



# Health Scrutiny Panel

## Minutes - 11 December 2014

### Attendance

#### Members of the Health Scrutiny Panel

Cllr Claire Darke (Chair)  
Cllr Zahid Shah (Vice-Chair)  
Cllr Paul Singh  
Cllr Milkinderpal Jaspal  
Cllr Greg Brackenridge  
Cllr Jasbir Jaspal  
Cllr Peter O'Neill  
David Hellyar

#### Employees

Adam Hadley	Scrutiny and Transparency Manager
Jonathan Pearce	Graduate Management Trainee

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## Part 1 – items open to the press and public

*Item No.*     *Title*

- 1 Apologies**  
Apologies were received from Cllr Turner and Cllr Warren.
- 2 Declarations of Interest**  
There were no declarations of interest
- 3 Minutes of previous meeting (20 November 2014)**  
Resolved:  
That the minutes of the meeting 20 November be approved as a correct record and be signed by the Chair.
- 4 Matters Arising**  
HealthWatch have nominated three representatives to attend future Health Scrutiny Panel meetings. In the absence of a representative, HealthWatch will contact officers prior to the meeting to confirm a substitute.

The Chair gave an explanation for the short agenda explaining that the Mental Health Commissioning Strategy report had been withdrawn at late notice and would be appearing at a later panel. Councillors expressed concern about this given the implications of current budget savings proposals which will affect mental health. It was clarified that the panel has the authority to summon report authors.

5 **Wolverhampton Sexual Health Consultation**

Susan Stokes, Public Health Commissioning Officer, introduced the Sexual Health Consultation Report informing the panel that Public Health is responsible for commissioning most of the sexual health services across the City including HIV services. She explained that a review into sexual health commissioning has highlighted a need to examine the commissioning strategy in Wolverhampton to meet the needs of the City. Nationally, integrated health services have become more prevalent, and the consultation has followed national standards. The plan's key focus is prevention and promotion of good behaviours, rather than reactive service commissioning for treatments. Councillors clarified that the budget for commissioning is approximately the same as last year.

The consultation is a 12 week statutory model that will finish at the end of January. Following Councillor comments about the timing of the agenda item, it was agreed future consultations will come to Health Scrutiny at an earlier date. The responses collected for this consultation will go into a future report as well as informing the specification of new services. Adam Hadley, Scrutiny and Transparency Manager, informed the panel he was having discussions to ensure this happened.

The report proposes a central hub to deliver all Contraception and Sexual Health (CASH) and Genito-Urinary Medicine (GUM) services. There are also plans to closely involve community groups, GPs and pharmacies. Following questions about the hub's location, Ravi Seehra, Public Health Commissioning Officer, explained that ideally the hub will be based centrally – she did however acknowledge that location plans are still in the development phase and are being considered as part of consultation process.

Another significant part of the plan is to target specific demographic areas for service use. The Panel were supportive of this measure.

Councillors questioned why a full equalities assessment had not been included. It was explained that extensive review work was conducted before the consultation launched, meaning there is already a large database of information about service users. The Commissioning Officers therefore felt a full equities impact would have been a duplication of this work. It was agreed that this information would be shared with Councillors to help them with their ward work. Clarification was also given about certain wording in the report, which Councillors felt was misleading about service users. Councillors agreed there is a need to be sensitive when publishing information about specific groups using services.

The issue of sexual health education was discussed by Councillors. Due to changes in the Local Authority's control over schools, the amount of influence the Council has is lower. Therefore whilst the Public Health team wishes to promote more sex education in schools, it has chosen to leave this aspect out of scope for the consultation. It is nonetheless being monitored closely by the Healthy Schools Team.

It was noted that more information could be given to schools by the Healthy School's Team.

Councillors also raised the issue of the gap between mental health and sexual health service provision. The Commissioning Officers said they are currently working with partners on the matter and that the issue is being considered seriously. As an example, they reassured panel that women who had repeat abortions were given counselling and support services. The panel was also informed that work with the LGBT community was taking place.

The panel also asked how services could be monitored in pharmacies.

Ravi Seehra, Public Health Commissioning Officer, explained that a governance framework will be created with the main service provider to ensure the system is accountable, with training for any staff delivering sexual health services.

Resolved:

To provide the panel with background demographic information about service users that was not included in the sexual health consultation report.