

**NORTH YORKSHIRE COUNTY COUNCIL****24 July 2013****SCRUTINY OF HEALTH COMMITTEE – STATEMENT BY THE CHAIRMAN**

This is my first statement since the Elections and since the changes as a result of the Health and Social Care Act were effective from 1 April 2013.

We now have 6 Clinical Commissioning Groups commissioning most in-patient and community healthcare services across the County with primary care and specialist hospital care commissioned by NHS North Yorkshire and Humber (the local area team of NHS England). Locally Public Health is commissioned by the County Council and the role of our Health and Wellbeing Board is to oversee greater integration of care and drive the strategic direction of health and social care services. We are also challenged by the difficulties faced by the Care Quality Commission and the fallout from the report of the Independent Inquiry on the Mid Staffordshire NHS Foundation Trust chaired by Robert Francis QC. The public will increasingly look to us to make sure their voice is heard.

The main areas of involvement for the Scrutiny of Health Committee that I would like to highlight are summarised below.

**Children's and Maternity Services at the Friarage**

Following our referral to the Secretary of State for Health of the proposed withdrawal of consultant-led maternity and children's services at the Friarage Hospital in Northallerton, it was disappointing that the Secretary of State had not asked the Independent Reconfiguration Panel (IRP) to carry out a full review as we had requested.

The IRP concluded that there is a need to take action around the issues facing children's and maternity services at the Friarage and that a consultation, led by the Hambleton, Richmondshire and Whitby Clinical Commissioning Group (CCG), should go ahead.

Significantly the IRP did comment that the draft consultation document produced in preparation for formal consultation and shared with our Committee could usefully be adapted to satisfy all requirements. The IRP also commented that the consultation may also wish to invite new options and not be limited to those listed.

The CCG has recently indicated that it wants to start the formal consultation as soon as possible on the two options below:

- a short-stay paediatric children's assessment unit, children's outpatient and community services and a midwifery-led unit, outpatient services and community midwifery (CCG preferred option);

- a children's outpatient and community services, midwifery-led unit, outpatients services and community midwifery

I have written to Dr Vicky Pleydell (Clinical Chief Officer at the CCG) reminding her of the need to address the comments from the IRP and I have asked for sight of the consultation document before it is issued.

Dr Pleydell will also be attending the next Committee meeting in 6 September to brief us on the consultation process. The Committee will be consulted formally at our meeting in November.

### **National Review of Children's Cardiac Surgery - Referral**

In June the Secretary of State for Health, announced that he was suspending plans to reform children's heart surgery in England.

Based on advice from the IRP, the Secretary of State concluded the NHS proposals to end paediatric cardiac surgery at three hospitals – including Leeds General Infirmary - were based on a "flawed analysis". He has given NHS England until the end of July to propose the way forward including how the way forward for children's cardiac surgery can be considered at the same time as cardiac surgery for adults.

I represent North Yorkshire and on the Yorkshire and Humber Joint Scrutiny of Health Committee which has refused to accept the arguments to close the Leeds unit and ultimately referred the proposals to the Secretary of State. From the beginning of the process the North Yorkshire Scrutiny of Health Committee has recommended that the needs of people across the Yorkshire and Humber region can only be properly served by the retention of children's cardiac services at both Leeds and Newcastle. We also questioned the need for a caseload of at least 400 procedures at each centre on which the proposals were predicated. Once the Department of Health announced that proposals for changes to adults cardiac surgery were in the pipeline we argued strongly for adults and children's cardiac surgery to be looked at together.

We must now work to do what we can to ensure the retention of cardiac surgery at Newcastle and Leeds as the way ahead.

### **Commissioning of Primary Care - Including Implications of the Minimum Practice Income Guarantee (MPIG)**

The Director of NHS North Yorkshire and Humber (the local area team of NHS England) which commissions primary care across North Yorkshire has been invited to attend our committee meeting on 6 September 2013.

The objective will be for the Committee to fully understand the commissioning priorities in primary care throughout North Yorkshire.

A particular issue which we will need to examine is the Government's plans to withdraw the MPIG from next year until 2021. This has already raised a good deal of

concern locally over the threat it could pose to the viability of small GP practices - a feature in our rural areas.

William Hague MP has had correspondence with the Secretary of State for Health, Jeremy Hunt on this issue expressing his concern.

At our meeting in September it will also be important for the Committee to learn more about the range of specialist healthcare services commissioned by NHS NY&H.

**County Councillor Jim Clark**  
**Chairman: North Yorkshire County Council Scrutiny of Health Committee**

**July 2013**