# HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

3 <sup>rd</sup> August 2022
Assistant Chief Executive (Statutory Scrutiny Officer)
Tracking the recommendations of the Health and Adult Social
Care Scrutiny Panel
Open

# CONTRIBUTION TO THE COUNCIL PLAN/STRATEGIC AIMS

The scrutiny panels act as a reviewing mechanism for decisions made relating to the strategic policy, performance and resources required to deliver the ambitions of the Council and its key partnerships. The aim of the scrutiny process is to make sure decision making is robust by providing constructive challenge. This contributes to the Council being effective and efficient and therefore is integral to the delivery of the Council Plan.

# **EXECUTIVE SUMMARY**

The scrutiny panels have adopted a template in order to track their recommendations.

# MATTER(S) FOR CONSIDERATION

Members are asked to look at the progress against the recommendations and agree to sign off any recommendations that have been completed, so that they can be removed from the table.

# 1. BACKGROUND AND ISSUES

Each scrutiny panel has a standard agenda item so that they can check progress against the recommendations they have previously made.

Members are asked to look at the progress against the recommendations in Appendix A and agree to sign off any recommendations that have been completed, so that they can be removed from the table.

# 2. RISKS AND OPPORTUNITIES

Risk assessments will already have been carried out on the reports that these recommendations have come from.

Any actions which the council may undertake as a result of recommendations made by scrutiny will be the subject of further reports, which will include risk assessment(s) by the author(s) concerned.

# 3. OTHER OPTIONS CONSIDERED

Not applicable to this report.

# 4. **REPUTATION AND COMMUNICATIONS CONSIDERATIONS**

The panel's tracking report demonstrates that the panel monitors progress on its recommendations and required actions. This report further demonstrates the breadth of matters considered by scrutiny.

# 5. CHILDREN AND YOUNG PEOPLE IMPLICATIONS

There are no impacts on health and adult social care as a direct result of this report. The reports that these tracked items have come from will have been assessed for impact on health and adult social care.

# 6. FINANCIAL CONSIDERATIONS

There are no financial considerations included within this report, beyond scrutiny's enhanced future role in monitoring delivery of the council's budget and medium-term financial plan.

# 7. MONITORING COMMENTS

In the opinion of the author, this report does not contain recommended changes to policy or resources (people, finance or physical assets). As a result, no monitoring comments have been sought from the Council's Monitoring Officer (legal), Section 151 Officer (finance) or Strategic Workforce Lead (human resources).

# 8. WARD IMPLICATIONS

Potentially impacts on all wards.

# 9. BACKGROUND PAPERS

Minutes from the Health and Adult Social Care Scrutiny Panel http://www.nelincs.gov.uk/committees/

# 10. CONTACT OFFICER

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# HELEN ISAACS Assistant Chief Executive (Statutory Scrutiny Officer)

# Appendix A TRACKING OF RECOMMENDATIONS – HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL 2022/2023

DATE	RECOMMENDATION	RESPONSIBLE	PROGRESS/COMMENTS
15.7.20	SPH.10 Haematology Service UpdateThe patient journey on the new service be presented to a future panel meeting.	Scrutiny & Committee Advisor	Update: Carried forward to the 2022/23 work programme.
4.8.21	SPH. 9 Integrated Care System   Progress of the ICS be received at a future meeting of this panel.	Chief Executive	Update: Ongoing
29.9.21	SPH.29 Mental Capacity Act 2005 Officers from each area were invited to a future meeting to give them the reassurance on the implementation plan	Scrutiny & Committee Advisor	On the meeting forward plan for a future meeting when the new implementation date has been announced
2.2.22	SPH.51 Adult Safeguarding Annual Report The panel be provided with the number of people against the total number of DoLs since April 2020.	Director for Adult Social Care	Update: