AT A MEETING - of the HEALTH SCRUTINY PANEL held at the Council House, Walsall on

Monday 31 January 2005 at 6.00 p.m.

<u>PRESENT</u>

Councillor V Woodruff (Chair)
Councillor I Robertson (Vice Chair)
Councillor D Pitt
Councillor B. McCracken
Councillor E Hughes
Dr S Ramaiah – Director of Public Health
Mr J Weston – Patients Forum
Mr D Martin
Mrs K McAteer

24 Apologies

Apologies were received from Sue James, Dr Varkey, Louise Mabley and Doreen Russell.

25 <u>Substitutions</u>

None received

26 <u>Declarations of Interest and Party Whip</u>

Councillor Woodruff declared a personal non prejudicial interest as an employee of Walsall Hospitals NHS. Councillor Pitt declared a personal non prejudicial interest as an employee of Walsall Ambulance NHS.

27 Minutes of previous meeting held on 20 December 2004

Resolved

That the minutes be confirmed as a correct record and be signed by the Chairman.

28 <u>Access to Mental Health Services</u>

Karen Knowles from the Sainsbury Centre for Mental Health presented the findings of the research.

The report has been in production for some time and it was recognised that many improvements were underway and that it was important to get the views of the Joint Director of Mental Health Services to get a complete picture before

Health Scrutiny finalise their recommendations. It was also recognised that there were many areas of good practice in Walsall.

Concerns were raised by members that GP's had not been involved in the consultation and the reasons for this were explained. Concerns were also raised about the size of the sample of service users. The context for this was explained and it was noted that this was a qualitative study and was more than originally envisaged in the specification. Interviews were in depth for 90 minutes and were very detailed on the actual experiences of people and were therefore much richer in data than would have been provided by a more general survey. Indeed, it was important to recognise that the report was a thorough qualitative piece of work rather than a comprehensive inspection. The report would benefit from a header explaining in more detail the context.

Resolved

- 1. That the report be received
- 2. That the report be sent to the Joint Director of Mental Health Services
- 3. That the response from the Joint Director of Mental Health Services be considered at a future meeting.

29. Obesity in Walsall

Dr Ramaiah updated the panel on issues of obesity in Walsall. It was noted that Children's Services Scrutiny and Performance Panel were interested in having a joint scrutiny review with health on the subject of obesity in children. Membership from that panel had already been agreed.

A working group of both panels could meet and scope the project.

Issues to Scope

Scope areas of concern e.g. age

Currently programme for Continuity Gap Currently programme for Adults (35-64 years)

- Look at perhaps pursuing a setting-based approach e.g. LA, PCT, Voluntary Services etc...
- Or pursuing a risk-factor based approach e.g. diet, exercise
- Or an agency-based approach e.g. WMBC and NHS = 20,000 employees
- There are also data collection issues to be considered
- There is a need for measurable outcomes

There was a general discussion about obesity in Walsall and how health scrutiny could make a positive impact with the limited resources at it's disposal Indeed, it was recognised that resources would be needed from somewhere for detailed analytical work to support the scrutiny process. It was essential that the review was evidence based to back up any future recommendations.

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It was agreed to form a joint working group as proposed to fully scope the review. It was important to ensure that review concentrated on areas where scrutiny could have a positive impact. As previously discussed, the main issues were around promoting healthy eating and promoting more active lifestyles. These could include looking a school meals, school packed lunches, fast food, the role of the NHS and Walsall MBC as employers in promoting healthy lifestyles, promoting more active lifestyles.

The tasks of the working group were to

- 1. Scope the obesity review
- 2. Set the timescale for the review taking into account the need for maximum impact for the least resourced
- 3. Identify the resources it needed to support the review

Resolved

That a joint workgroup be established with membership from the Children's Services Scrutiny and Performance Panel and the Health Scrutiny Panel.

The meeting ended at 7.40pm

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