordshire

**Our vision is for people of all ages living in West Hertfordshire to be healthier and have better care that is joined-up and responsive to their individual needs, much closer to where they live.**

**Below is a fictional account of Claire, aged 58, who lives in West Hertfordshire. We have based her story on examples of people's real-life situations.**



## The current situation

Claire has diabetes and heart disease. She has lived well with these long term conditions but has recently lost her job, making her feel depressed and her health has deteriorated. She's had to stay in hospital a couple of times because of urine infections and is finding it hard to juggle all her appointments at the main hospital with the diabetes and heart specialists.

The appointments are on different days of the week and make it hard for Claire to spend time finding a new job. She's also spending money getting to the hospital, which she really can't afford at the moment, which is adding to her pressures.

## In the future: better connected care, closer to home

Claire has diabetes and heart disease, which she manages well with support from a team of specialists she can see at her local health and wellbeing hub. Recently made redundant, Claire started to feel depressed but was able to quickly access advice and support at the hub.

When her diabetes nurse noticed she was developing a urine infection the team were able to respond quickly to stop it getting worse. At the hub, not only does Claire have the support of a 'community navigator' to ensure she has appointments with specialists, she can also

access information about local support groups, volunteering opportunities and education and training, all of which have helped her in her search for a new job.

If Claire needs to be seen for more specialist treatment, or needs to have a planned operation, she is referred by her GP to hospital. Before she is discharged home the hospital team is able to link up with her team at the health and wellbeing hub to ensure appropriate care and support are in place meaning she can get home more quickly.

# Making the new vision a reality

*“I completely support this model. I can’t stress how vital it is that we put prevention at the top of the list when thinking about how services are organised in West Hertfordshire. If we can*

*address ill health and social problems caused by obesity, Type 2 diabetes and mental health we will be giving our children and young people the best start in life.”*

*Dr Keith Hodge, Dacorum GP*

Pages 6, 7 and 8 will explain how we will better connect care and ensure it takes place closer to home, and you can find much more detailed information at [www.yourcareyourfuture.org.uk](http://www.yourcareyourfuture.org.uk).

## Prioritising prevention of ill-health

*On average five or six children in every classroom in Watford are obese and more and more adults are living with long term conditions, such as Type 2 diabetes.*

community organisations to ensure people have the support to stay well. This is what you have told us you want the review to focus on and prevention is therefore the foundation of future health and social care plans in West Hertfordshire.

In many cases, these conditions can be prevented through lifestyle changes. In West Hertfordshire we need to work together – as families and in our communities – to stay well.

By encouraging people to adopt healthy behaviours, for example not smoking, eating a balanced diet and taking regular exercise, we can make a big impact in terms of preventing many illnesses in the first place. New health and wellbeing hubs will provide advice on preventing ill health and work with



# Starting well, living well, ageing well...

## Children and young people

Children will be the focus of future plans and greater emphasis will be placed on ensuring children have the skills they need to stay healthy and well from the earliest age.



***“Supporting young people to lead healthy, happy lives is a key priority for us and we must ensure that early signs of mental ill health are recognised and acted upon. All partners must work together to provide support at the earliest possible opportunity and ensure that young people know where to turn to for help and that the right support is there when they need it.”***

Richard Roberts, Cabinet Member for Children's Services,  
Hertfordshire County Council

## Adults

There will be greater emphasis on physical and mental wellbeing and keeping us all healthy, such as more weight management, exercise or cooking classes being provided in local community settings. It's also important that carers get the help and support they need.

***“Many adults have largely preventable illnesses, such as Type 2 diabetes. There's a strong case for shifting more resources to the community, and utilising the multi professional networks, to ensure fewer people become ill in the first place.”***

Girish Mehta, Chair of Hertfordshire Local  
Pharmaceutical Committee

## Older people

Older people often have multiple long term conditions, as well as complex health and social care needs, and many may also have dementia, so our new approach provides more joined-up services closer to home. Better coordination between services will also be crucial to help minimise hospital stays and to enable those that do need to stay in hospital to get home more quickly.

***“We need a much more joined up approach to care of older people with multiple health conditions. My father in law has been pushed around a totally unconnected system and desperately needs someone to help him navigate it.”***

Member of the public

# Better connected care, closer to home

**We've developed plans for how health and social care should be provided based on these two key principles you've told us are important:**

- You should be able to get most of the care you need close to where you live
- All the organisations involved in your care should be connected to each other and work together so

that people receive joined-up care and don't have to repeat information about themselves all the time.

