

North Yorkshire County Council

Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 7 November 2014.

Present:-

Members:-

County Councillor Jim Clark (in the Chair); County Councillors Val Arnold, Philip Barratt, David Billing, John Clark, John Ennis, Michael Heseltine (substitute for Liz Casling) Shelagh Marshall OBE, Heather Moorhouse, Patrick Mulligan, Chris Pearson and David Simister.

Co-opted Members:-

District Council Members:- Kay McSherry (Selby), John Raper (Ryedale), Jane Mortimer (Scarborough), John Roberts (Craven), Tony Pelton (Richmondshire) and Ian Galloway (Harrogate).

In attendance:-

North Yorkshire County Council: Executive Members County Councillors Clare Wood and Tony Hall.

Hambleton Richmondshire & Whitby Clinical Commissioning Group: Dr Vicky Pleydell Chief Clinical Officer

South Tees Hospitals NHS Foundation Trust: Prof Tricia Hart, Chief Executive

York Teaching Hospital NHS Foundation Trust: Mike Proctor, Deputy Chief Executive and Wendy Scott, Director of Community Services

NHS England North Yorkshire & Humber Area Team: Chris Clarke Assistant Head of Primary Care

County Council Officers: Bryon Hunter (Scrutiny Team Leader), Jane Wilkinson (Legal & Democratic Services) Dr Lincoln Sargeant (Director of Public Health for North Yorkshire), Mike Webster (NYCC Assistant Director – Health & Adult Services).

Apologies for absence were received from County Councillors Liz Casling and Margaret Ann de Coursey-Bayley

Copies of all documents considered are in the Minute Book

59. Minutes

Resolved

That the Minutes of the meeting held on 5 September 2014 be taken as read and be confirmed and signed by the Chairman as a correct record.

60. Chairman's Announcements

- **GP Out of Hours Service in Richmondshire** – The Catterick based GP Out of Hours service had been temporarily transferred to Northallerton. The move was in response to a fire risk assessment which had deemed the premises at Catterick Garrison to be unsafe. As from 11 November 2014 the service was to relocate to the Harewood Medical Practice in Catterick Garrison. In the long term the intention was to relocate the service to the Friary Hospital in Richmond. Talks between the relevant parties were on-going and assurances had been given that contingency plans were being reviewed in the event of similar problems occurring in other services so that communications would be handled effectively and any interim solutions would not seriously undermine access to services.
- **Children's Congenital Heart Disease** – The final overarching report bringing together the findings of three separate reviews had now been published. The Chairman undertook to continue to provide regular updates on progress but did not anticipate a final conclusion being reached before the May 2015 General Election.
- **Healthcare developments in Craven** – The Chairman and County Councillor Phil Barrett had met with Airedale Wharfedale & Craven CCG to discuss healthcare developments in Craven. At that meeting they had been told that a consultation on urgent care was planned for the New Year.
- **Right Care First Time - Urgent Care Services in Scarborough and Ryedale** – An announcement identifying the preferred bidder to deliver urgent care services in Scarborough & Ryedale was anticipated in the New Year. The Agenda for the Committee's January meeting would include urgent care services in Scarborough & Ryedale. A Local Member informed the Committee that in the locality there was a great deal of dissatisfaction with the interim arrangements which were not regarded as being an adequate substitute. The overview and scrutiny committee at Scarborough Borough Council was looking into this and a further update would be provided at the January meeting.
- **NHS Five Year Forward View** – Published on 23 October 2014, set out a vision for the future of the NHS and proposals for change.
- **North Yorkshire Healthwatch Activity Update** – Whilst not able to attend the meeting that day a number of drop-in sessions and visits had been planned and further updates would be provided at future meetings.

61. Public Questions or Statements

There were no questions or statements from members of the public.

62. South Tees NHS Foundation Trust - Investigation by Monitor

Considered –

The covering report of Bryon Hunter, Scrutiny Team Leader describing work being carried out at South Tees Hospitals NHS Foundation Trust by Monitor, (the external regulator of NHS foundation trusts). Following investigations into a number of areas Monitor had announced that it remained concerned about the Trust's financial position and the rate of clostridium difficile infections.

Professor Tricia Hart, Chief Executive South Tees Hospitals HS Foundation Trust gave a presentation in which she summarised the actions that had been taken

across the Trust in response to tackling Clostridium difficile infection rates and improving the Trust's long term financial position.

