

North Yorkshire County Council

Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 9 November 2012, commencing at 10.00 am.

Present:-

County Councillor Jim Clark (Chairman).

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

District Council Members: - John Roberts (Craven), Shirley Shepherd (Hambleton) Ian Galloway (Harrogate), John Raper (Ryedale) and Kay McSherry (Selby).

In attendance:- Executive Member County Councillor Clare Wood and County Councillor John Batt.

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

Present by Invitation:

South Tees Hospitals NHS Foundation Trust – Jill Moulton.

NHS North Yorkshire & York PCT – Bob Wiggins

Hambleton, Richmondshire & Whitby CCG – Dr Vicky Pleydell and Henry Cronin

Richmondshire District Council: Penny Hillary (Scrutiny Officer) Cllr Roberts

Leeds & York Partnership NHS Foundation Trust – Melanie Hird and Dr J Clark

In attendance five members of the press and public.

Copies of all documents considered are in the Minute Book

139. Minutes

That the Minutes of the meeting held on 7 September 2012 to be taken as read and be confirmed and signed by the Chairman as a correct record.

140. Chairman's Announcements

- National Review of Children's Cardiac Surgery – The Regional Scrutiny of Health Committee was due to meet the following week to finalise the content of the letter of referral to the Secretary of State. A further update to be provided at the next meeting.
- Mental Health Services for Older People In The Harrogate Area - Public consultation was about to commence and a series of public meetings scheduled for the next two weeks. A further update to be provided at the next meeting.

- Ambulance Station Closures –It was confirmed that there would be no change to Ingleton or Grassington Ambulance Stations but that there could be changes to Scarborough Station - the Chairman said he would continue to monitor the situation.

141. Public Questions or Statements

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

142. Children's and Maternity Services at the Friarage Hospital, Northallerton – Current Situation

Considered –

The report of the Scrutiny Team Leader updating the Committee on the latest position regarding proposals to reduce maternity and children's services at the Friarage Hospital. The report summarised events that had taken place following the previous meeting of the Committee. In particular the decision of the Board of NHS NY&Y not to consult on Option 1 (to sustain consultant led children's and maternity services).

The Chairman said he had attended Board meetings on 25 September 2012, and 23 October 2012 and had urged Board Members to consult on all 3 options but had been unsuccessful. The following day in anticipation of the matter being referred to the Secretary of State for Health the Primary Care Trust had postponed the start date of the consultation.

All Members of the Committee were invited to read the draft consultation document that had been tabled at the meeting together with the report written by Councillor John Blackie on a fact finding visit to North Devon Hospital, Dorset County Hospital and Yeovil District Hospital also tabled at the meeting. The report by Councillor John Blackie would form the basis of the next item on the agenda.

The Chairman said the Committee would conclude hearing at today's meeting the case for change. The purpose of the additional meeting of the Committee on 22 November was to hear first hand the views and concerns of the public on the proposed changes before making a final decision on referral to the Secretary of State.

The Chairman then invited Dr Pleydell to address the Committee.

Dr Pleydell said the decision not to consult on Option 1 was based on legal advice sought by the Primary Care Trust. Members were well aware of the financial deficit facing the PCT. By way of perspective, the cost of community nurses in Hambleton & Richmondshire was £2.6m whilst Option 1 required additional investment of around £2.7m. Consultation was costly and if as seemed likely the matter was to be referred it would be wrong to proceed especially as the decision that needed to be made would not in any way be materially affected by a pause in the consultation. Members were invited to comment on the narrative of the draft consultation document which dependent upon the Committee's deliberations would be amended as necessary.

The Chairman said engagement with the Committee by the CCG and representatives from the South Tees Hospitals NHS Trust had been commendable. He was however, disappointed to learn that the consultation had been postponed via a telephone call from the press. The decision to postpone the consultation should he said have been communicated to him at the meeting of the Board at which he was present.

The Chairman said that he would like to place on record that the Committee had accepted from the outset that no change was not an option. Members remained however very concerned about the long term sustainability of a mid-wife led unit at the Friarage Hospital.

Members asked a number of questions seeking clarification on the evidence presented to the Committee. Members were informed that recruitment of mid-wives was no longer an issue as changes to their training meant they were more confident about running a unit without doctors.