Expanding and joining up local health, social care, voluntary sector support and other existing local services will help carers, and means we can help people to stay out of hospital, to be healthier and to feel physically and mentally better. Over the page we explain how we plan to do that.

# Better connected care, closer to home



More **care at home**, for example, social care services but also services like speech and language therapy for people who have returned home following a stroke.



**Existing community services** - as well as visiting your GP, pharmacist, dentist or optometrist, some people will need other services such as physiotherapy or community nursing services. We are also keen to ensure more people can easily benefit from the care, advice and support from voluntary organisations and be referred to facilities such as gyms and libraries.

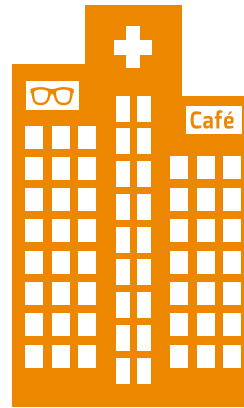


**Hospital care** – sometimes called ‘acute’ care. There will be some services that will need to be provided from a larger centre with specialist teams, skills and equipment. This includes services such as A&E, specialised care for stroke and some cancer treatments, planned surgery and inpatient care, and diagnosis and treatment of complex conditions.

Given the differences between the four localities in West Hertfordshire – and therefore the varying health and social care needs of the different communities – the services in each area will need to be developed to meet those specific needs. We will want ongoing input from local people as the plans start taking shape.

**30% of all outpatient attendances currently delivered in hospitals are expected to shift to health and wellbeing hubs. Hospital and specialist expertise will be available on demand if required.**

## Health and wellbeing hubs



We are planning to develop hubs across West Hertfordshire, and we are currently looking at four initial sites in Elstree, South Oxhey, Hemel Hempstead and Harpenden. The hubs will create a network of services closer to where people live, meaning in many cases people won't have to travel far to get the care they need. Health and social care teams will be based together in the same place to deliver more joined-up care, sharing information and decision making.

The hubs will offer services according to local needs including:

- Health promotion and prevention services, such as stop smoking and weight loss clinics
- Some GP, pharmacy, optometry and dentistry services alongside community and social care
- A range of tests and treatments traditionally offered in hospitals such as x-rays, ultrasound scans, blood tests, physiotherapy services, mental health services, minor surgery, rehabilitation services and outpatient clinics for children
- Health and wellbeing hubs will be able to offer urgent care too, helping to prevent many unnecessary journeys to an A&E department and even prevent hospital admissions
- In some hubs there will also be some community beds for people needing short stays before returning home; also some urgent care services, for example to treat minor injuries
- We would like services to be located or linked with children's centres and voluntary sector organisations. This will help people access information about dance and reading classes, as well as support groups such as those for carers who look after someone with dementia or another condition.

**“Expanding care closer to where people live will mean high quality and safer services for local people. People will experience more joined up care as local providers will work together in a network of health, social care, wellbeing and community services, reducing the need for people to travel to hospital.”**

# Improving hospital services in West Hertfordshire

We need to make changes to the way care is organised in hospitals. Many people are being treated in hospitals across England who would be better cared for in the community. West Hertfordshire is no exception. As this booklet has made clear, we plan to shift some hospital care closer to where people live. To do that - and for the reasons set out here - we need to reorganise hospital care:

- To improve the quality of care
- To ensure better clinical results
- To help the NHS recruit and retain the right staff with the right skills
- To help ensure services are affordable: for example, West Hertfordshire Hospitals NHS Trust has a deficit



## Developing options for the future

Experts have looked carefully at the viable options for providing acute services in the future. Eight options have been considered against the same criteria. You can find more details about the options at [www.yourcareyourfuture.org.uk](http://www.yourcareyourfuture.org.uk)

During September 2015 we tested the options, asking people to help identify the pros and cons for each one. We held meetings with 75 patient representatives, carers and other stakeholders; GPs, medical directors and other clinicians tested clinical and safety issues; and finance directors tested whether the options were affordable. Senior leaders within the County Council and NHS organisations have considered the feedback carefully.

This work has enabled us to shortlist the three highest scoring options. We will continue to test options and we will carry out further detailed analysis in 2016. We will keep an open mind about the best solution. We welcome your feedback on all the options and any other potential scenarios you would like us to consider.

