

OVERVIEW AND SCRUTINY COMMITTEE**DATE: 8 NOVEMBER 2016****REVIEW OF HARROW HEALTH VISITING - DRAFT SCOPE**

1	SUBJECT	Review of Harrow Health Visiting and proposals for new 0-19 service
2	COMMITTEE	Sub-committee or O&S
3	REVIEW GROUP	Councillors – Chair – Cllr Janet Mote Membership to be confirmed Co-optees: Potentially could be one or more representatives from CCG, service users, representative from Health watch. This would be for the Members to decide.
4	AIMS/ OBJECTIVES/ OUTCOMES	To understand the current service performance and how it compares to other London Boroughs To make recommendations for a service specification for new 0-19 service
5	MEASURES OF SUCCESS OF REVIEW	To have an understanding of the Health Visiting Services performance and have made recommendations for 0-19 service.
6	SCOPE	The suggestion is that it includes: <ul style="list-style-type: none"> • Understanding the service on the ground through work-shadowing, meeting parents and meeting London North West service managers. • Understanding how other boroughs' HV service works. • Understanding how it fits with LBH Early Years Service • Understanding the current budget • Meeting national representative of e.g. PHE or Institute of Health Visiting to understand the national picture.
7	SERVICE PRIORITIES (Corporate/Dept)	Harrow's Health and Wellbeing Strategy 2016-2020 ¹ sets out the Council's commitment to enabling children to "Start Well" so that "children from the womb to adulthood [can] be safe, happy and have every opportunity to reach their full potential."
8	REVIEW SPONSOR	Andrew Howe, Director of Public Health
9	ACCOUNTABLE MANAGER	Rachel Gapp, Head of Policy Audrey Salmon, Head of Public Health Commissioning

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<https://www.harrow.gov.uk/www2/documents/s130914/DRAFT%20Harrow%20Health%20and%20Wellbeing%20Strategy%202016-20%20FINAL%20UPDATED.pdf>

10	SUPPORT OFFICER	Mohammed Ilyas, Policy Officer
11	ADMINISTRATIVE SUPPORT	Policy Team
12	EXTERNAL INPUT	Could come from: Health Visiting Service, School Nursing Service, Maternity services, social care, LSCB, early years/children's centres, parents, PVIs/nurseries, childminders, PHE London, Institute of Health Visiting, other LAs that have a 0-19 service
13	METHODOLOGY	<p>1) Research and evidence gathering phase</p> <ul style="list-style-type: none"> • Public Health Commissioning Manager (November 2016) • Meet/shadow health visitors and talk with mums on a new birth visit and the clinic sessions for the 12/24 month checks. (December 2016 – day-time visits) • Meet Harrow HV service manager(s) (December 2016) • Meet managers from other high-performing LAs (December 2016/January 2017 – day-time visits) • Meet national expert(s) (January 2017) <p>2) Challenge Panel</p> <p>The evidence from these meetings and visits would feed in to a challenge panel to take place in February 2017.</p>
14	EQUALITY IMPLICATIONS	This is a universal service. Members might like to look at how to target resources best and in the most equitable manner if it is not possible always to offer a universal service.
15	ASSUMPTIONS/ CONSTRAINTS	Member/officer time. Need to complete review by end March 2017.
16	SECTION 17 IMPLICATIONS	The challenge panel will have regard to the possible community safety implications of any recommended changes to policy or practice.
17	TIMESCALE	<p>In order for recommendations from the review to be taken into account in the tender process the review needs to be completed – or an interim report needs to be produced by end March 2017.</p> <ol style="list-style-type: none"> 1) O&S 8th Nov 2016 agree scope and panel members 2) Research and evidence gathering – Dec 2016/Jan 2017 3) Challenge panel – late Feb – early March 4) Panel agree report by March 2017 5) O&S agree report and forward to Cabinet 6th April 2017 6) Cabinet receive report 27th April 2017 7) Response to report at the June Cabinet
18	RESOURCE COMMITMENTS	Support from Public Health Commissioning Manager is only possible till end March 2017. During that time 5-7 visits/meetings can be supported by Public Health.

19	REPORT AUTHOR	Jonathan Hill-Brown, Public Health Commissioning Manager.
20	REPORTING ARRANGEMENTS	<p>Outline of formal reporting process:</p> <p>To Divisional Director <input checked="" type="checkbox"/> throughout the course of the challenge panel and when developing recommendations and as a witness at the challenge panel</p> <p>To Portfolio Holder <input checked="" type="checkbox"/> as a witness at the challenge panel and when developing recommendations</p> <p>To CSB <input checked="" type="checkbox"/> TBC</p> <p>To O&S <input checked="" type="checkbox"/> TBC</p> <p>To Cabinet <input checked="" type="checkbox"/> TBC</p>

OUTLINE PROJECT PLAN

Activity	Member Input <i>Who is involved?</i> <i>Estimated time commitment</i>	Officer Resource <i>Who is involved?</i> <i>Estimated time commitment</i>		When	Lead Person
Pre-scope session	Chair	PH Commissioning Manager, Review Support Officer			
Finalise scope & obtain O&S/Sub-Committee endorsement	O&S Committee			8 November	
Research/Preparation Period/Desk top data gathering		PH Commissioning Manager, Review Support Officer		Nov-Dec	
Meetings/Witnesses/ Visits (specify)	See above	PH Commissioning Manager, Review Support Officer		Dec-Feb	
Collation & evaluation of data/evidence	Members of review	PH Commissioning Manager, Review Support Officer		Feb - March	
Review Group determines thrust of report	Members of review	PH Commissioning Manager, Review Support Officer		March	
Draft report	Chair	PH Commissioning Manager, Review Support Officer		March	
Review Group agrees early draft of report	Members of review	PH Commissioning Manager, Review Support Officer		March	
Early draft report to accountable manager for confirmation of factual accuracy		Carol Wallace, LNW NHS Trust		End March	
Review Group's informal discussions of report with Head of Service/Director (or NHS body if appropriate)	n/a				

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Review Group sign off report & refer to O&S/Sub-Committee for information/approval				March-April	
Review Group's presentation of report to CMT/DMT (if appropriate)	n/a				
Final report of Group to O&S/Sub-Committee for approval (if necessary)	n/a				
Consider if there is a need to publicise report findings					
Final report published & referred to Executive for consideration (Cabinet/Portfolio Holder/Directorate – depending on issues/ recommendations)				April	
Evaluation of review process	Chair	PH Commissioning Manager, Review Support Officer		May	
Follow up/Monitoring of outcomes	Members of Review/O&S Cttee			November	
TOTALS excludg scoping					

It is difficult to know exactly what the time commitments are. Public Health can commit to supporting 5-7 review meetings/visits. There are time constraints on the amount of time that the Policy Team can commit to supporting the review. The details might be best agreed with the Chair and Members of the Review.

Contact : xxxxxx, Scrutiny team, Harrow Council

Background Papers