County Councillor John Blackie sought confirmation of the operating hours for the proposed short stay paediatric assessment unit. Dr Pleydell was unable to give a definitive answer. Questions about whether the unit should operate Monday to Friday or on a daily basis had been raised in the consultation document and would be the subject of further discussions with South Tees Hospitals NHS Trust.

The Chairman thanked Jill Moulton and Dr Vicky Pleydell for their attendance and the information they had provided.

Resolved –

That the content of the report and information provided at the meeting be noted.

143. Children's and Maternity Services at Friarage Hospital, Northallerton Visits to Barnstable, Yeoville and Dorchester by Richmondshire District Councillors

The Committee received an oral report from County Councillor John Blackie, Councillor John Robinson Richmondshire District Council and Penny Hillary (Scrutiny Officer Richmondshire District Council) summarising the outcome of fact finding visits to hospitals in the West Country faced with similar financial pressures as the Friarage Hospital. A copy of the final written report was tabled at the meeting.

Members heard how in response to local need other hospitals similar to the Friarage had managed to maintain a rota of consultants or introduce other arrangements such as specialist paediatric nurse practitioners.

In response Jill Moulton said comparison between the Friarage and the other hospitals referred to in the report was not on a 'like for like' basis. In the other hospitals the paediatric unit was larger and they employed middle grade doctors.

Resolved –

That the report and information provided at the meeting be noted.

144. NHS North Yorkshire and York Turnaround Initiatives

Considered –

The covering report of the Scrutiny Team Leader on progress towards delivery of a £10m package of in year savings by NHS North Yorkshire and York PCT. Appended to the report was a list of money saving measures and potential savings. A report considered by the Board of the Primary Care Trust setting out the latest position on actions to deliver the identified savings was also appended.

The meeting was attended by Bob Wiggins, Turnaround Director on behalf of NHS North Yorkshire & York who reported the response of CCGs to the proposed efficiency savings. He stressed that he was speaking in a personal capacity and that the £10m savings were needed to offset increased activity in certain areas of the health economy. The Primary Care Trust also faced additional financial pressures

arising from the winding-up costs, restitution claims, estate issues and disputed/outstanding invoices. In order to achieve the level of savings required it was acknowledged the proposals were radical. CCGs had he said been robust in challenging some of the proposed measures and had ultimately not supported all of them on the grounds of patient safety. The present position was that of the £10m proposed only £7.5m had been agreed. Progress against each of the nine turnaround initiatives listed in appendix one was reported as follows:-

1. Review of elected activity – savings of £2m identified – CCGs to review patient referrals as clinical thresholds not being robustly applied
2. Review of outpatient follow up appointments – savings of £2.3m identified – further follow up work needed by primary care
3. Review of the opening hours of Minor Injuries Units – savings of £200k identified – move towards 5 day units
4. Review of community hospital beds – no action taken
5. Review of high cost treatments and drugs – savings of £475k identified
6. Cessation of enhanced primary care service payments – savings of £139k identified
7. Review of Mental Health and continuing health care placements – on target to achieve savings of £1.5m by repatriating patients with out of county placements
8. Cessation of the expansion of health visitors – savings of £150k identified – recruitment plans halted
9. Redesign of patient transport services – on target to deliver savings of £400k

Additional savings of £300k had been achieved by reducing over prescribing. The total savings identified totalled £7.5m.

The Chairman referred to savings figures of £60/75M announced by the PCT that month and asked how the figure of £10m was linked to these figures.

The Committee was advised that the £60/75M related to efficiency savings across the health economy required by the Department of Health. The PCT had an in year budget deficit of £19m which was why overspending had to be managed in order to prevent CCGs from inheriting a recurring deficit. The £10m of savings referred to earlier in the meeting were in addition to the efficiency savings imposed by the Department of Health. He stressed that the financial envelope for the health economy was fixed and that in order to invest in new or better services it was necessary to first find efficiency savings or disinvest in services that no longer provide the desired outcome. If certain budgets were overspent then spending had to be reduced elsewhere. The PCT had commissioned consultant accountants KPMG to identify efficiency savings (£75M) over the next five years. It was thought that KPMG would aim to achieve this by seeking to address the recommendations in the North Yorkshire Review. KPMG was in the process of compiling a short list of potential savings measures that was expected to be available in November. Bob Wiggins stressed that the list of measures being drawn up consisted of possibilities that had yet to be formally agreed. His personal view was that final savings figure would be in excess of £75m.