- Option 1 centralise acute and planned care at a new hospital in a central location
- Option 2 centralise acute and planned care at Watford
- Option 3 locating acute care at Watford and planned care at St Albans

***For more information please go to:  
[www.yourcareyourfuture.org.uk](http://www.yourcareyourfuture.org.uk)***

- **See all the options that have been considered**
- **Understand more about the criteria and scoring process we have used to test each option**
- **Read the main pros and cons for the highest scoring options**
- **Give us your views and suggest alternative solutions**

# Next Steps: Delivering better connected services, closer to home

*We want to build on the best services that exist already. Some change can happen over the next few months such as extending the Rapid Response scheme to St Albans; some change is underway but will take longer, such as developing a new urgent care service.*

We will involve people in the design and implementation of expanding local services.

We do not underestimate the scale of the task ahead – and anticipate this will take place over a period of several years. Planning is underway to expand and integrate local services.

We will need to consider which services are required and where they are located. The plans will need to take into account a host of other key factors to ensure successful implementation, including:

**Staff** – not simply numbers of staff, but what mix of skills, professions and/ or volunteers might be needed.

**Buildings and facilities** – many of our buildings are no longer fit for modern healthcare. Change is needed.

**Information management and technology** – connections are about people, but information management and technology - using computers and mobile phones more - will be critical to the success of the proposed integrated approach. It will mean a more seamless approach to people's care.

*To ensure that these plans work for local people, we need to continue to hear from you. A comprehensive programme of information sharing and engagement will continue.*

We envisage that advisory panels comprising community and clinical representatives will be established. If you would like more information please email us at [info@yourcareyourfuture.org.uk](mailto:info@yourcareyourfuture.org.uk)

*We're continuing to engage, and so far we've heard from...*



120+ stakeholder meetings and events



783 public survey responses



120 clinician survey responses



5,705 website users



258 Twitter followers





# How to keep up to date with the review

Thank you to everyone who has contributed to the review so far – your feedback has been extremely valuable.

We want you to remain involved. We will continue to share information with you in your communities so that you can:

- get involved in helping design how services should be organised in your community, and
- share your views on the options for hospital services in West Hertfordshire and any alternative solutions you would like us to consider

To have your say, please email:

[info@yourcareyourfuture.org.uk](mailto:info@yourcareyourfuture.org.uk)

**If you organise a patient or community group and would like a representative of the review team to attend one of your meetings, please contact us by:**

- **Emailing:** [info@yourcareyourfuture.org.uk](mailto:info@yourcareyourfuture.org.uk)
- **Tweeting us:** [@YCYF\\_westHerts](https://twitter.com/YCYF_westHerts)
- **Visiting:** [www.yourcareyourfuture.org.uk](http://www.yourcareyourfuture.org.uk)

Alternatively, call Healthwatch Hertfordshire on **01707 275978** to speak to someone about your experiences of health and social care in West Hertfordshire.

If you would like to receive a copy of this report in another format or language or have any other questions about the review, please contact us at:

[info@yourcareyourfuture.org.uk](mailto:info@yourcareyourfuture.org.uk)

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Na życzenie klienta niniejszy dokument dostępny jest także w języku polskim. Prosimy o kontakt pod adresem podanym powyżej

Văn bản này Có Thể Phát Ra Cho Theo Yêu Cầu. Xin Liên Lạc Chúng Tôi Ở Địa Chỉ Trên.

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Bu belge istenildiginde Türkçe olarak da bulunmaktadır. Lütfen yukarıdaki adresten bizimle irtibata geçiniz

(ਪ ਨਜ ਬ ਾ)ਦ ਵੇ ਸੀ ਮਲੀ ਸਕਦ ਾਹੈ ਗਕ ਸਿਪ ਾਰ ਕ ਅਪਰ ਦ ਸੀ ਹੁਦੇ ਪ ਭ ਤੇ ਮ ਡ ਨੇ ਲ ਰ ਬਤ ਾਰੇ ।  
ਇ ਹ ਦਸਤ ਵਜੇ ਬ ਨੀਤ ਕਿ ਠਨ ਨਲ

Dukumeentigan waxaa lagu heli karaa luqadda Soomaaliga marka la codsado. Fadlan annaga nagala soo xiriir cinwaanka halkan sare ku yaalla





