



**Community and Wellbeing Scrutiny
Committee**
22 September 2022

**Report from the Head of Strategy &
Partnerships**

Social Prescribing Scrutiny Task Group

Wards Affected:	All
Key or Non-Key Decision:	N/A
Open or Part/Fully Exempt: (If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)	Open
No. of Appendices:	Appendix One - Scope of Scrutiny Task Group Review
Background Papers:	None
Contact Officer(s): (Name, Title, Contact Details)	<p>George Kockelbergh Strategy Lead – Scrutiny Strategy & Partnerships George.Kockelbergh@brent.gov.uk</p> <p>Tom Pickup Policy, Partnerships and Scrutiny Manager Strategy & Partnerships Tom.Pickup@brent.gov.uk</p> <p>Lorna Hughes Head of Strategy & Partnerships Lorna.Hughes@brent.gov.uk</p>

1.0 Purpose of the Report

1.1 To enable the Community and Wellbeing Scrutiny Committee to establish a scrutiny task and finish group to review social prescribing in Brent.

2.0 Recommendation(s)

2.1 To note the contents of the report and scoping paper attached in Appendix 1.

2.2 To agree to establish a scrutiny task and finish group with the terms of reference and membership outlined in Appendix 1.

3.0 Detail

3.1 The Community and Wellbeing Scrutiny Committee can commission evidence-based reviews of a policy area or function of the local authority, which are led by non-executive members. During the work programming session of this municipal year, members also discussed a number of areas that they would like to examine in greater detail through a scrutiny task and finish group. It was agreed that the first task group of this municipal year would focus on social prescribing, which is outlined in more detail in Appendix 1.

3.2 The evolution of healthcare practice nationally towards using more holistic approaches to address people's health needs has made social prescribing increasingly prominent. Social prescribing is a means of allowing health professionals to refer people to a range of local, non-clinical services. The creation of a scrutiny task group on social prescribing is therefore timely and will enable members to review how effectively social prescribing is addressing the health needs of Brent residents, and the opportunities to further develop social prescribing further in Brent.

3.3 As set out in Part 4 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Community and Wellbeing Scrutiny Committee can review or scrutinise any matter relating to the planning, provision and operation of the health service in the borough. It can also make reports or recommendations to the relevant NHS bodies or relevant health service providers.

3.4 The work of the task group will include producing a report with recommendations to Cabinet or other relevant authorities which are focused on areas that the Cabinet or relevant authorities are responsible for. Making recommendations is one of the most important powers that overview and scrutiny has in a local authority. It is considered good practice that recommendations are SMART (specific, measurable, agreed, realistic and timed) and limited in number, this is to ensure that scrutiny achieves the greatest possible impact.

3.5 The task group will collect evidence for its report through the use of evidence sessions. Evidence sessions are designed to provide task group members with information from witnesses called to give evidence. There is not an exhaustive list of who can be called to give evidence, but witnesses in the past have included: council officers, Lead Members, witnesses from relevant external organisations i.e. the NHS, service users and subject matter experts. Members will be expected to develop lines of questioning to check their understanding, question witnesses at sessions and weigh-up evidence that is presented to them. It is considered best practice for members to prepare for these sessions by considering all available data available to them. This is to

give them a complete overview of a subject, so that any views developed are grounded in evidence.

- 3.6 Membership of the scrutiny task group has to be drawn from non-executive members. However the Lead Member for Public Health and Adult Social Care will take part in the evidence sessions alongside other key stakeholders. Details of these sessions will be detailed in a project plan, once the task group is established.

4.0 Financial Implications

- 4.1 There are no legal implications for the purposes of this report.

5.0 Legal Implications

- 5.1 There are no legal implications for the purposes of this report.

6.0 Equality Implications

- 6.1 There are no equalities implications for the purposes of this report.

7.0 Consultation with Ward Members and Stakeholders

- 7.1 Non-executive members are regularly involved in the overview and scrutiny process

Report sign off:

Lorna Hughes
Head of Strategy & Partnerships