

NORTH YORKSHIRE COUNTY COUNCIL

SCRUTINY OF HEALTH COMMITTEE

Minutes of the meeting held at Selby District Council Civic Centre, Selby on 27 January 2012, commencing at 10.00 am.

PRESENT:-

County Councillor Jim Clark (Chairman).

County Councillors:-Val Arnold, John Blackie, John Clark, Polly English, Andrew Goss, Mike Knaggs, Margaret Hulme, Shelagh Marshall, John McCartney, Heather Moorhouse and Chris Pearson.

District Council Members: - Shirley Shepherd (Hambleton), Ian Galloway (Harrogate), Kay McSherry (Selby), Tony Pelton (Richmondshire), John Roberts substitute for Helen Firth(Craven) and Elizabeth Shields substitute for John Raper (Ryedale).

In attendance:- Executive Member County Councillor Clare Wood, County Councillor Dave Peart and Selby District Councillors Ian Chilvers, Michael Dyson and Mel Hobson.

Officers: Seamus Breen (Health & Adult Services), Bryon Hunter (Scrutiny Team Leader), Jane Wilkinson (Legal and Democratic Services).

Present by Invitation:

NHS North Yorkshire & York – Amanda Brown, Jim Khambatta & Lorraine Naylor.

Staithes GP Surgery – Kevin Rider (Practice Manager).

Hambleton, Richmondshire & Whitby Clinical Commissioning Group – Dr Vicky Pleydell.

South Tees Hospitals NHS Foundation Trust – Jill Moulton.

Mid Yorkshire Hospitals NHS Trust – Prof Tim Hendra & Ruth Unwin.

Apologies for absence were submitted on behalf of District Councillors Helen Firth (Craven) and John Raper (Ryedale).

In attendance six members of the press and public.

COPIES OF ALL DOCUMENTS CONSIDERED ARE IN THE MINUTE BOOK

The Chairman welcomed the return of District Councillor Tony Pelton following his long absence due to illness.

106. MINUTES

RESOLVED -

That the Minutes of the meeting held on 18 November 2011 be taken as read and be confirmed and signed by the Chairman as a correct record.

107. CHAIRMAN'S ANNOUNCEMENTS

- Tees Esk & Wear Valleys NHS Foundation Trust – The Chairman to attend a workshop on 20 February 2012 on their Quality Account.
- Vale of York Clinical Commissioning Group – Meeting on Public and Patient Congress to be held on 7 February 2012.
- Merger of Scarborough & North East Yorkshire NHS Trust and the York Teaching Hospital NHS Foundation Trust – Public meeting to take place at Malton Rugby Club commencing at 6.30 pm on Monday 30 January 2012.

108. PUBLIC QUESTIONS OR STATEMENTS

There were no public questions or statements from members of the public concerning issues not listed on the agenda.

RESOLVED –

That the requirement to give 3 days notice be waived and those Members of the public and Selby District Councillors present at the meeting who wished to speak on items listed on the agenda would be invited to do so during consideration of the relevant item.

109. CHILDREN'S SERVICES AT THE FRIARAGE HOSPITAL, NORTHALLERTON

CONSIDERED –

The report of Bryon Hunter, Scrutiny Team Leader seeking advice and guidance from the Committee on the content of an engagement plan prepared by South Tees Hospitals NHS Foundation Trust. The engagement plan was in response to the concerns of clinicians about whether the current model for delivery of paediatric and maternity services at Friarage Hospital was sustainable. In response to those concerns an independent report by the National Clinical Advisory Team (NCAT) had been commissioned which endorsed the concerns that had been raised. A copy of the NCAT report and the engagement plan were appended to the report.

Dr Vicky Pleydell, (Shadow Accountable Officer Hambleton & Richmondshire & Whitby CCG) summarised the background to the review and NCAT's findings. She said that the NCAT report made public on 23 January 2012 supported the favoured option as identified by GPs and the Trust to close inpatient services and establish enhanced outpatient services and increase the number of specialist clinics. It was clear from the report that it was not an option for services to remain unchanged.

Jill Moulton, sought the views of Members on the events and venues suggested in the engagement plan and whether they considered the Plan to be adequate.

The Chairman stressed that at present there were no substantive proposals for the Committee to consider. Discussions with stakeholders were planned for between March and June 2012. If as a result of the engagement exercise, proposals then emerged that required formal consultation this would be conducted during the Autumn.

Members commented that there was intense public interest in the subject. Members suggested that the start time of proposed public information meetings be staggered and drop-in sessions held so as to maximise attendance. It was also requested that plain English without acronyms and jargon be used in all promotional literature. It was acknowledge that the population pressures presented by Catterick Garrison would also need to be addressed during the period of public engagement.