**NHS**  
*Herts Valleys*  
**Clinical Commissioning Group**

West Hertfordshire Hospitals **NHS**  
NHS Trust

East of England Ambulance Service **NHS**  
NHS Trust



Hertfordshire Community **NHS**  
NHS Trust

Hertfordshire Partnership **NHS**  
University NHS Foundation Trust



## Summary Highlight Report - Get set, go Dacorum - Year One

Project	PM	Target KPIs	Target Throughput	Actual KPIs	Actual Throughput	
<b>Get Set, Go Dacorum</b>						
<b>Claire Lynch</b>						
Administration	CB					
	CL					
	GR					
Adventure in the Playgrounds	Child UK & GSGD	U14 = 40	560	16	16	
		14+ = 80	1,280	60	60	
Dance @ the APGs	Neighbourhood Action	0	0	12	96	New Project not represented in original delivery plan
Parkrun in Dacorum	parkrun	0	0	133	2,000	New Project not represented in original delivery plan
Back to Netball	Dacorum Netball Forum & England Netball	25	400	49	392	
ENJOY Family - Adeyfield and Highfield	Sportspace	U14 = 40	375	28	266	
		14+ = 50	750	27	169	
Cycle your Family into Fitness	GSGD & British Cycling	U14 = 20	200	6	28	Move into year 2 - agreed with Sport England
		14+ = 40	800	9	43	
Xtreme / Skates Galore	GSGD & DBC	60	600	17	157	
Stay with it Programme	Sportspace & Adeyfield & GSGD	80	1,200	47	1,273	
Sport @ The Elms	BMF	35	350	8	20	New Project not represented in original delivery plan
ENJOY Women & Girls 14 & 4 Fit	Sportspace	30	600	30	472	
Let's Dance	Old Town Hall / Neighbourhood Action	0	0	35	350	New Project not represented in original delivery plan
Family Fun Sessions - Woodhall Farm	Sportspace & GSGD	U14 = 30	300	18	300	
		14+ = 40	400	51	400	
Youth Boxing	Hemel Hempstead Amateur Boxing Club	50	1,000	50	1,500	
Shape Up	Watford FC Community Trust	0	0	11	60	New Project not represented in original delivery plan
Much Stronger Together Football	HB Soccer (Arsenal Soccer Schools)	60	1,200	43	1,020	
Active Men - Mosque	GSGD & Pending	60	840	35	456	
Culturally Aware Fitness Classes	RM Fitness	40	800	55	1,914	
A Taste of Fitness	Sportspace	30	600	6	154	
Sports with the Puffins	Sportspace & The Puffins	15	360	25	520	
Judo with the Rush movement	Rush Judo	10	300	10	420	
Disability Sports Match Buddy Scheme	Volunteer Centre Dacorum	30	300	10	300	

<b>Total</b>		<b>865</b>	<b>13,215</b>	<b>791</b>	<b>12,386</b>	<b>91.5% of KPIs 94% of Throughput</b>
				60	1,000	Moving 60 KPI & 1,000 throughput to year 2 for Cycle your family
				851	13,386	98% of KPIs 1% higher than target throughput

Page 27



## **Report of Dacorum Representative on Herts. County Council Health Scrutiny Committee for Health in Dacorum Meeting of 9<sup>th</sup> December 2015**

HCC Health Scrutiny Committee meetings were held on 1<sup>st</sup> October 2015 and 12<sup>th</sup> November 2015.

At the October meeting it was decided to have two themes (health budgets and quality of care) for the Health Budget/Francis Report scrutiny of 2016 to give time to ask and answer all questions. The themes are likely to be broad so that any question can be asked. Training will be given to the group chairmen and facilitators to help ensure that answers to questions are concise. Some of the responses to the questions asked at this year's NHS Budgets/Francis scrutiny have still not been received.

There was a report on West Herts. Hospitals Trust (WHHT)'s Care Quality Commission (CQC) investigation. Sally Tucker, WHHT's Deputy Director for Strategy and Corporate Services addressed the Committee. The committee is to set up a topic group that will focus on the problems highlighted by the investigation, scrutinise in depth over 6-9 months and report back to the Committee. The topic group will welcome input from Healthwatch.

From 14<sup>th</sup>-17<sup>th</sup> April 2015 WHHT had an intensive CQC inspection and unannounced inspections on 1<sup>st</sup> and 17<sup>th</sup> May 2015. On 4<sup>th</sup> September 2015 there was a Quality Summit including representatives from the CQC. Following a summit on 10<sup>th</sup> September 2015 the report on the inspections was formally published. The Trust rated as inadequate overall. The individual site inspections found Watford and St. Albans to be inadequate and Hemel Hempstead requiring improvement.