Members were alarmed by the figures quoted at the meeting especially as they included an element of historic debt which previously they had been led to believe had been written off. Concern was expressed that savings would be achieved through cuts to services at a time when the administrative costs of having multiple CCGs in North Yorkshire as opposed to a single Primary Care Trust were likely to increase. This was refuted by Dr Pleydell who said that small local CCGs would receive reduced levels of funding but were in a better position to make savings.

County Councillor Polly English was sceptical that savings could be achieved by the repatriation of mental health patients. She said that out of county placements arose

from either a shortage of beds or lack of specialist facilities. She asked for a written response to her question about where repatriated patients would be sent. Assurances were given that patient care would not be down-graded.

County Councillor Shelagh Marshall was disappointed that the savings schemes proposed were by mainly short term measures and said she would have liked to have seen schemes that promoted the use of telemedicine.

County Councillor Heather Moorhouse said without knowing the total budget for each of the nine turnaround initiatives it was impossible to offer any meaningful comments on the level of savings achieved.

County Councillor John McCartney enquired about the cost of the consultants KPMG and said that the savings initiatives outlined at the meeting comprised of things the NHS should already be doing and questioned the competence of their management.

Members from Ryedale referred to recent press coverage about cuts to the opening hours of the minor injury unit at Malton which they vehemently opposed.

County Councillor Clare Wood said that change was needed in the NHS in North Yorkshire. However the savings measures that had been proposed were short-sighted and reactive. She was pleased that CCGs had opposed cuts to community services as the right way forward was to shift the balance of care from hospitals to community settings and this needed investment.

The Chairman called for the Primary Care Trust and CCGs to reflect on the comments made that day by Members. The Committee would he said continue to monitor the situation closely and would appreciate being kept informed of developments as opposed to learning about them from the press.

Resolved –

That the information provided at the meeting be noted.

145. Mental Health Services for Older People in York and Selby

Considered –

The report of the Scrutiny Team Leader briefing the Committee on the development of plans for mental health services for older people in the York and Selby area.

The meeting was attended by Melanie Hird and Dr Jeffrey Clarke from Leeds & York NHS Partnership Foundation Trust who highlighted key aspects of the proposals.

The Committee noted that the proposals to reconfigure services would not affect the provision of the learning disability service that currently operated from Easingwold. Members commented on the size of the Worsley Court building in Selby and sought assurances that the space was being efficiently utilised. Members were advised that the occupancy rates for Worsley Court were not low and that it would continue to take the majority of North Yorkshire referrals but that the new service model did make better use of the available estate.

Members endorsed the enhancement and investment in community services and offered no objection to the proposals.

Resolved –

That progress made to date on a new service model comprising of a dedicated

Nursing Home Team and inpatient beds for older people with mental health problems to be consolidated at Meadowfields, Worsley Court and Peppermill Court.

146. Work Programme

Considered –

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

Members attention was drawn to the additional meeting of the Committee on 22 November 2012. Members were advised that the venue for this meeting could change from that printed in the report and that they would be notified as soon as arrangements had been finalised.

Arising from discussions that day potential agenda items for the January 2013 meeting of the Committee included:-

- Consultation – Mental Health Services – Alexander House, Knaresborough
- Yorkshire Ambulance Service Station Closures
- NHS North Yorkshire & York PCT Turnaround Initiatives – Findings of KPMG report

In view of the local elections in May 2013 the Scrutiny Team Leader advised that the agenda for that meeting would be kept deliberately light.

County Councillor Shelagh Marshall suggested that in view of the Committee's workload it may be appropriate to hold an additional meeting between January and April 2013. Members were asked to reserve in their diaries the mid-cycle briefing date of 1 March 2013 at 10.30 am as a possible date for an additional meeting of the Committee.

Resolved -

That the work programme be received and agreed as printed including the suggestions made during the meeting and recorded in the Minutes.

The meeting concluded at 12.50 pm

JW/ALJ