The Committee noted that an external review had led to a detailed action plan being drawn up that had been agreed with Monitor. The Trust had now implemented a number of actions arising from the plan and was currently in the process of implementing the remainder and introducing systems to monitor its progress on a regular basis.

Members were advised that the target of no more than 49 cases of Clostridium difficile that had been set for reducing infection rates was challenging. As at the date of the meeting there had been 24 cases during the current year. This compared to a total of 54 cases in the previous year.

In respect of the financial shortfall the Committee noted that the Trust had hired management consultants to help cut costs and that it was in the process of appointing a transformation director to support delivery of its financial recovery plan. Members were advised that in order to achieve the level of savings required job losses were possible but assurances were given that patient safety would not be compromised. Other areas currently under consideration included making better use of IT and advances in technology as the Trust acknowledged it lagged behind in this regard. The Trust was also exploring a new service model for ophthalmology and had improved the productivity of its operating theatres which had reduced patient waiting times.

The Chairman queried whether the current financial model for the Trust was sustainable given its financial situation and asked if and when cost savings would impact upon the services it currently provided.

Prof Hart acknowledged the scale of the challenge the Trust faced but was confident that further work would produce more efficiencies and service improvements. The Chairman wished the Trust well but said he was not convinced that the level of savings required could be achieved. In his experience greater reliance on technology was not always the answer and there was no evidence that service integration and providing care closer to a patient's home was cheaper than in an acute setting.

A Member questioned the cost and value of employing management consultants and was advised that the Trust had been given no choice but that they had proved to be extremely useful and had come up with some very valuable suggestions and ideas.

In response to questions the Committee was advised that within the hospital clinicians were fully engaged and supportive of the initiatives described in the presentation. The Trust stressed its close working relationship with Hambleton Richmondshire & Whitby Clinical Commissioning Group and described how it was exploring on a joint basis GP referral rates, prescribing rates (including the use of antibiotics) and the Friarage Hospital being a beacon for rural healthcare. Assurances were given that the future of the Friarage Hospital was secure but that the services it provided may change.

Members acknowledged the actions taken by the Trust to date and asked to be kept informed of future progress. Professor Hart agreed to keep the Committee fully informed and to provide further more detailed information on prescribing levels.

Resolved -

That the Scrutiny of Health Committee continues its open dialogue with South Tees Hospitals NHS Foundation Trust.

That the Scrutiny of Health Committee looks forward to further briefings and involvement in any formal consultation that may be necessary in the future as the Trust transforms how it operates and reviews the service it delivers in order to achieve a long term financial position.

That Members of the Committee be circulated with data on prescribing levels within South Tees Hospitals NHS Foundation Trust.

63. York Teaching Hospital NHS Foundation Trust - Investigation by Monitor

Considered -

The report of the Scrutiny Team Leader describing investigations by Monitor, the Foundation Trust regulator at York Teaching Hospital NHS Foundation Trust. The Regulator had on 29 August 2014 began a formal investigation into the Trust's compliance with its licence. Details of the concerns raised by the external regulator were set out in paragraph 2 of the report.

Members' attention was drawn to a statement they had been sent prior to the meeting which confirmed that Monitor had following the receipt of evidence from the Trust of its monitoring and governance processes now closed its formal investigation.

The meeting then received a presentation from Mike Proctor, Deputy Chief Executive at York Teaching Hospital NHS Foundation Trust who described the action taken by the Trust in response to the licence compliance investigation.

Members noted that recruitment continued to be a recurring problem in some disciplines and were concerned that some patients waited up to 6/7 weeks before receiving an appointment for suspected cancer. The Committee was advised that patients were given the option of an earlier appointment but that this involved them having to travel further afield to an alternative hospital. Members were critical of those GPs who did not advise their patients to seek immediate medical intervention. In response to questions Members were advised that generally speaking broadband access was not a major issue. It affected only the margins of service provision such as community nurses use of mobile technology.

Members said they were reassured that Monitor had closed its investigation and would welcome further briefings in the future.

Resolved -

That the Scrutiny of Health Committee continues its open dialogue with York Teaching Hospital NHS Foundation Trust.