WHHT is to be in Special Measures for a maximum of over a year and depending on improvements may come out sooner.

The Trust had been working on improvements since the initial inspection in April 2015.

An Improvement Director Jane Lewington had been appointed. The Trust needed to develop an improvement plan and an oversight group, on which Healthwatch have a seat was formed. It met for the first time on 17<sup>th</sup> September 2015 and will hold WHHT and other health bodies to account for improvements. The Committee welcomed the changes that have happened, highlighting the need for changes to happen quickly and the issues arising from lack of investment in estate at WHHT.

The Committee noted that the key issues for concern were around governance, risk, culture, staffing (especially nursing) estate, environment, buildings and equipment. The positive areas were the caring and compassionate attitude of staff, significant improvements in mortality, outstanding children's services and excellent cleanliness and infection control. The CQC will revisit within 12 months.

Staff were briefed ahead of the CQC report and were being encouraged to make personal pledges. However the significant number of temporary staff could affect engagement. Communication would be an important priority of the topic group to consider.

Staff need further training on Deprivation of Liberty Safeguards under Mental Capacity Act and this is being conducted. WHHT is looking at all training.

At the meeting on 12<sup>th</sup> November 2015, the Health and Social Care Landscape was discussed. The Committee received a presentation including a video which provided a summary of the health and social care landscape within which the County Council works. Herts. County Council (HCC) and the NHS are looking at co-commissioning where money

can come in locally, with ringfencing and safeguards. With regards to the Better Care Fund, Herts. Has chosen to pool greater funds than are required and therefore has one of the biggest Better Care Funds in the country.

The Government has put the Disabled Facilities Grant into the Better Care Fund, the funding for which is passported to the districts and boroughs. Work is being done with 8 out of the 10 districts and boroughs in the County for HCC to retain some of this money.

Regarding home adaptations and equipment, officers are working to improve the speed of response and ensure that there are sufficient staff and vans. The importance of beginning the assessment of patients when they arrive at hospital rather than ready for discharge was highlighted.

West Herts. Strategic Review was discussed. The importance of prevention was highlighted and there was public support for it. The importance of factors like education, housing, and employment on health and wellbeing was noted, as was the need for more education in schools on health and wellbeing.

Regarding communications and signposting, there are plans to build a community navigator approach.

Regarding acute care, modelling was being carried out on three options:

- New build on a new site
- Redevelopment across Watford and St. Albans
- Redevelopment of Watford

The second and third options are being considered because Watford and St. Albans are currently the sites where the acute services and facilities are located.

Health and wellbeing hubs are planned to be set up across west Hertfordshire including at Hemel Hempstead. The hubs will offer a range of tests and treatments, including x-rays, ultrasound scans, blood tests, physiotherapy, mental health services, minor surgery, rehabilitation, outpatient clinics for children and urgent care services. They will also offer health promotion and preventative services and some GP, pharmacy, optometry and dentistry services. At some hubs there will be some community beds for people needing short stays before returning home.

**Appendix A**

**HEALTH IN DACORUM OSC COMMITTEE – WORK PROGRAMME 2015/16**

*Scrutiny making a positive difference: Member led and independent, Overview and Scrutiny Committees promote service improvements, influence policy development and hold Executive to account for the benefit of the community of Dacorum.*

<b>09 March 2016</b>	<ul style="list-style-type: none"> <li>HVCCG Update</li> </ul>	NHS Hertfordshire - Dr Fernandes & Interim Chief Operating Officer, Nicola Bell	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> <li>Health &amp; Localism / Health &amp; Wellbeing Board Update</li> </ul>	Councillor W Wyatt – Lowe	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> <li>HCC Health Scrutiny Update</li> </ul>	Councillor Guest	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> <li>Patient Services</li> </ul>	Tim Hamilton	To provide Members with an update since the last meeting.	
	<ul style="list-style-type: none"> <li>Get, Set, Go Dacorum</li> </ul>	Claire Lynch	To provide an update since the last meeting.	
	<ul style="list-style-type: none"> <li>Childhood Obesity</li> </ul>	Elizabeth Biggs and Sue Beck	To provide an update since the last meeting on 7 <sup>th</sup> January 2015	