In response to a request from County Councillor John Blackie it was agreed that information on 'patient flows' would be provided to him.

The Chairman referred to the list of stakeholder groups and highlighted the importance of including the County Council's Children and Young People's Service as well as the Local Safeguarding Children's Board and the Children's Trust.

The Chairman said that it was important for local councillors to facilitate and participate in the process and he encouraged Members to attend the engagement events listed in the draft Plan. The Committee agreed to defer considering its own position on the matter until the end of the engagement exercise by which time initial feedback would be known.

RESOLVED –

That subject to the comments recorded in the Minutes the Committee endorses the joint engagement strategy 'A vision for the future of children's services at the Friarage Hospital, Northallerton'.

That a report on Children's Services at the Friarage Hospital, Northallerton be referred to the next meeting.

110. DEVELOPMENT OF A STRATEGY FOR HEALTHCARE SERVICES IN WHITBY

CONSIDERED –

The report of the Scrutiny Team Leader providing background information on the development of a strategy for healthcare provision in Whitby that included the services to be provided at Whitby Community Hospital.

The meeting was addressed by Amanda Brown, Locality Director NHS NY & Y who summarised the process employed to develop local services under the broad umbrella of the North Yorkshire Review. Work to develop a business case for day procedures was in process and one of the options under consideration was whether or not the operating theatres at Whitby Hospital should be refurbished.

The Chairman said he had attended an event at Whitby Hospital on 20 January 2012. The event had been attended by a wide range of groups and individuals including GPs, surgeons, district councillors and representatives of Whitby Hospital Action Group. Those present had discussed local healthcare needs and had been presented with information from the Ambulance Service that included activity levels at Whitby Hospital. At that meeting a number of suggestions had been made about future service provision. He was pleased to report that there was now an increasing understanding between the community locally and the NHS. Whilst no final decision on the operating theatres had been made it was now locally accepted that the cost of bringing them up to an acceptable level of safety must be viewed against their envisaged utilisation. Over the course of the next few months proposals would be drawn up and the public and stakeholders consulted.

RESOLVED –

That progress towards developing a strategy for healthcare in Whitby be noted and that further reports on this subject be referred to the Committee as the work progresses.

111. MID YORKSHIRE HOSPITALS NHS TRUST – ACCIDENT AND EMERGENCY UNIT AT PONTEFRACT HOSPITAL AND THE TRUST'S 5 YEAR CLINICAL STRATEGY

CONSIDERED –

The report of Bryon Hunter, Scrutiny Team Leader updating the Committee on the situation regarding the Accident and Emergency Unit at Pontefract Hospital following the decision to temporarily close the Unit overnight. The report also highlighted work taking place to develop and implement a 5 Year Clinical Strategy covering Dewsbury, Pontefract and Pinderfields Hospitals.

The report was introduced by Professor Tim Hendra, (Medical Director, Mid Yorkshire Hospitals NHS Trust) who explained the reasons for the temporary closure. He stressed that the closure was due to a national shortage of experienced middle grade emergency doctors and was not because of financial constraints. The closure was he said temporary and was not linked to any proposals to reconfigure services. During the summer 9 out of 21 middle grade emergency doctor posts were vacant across Pontefract, Dewsbury and Pinderfields Hospitals. Following an unsuccessful recruitment campaign the decision was taken to temporarily close the accident and emergency unit at Pontefract Hospital on patient safety grounds. The decision to close Pontefract was because patient numbers were low compared to the two other hospitals. Subsequent monitoring had revealed there had been no adverse affect on patients accessing emergency services at Pinderfield and Dewsbury Hospitals. He acknowledged that following the decision to temporarily close the Unit there had been considerable media coverage.

The Committee was advised that the Trust had considered making an approach to the Army for support but had been informed that it would not be appropriate. A proposal to change the Accident and Emergency Unit at Pontefract to an Urgent Care Unit had not been supported by local MPs. In response to public pressure the Trust was now working with local GPs and the Out of Hours Service to explore the possibility of restoring a 24 hour service. A further meeting with MPs was planned for 3 February at which it was hoped that a date for reopening the Unit could be agreed. He emphasised that if the Unit did re-open it would not operate as it had previously and that the nature of the services it provided would be different because there was no prospect of the Trust being able to recruit middle grade doctors.

Professor Tim Hendra responded to a number of questions from elected Members and members of public.

The Chairman thanked Professor Hendra for his attendance and for the information he had provided to the Committee which had been very enlightening.

RESOLVED –

- (a) That the situation at Pontefract Hospital's Accident and Emergency Unit be noted.
- (b) That a report covering the outcome of the Trust's engagement on its 5 Year Clinical Services Strategy, the findings of the National Clinical Advisory Team report and any proposals as part of a formal consultation to be prepared for this Committee, provisionally, on 1 June 2012.

