

NORTH YORKSHIRE COUNTY COUNCIL

21 July 2010

SCRUTINY OF HEALTH COMMITTEE

STATEMENT BY THE CHAIRMAN

Since the last meeting of County Council on 19 May 2010 the Scrutiny of Health Committee has met formally twice – on 18 June at Sneaton Castle, Whitby and on 8 July at Hambleton District Council, Stonecross, Northallerton. This has been coupled with numerous briefing meetings and workshops.

18 June Meeting

This meeting focused on the events at Whitby Hospital that led up to the temporary suspension in March of the overnight minor injuries unit and of surgical procedures, provided under general and local anaesthetic. I was absolutely determined that local Members ought to be involved in this issue.

I was delighted to welcome Jane Brown, Chief Executive of NHS North Yorkshire and York (NHS NY&Y) to the meeting for the first time. She gave a brief overview of the state of the Health economy within the County from her perspective.

With regard the MIU we heard that efforts to recruit nurse practitioners had continued to be unsuccessful and on the basis that on average overnight staff had been seeing less than 7 people a week, NHS NY&Y would be permanently closing the unit from 11pm until 8am. Reluctantly we had to accept decision.

With regard to the theatres, however, the message was much more optimistic. We heard how NHS NY&Y was liaising with the Care Quality Commission with a view to agreeing a plan for complying with the CQC's requirements which would mean that the services would shortly be restored.

We were informed that in the longer term, NHS NY&Y is looking to build a new hospital based around urgent care, rehabilitation, diagnostics and outpatient services.

I have strongly advised NHS NY&Y to fully engage key local people in the future planning of services.

Throughout this long running saga there has been a lack of credible communication - so vital to confidence within the community at large.

8 July Meeting

This meeting focussed on 3 items:

Transforming Community Services (TCS)

TCS is the national initiative under which primary care trusts must divest themselves of their provider functions by 31 March 2011.

As a first step towards implementing TCS NHS NY&Y set up its provider arm, Community and Mental Health Service (C&MHS), as an arm's length organisation from 1 April last year. It is now seeking expressions of interest from local acute trusts to take over the services currently provided by C&MHS.

Sue Metcalfe, Deputy Chief Executive (Director of Localities) from NHS NY&Y attended the meeting and described the assurance process they have followed in examining options and how this culminated in a decision that vertical integration with the acute trusts was the option to be pursued.

Derek Law, Corporate Director of Adult and Community Services and Seamus Breen, Assistant Director (Commissioning and Partnerships) also attended and gave their perspective on the proposals.

Whilst acknowledging that TCS is a national initiative Members expressed disappointment that the option of having one county wide provider for community services had been ruled out. We felt that transferring the service to 4 trusts would undermine the work that has been undertaken in recent years to integrate health and social care, could lead to inequity across the County and would place additional burden on the County Council in terms of partnership working.

Members accepted that who provides community services is not the key issue. Rather we need to think more about how providers are commissioned to deliver services, including how they are commissioned to work with the County Council. Consequently, as part of our resolutions we called on NHS NY&Y to work closely with the County Council in the development of a County-wide commissioning framework which will ensure that community services are delivered in an integrated way with social care and there is equity in terms of access and outcomes across the entire County.

Minor Injuries Units in Hambleton and Richmondshire

With one or two minor suggested amendments we supported the PCT's plans for engaging with local communities to discuss proposals to close the minor injuries units at the Friary Hospital in Richmond, the Lambert Hospital in Thirsk and St Monica's Hospital in Easingwold.

Whilst it is acknowledged that members have some very searching questions to be answered, and some, as I do, remain at this stage unconvinced regarding the proposals or aspects of them, this meeting simply commented upon the engagement plan and did not seek to scrutinise the substantive issues.

I must commend the engagement plan as thorough, as well as being flexible to the suggestions we made.

I would urge local members, and indeed Committee Members, to attend the public meetings when they are announced so that we can all understand the issues.

The Committee will review the outcome of the engagement process at a meeting in the autumn.

Ripon Dental Clinic

We agreed to offer no objection to the transfer of the clinic providing dental care to children, adults and older people with additional needs such as learning and physical disability from Ripon Community Hospital to Kingswood House, Harrogate. We made this decision on the grounds that the new premises and facilities will enable an increased range of treatment options such as for patients requiring hoists, sedation or a general anaesthetic. There is ample free car parking and transport will be arranged for existing patients if required.

Again, I also commended the PCT on the manner and depth upon which they had engaged with users of the clinic and had worked hard to ensure concerns were answered and dealt with in a sympathetic manner.

I must also make the point that their early engagement with lead Members of the Committee ensured this process was executed effectively and without misleading stories and information being circulated, especially during the election period.

NHS NY&Y also informed us that they already have a number of competing bids from services using other premises in the Ripon area to use the space vacated at the hospital. They are mindful of the need to maintain Ripon Hospital as a viable facility.

In view of the concern of local members, especially Councillor Bateman around the perception of reduced services and ultimately a threat to the viability of Ripon Community Hospital, we resolved to examine the role of this and similar hospitals across the County in the near future.

Reforms within the *NHS*

Very recently, Andrew Lansley announced his attention, through a White Paper, to reform commissioning, which shall by and large be done through GP's or at the very least groups of local GP's. This shall have ramifications, there is no doubt, on the very survival of PCT's and of course indirectly SHA's as we know them.

The Committee shall have to respond to this change and arrange its scrutiny process accordingly, in what manner remains to be seen.

One thing is for sure - if we can cut through the red tape and bureaucracy, at heavy expense, and deliver the savings to the front line, thus protecting local, rural services, then I am sure you all will join me in welcoming the move. GP's, of course, shall, I think, have to make their case for future service reconfiguration in a robust manner to the Committee and that all makes for some interesting dynamics!

County Councillor Gareth Dadd
Chairman: North Yorkshire County Council Scrutiny of Health Committee

County Hall
Northallerton

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