112. IMPROVING THE MANAGEMENT AND TREATMENT OF MAJOR TRAUMA ACROSS YORKSHIRE AND THE HUMBER

CONSIDERED –

The report of Bryon Hunter, Scrutiny Team Leader describing national proposals to improve the treatment of patients with major trauma in Yorkshire and the Humber. The proposals would mean that patients with a major trauma would be directed to a major trauma centre instead of first being transported to the nearest Accident and Emergency department regardless of their injuries.

The report was introduced by Jim Khambatta, (Senior Commissioning Manager, NHS NY & Y) who gave a power-point presentation. He emphasised that the proposals were mandatory by the Department of Health and would affect only a small number of patients (approximately three per day). Slides showing proposed changes to patient pathways were shown at the meeting. The Committee was told that the changes would improve the safety, quality and consistency of the care given to patients with major trauma. Details of the public engagement undertaken and the timetable for implementing the changes were also summarised.

Members commented that it was crucial that the proposals improved the outcomes for patients living in both rural and urban areas. Members referred to previous situations the Committee had experience of where the capacity of the ambulance service to deliver what was being proposed had not been taken into account when plans were drawn up. Assurances were given that the Ambulance Service was fully aware of the proposals and was actively participating in the consultation. Members commented that there remained significant discrepancies in the target times for rural and urban areas. Jim Khambatta replied that the target for the transfer of patients to a major trauma centre was 45 minutes and he agreed to provide the Committee with details of the geographical mapping of patients for each trauma centre.

In response to questions about delays in implementing the proposals the Committee was advised that additional time was needed to carry out remodelling work and to design a new suite of performance indicators as well as coordinate and plan patient pathways between the various hospitals. Assurances were given that the phased implementation would not mean that patients received an inferior service during the interim period.

Members expressed their support in principle for the proposals.

RESOLVED –

That the Committee:

- Notes the national context and regional planning approach to the development of a Major Trauma Network system for Yorkshire and the Humber.
- Notes the progress to date on the proposed pathways and the service benefits for the Local Authority population who experience a major trauma incident.
- Notes the commitment of NHS North Yorkshire and York to engage with patients and the public as required where the proposals require further detail and explanation.

- Notes the intention of the Yorkshire and the Humber Special Commissioning Group to further consider this service development at its January 27th 2012 Board meeting.
- Notes that the national expectation is that regions will establish a Major Trauma Network by April 2012 but that regional provider plans suggest that a phased approach is likely to be a more realistic and feasible option.

113. APPLICATION BY STAITHES SURGERY (WHITBY) TO CLOSE THEIR BRANCH SURGERY AT HINDERWELL, SALTBURN

CONSIDERED –

The report of the Scrutiny Team Leader inviting Members to comment on the application by the partners of Staithes Surgery (Whitby) to close their branch surgery at Hinderwell. Appended to the report was a report from NHS North Yorkshire & York outlining:-

- The reasons and background to the closure
- Practice population
- Condition of premises
- Service provision
- Stakeholder engagement and Communication Plan
- Timetable for Closure

The report was introduced by Lorraine Naylor, Assistant Director Primary Care NHS North Yorkshire & York and Kevin Rider, Practice Manager, Staithes Surgery who advised the Committee that the premises at Hinderwell were no longer fit for purpose. No objections to the proposed closure had been received from patients and it was reported that staff were supportive of the move.

Members said they were satisfied with the reasons given for the closure and that patients had been properly consulted.

RESOLVED –

That the Scrutiny of Health Committee supports the closure of the branch surgery at Hinderwell by the partners of the Staithes GP Practice, Whitby.

114. WORK PROGRAMME

CONSIDERED –

The report of Bryon Hunter, Scrutiny Team Leader inviting Members to comment on and approve the content of the Committee's future work programme.

Members were advised that Bradford District Care Trust was about to launch a consultation into Adult Older People's Mental Health that had originally been delayed from the previous year. A report on the consultation giving Members an opportunity to comment would be considered at the July meeting of the Committee with the consultation results reported to the September meeting.

The Chairman encouraged Members to attend one of the series of public meetings that had been arranged to discuss proposals surrounding future delivery of paediatric services at the Friarage Hospital, Northallerton as discussed earlier in the meeting. Bryon Hunter said that he would discuss with the Chairman arrangements for the Committee to host an event on this subject.

The Chairman requested Bryon Hunter, Scrutiny Team Leader to conduct research into how the Committee could engage with GP clinical commissioning groups in North Yorkshire on their plans for commissioning.

RESOLVED –

That the content of the work programme and the comments made during the meeting be noted.

The meeting concluded at 12.50 pm.

JW/ALJ