64. 'Fit4Future': Transforming Care in Whitby and The Surrounding Area

Considered -

The report of Hambleton Richmondshire and Whitby Clinical Commissioning Group on healthcare developments with Whitby and the surrounding area, specifically the procurement of Community and Out of Hours Services and options for the future of Whitby Community Hospital.

The report was presented by Dr Vicky Pleydell, Hambleton Richmondshire & Whitby CCG who in response to a request gave a brief description of each of the three

bidders that had been shortlisted to provide Community & Out of Hours Services. Assurances were given that steps had been taken to ensure that formation of a federation by the CCG would not give rise to any conflicts of interest. The Committee was advised that nationally there was a lot of interest in the work the CCG was doing.

Members commended the CCG on the public engagement it had undertaken. Quality, frankness and transparency had all been excellent.

With regard to Whitby Community Hospital the CCG was again congratulated on the public consultation it had taken. Members expressed their support for the preferred option and looked forward to continued involvement in developments at Whitby Hospital and in the planning of the services it would provide.

Resolved -

That the report be noted.

65. 2014 Annual Report of the Director of Public Health for North Yorkshire

Considered –

The 2014 Annual report of the North Yorkshire Director of Public Health.

Dr Lincoln Sargeant introduced what was his second annual report and gave a power-point presentation on the report's seven recommendations which he said had implications for scrutineers.

A copy of the annual report had been circulated to Members prior to the meeting and was also available on the County Council's web-site.

With regard to obesity Dr Sargeant stressed the positive impact weight loss had on associated conditions and said that in North Yorkshire there were no structured clinical pathways for weight management. He urged the Committee to discuss this with partners as part of its forward work programme in the New Year.

In respect of Child Health Information Systems the Committee was advised that Public Health England and NHS England were responsible for commissioning and delivering immunisation programmes. Dr Sargeant said that in North Yorkshire the take-up rate could be better. This impacted on early prevention and he encouraged the Committee to investigate the reasons why some people chose not to participate in screening programmes.

In respect of mental health he invited the Committee to explore how access to mental health services was promoted, what could be done to promote good mental health and what was being to combat the stigma and discrimination associated with mental illness.

Finally he highlighted issues around the sustainability of some Better Care Fund schemes. Where the voluntary sector was critical to delivery, he said it was important that volunteers had a quality experience and suggested that an action plan was needed.

Members noted the report recommendations and were informed that an action plan was currently being developed that would enable the Committee to monitor progress against each of the recommendations. The aim was to produce performance monitoring data next year but it was acknowledged that this would not be easy given the wide ranging nature of the recommendations in the report.

The Chairman supported by Members agreed that an action plan was needed in order to oversee delivery and agreed to take forward the recommendations in the conduct of the Committee's business.

Resolved -

That the report and presentation be noted.

66. Application by Escrick GP Practice to close Wheldrake and Naburn Branch Surgeries

Considered

The report of NHS England asking Members to comment on the proposed closure of GP branch surgeries in Wheldrake and Naburn by Escrick GP Practice. The report set out the background and reasons for the proposed closures.

The report was introduced by Chris Clarke Assistant Head of Primary Care at NHS England. He advised Members that he had visited the premises in question and confirmed that in essence both were just rooms with no facilities. Both premises had no disabled access, did not meet with patient confidentiality guidance and gave rise to concerns about infection control. The Committee was advised that GPs at the practice had told him that they would prefer to do a home visit rather than use either of the surgeries. Both surgeries were no longer used by patients and the situation had only come to light upon discovery by the Practice of its on-going responsibility for maintenance.

Members of the Committee offered no objection to the proposed closures. Members said they were satisfied with the information provided at the meeting and the content of the report.

Resolved -

That the Scrutiny of Health Committee offers no objection to the closure of GP branch surgeries in Wheldrake and Naburn by Escrick GP Practice.

67. Work Programme

Considered -

The report of Bryon Hunter, Scrutiny Team Leader inviting comments from Members on the content of the Committee's programme of work scheduled for future meetings.

Members noted the items scheduled for the January meeting. A Member made a request for the Committee to receive an update on the Mental Health Street Triage scheme being piloted in Scarborough. The request was supported by the majority of Members on the Committee and the Scrutiny Team Leader agreed to action.

Resolved -

That the content of the work programme and schedule are agreed and noted.

The meeting concluded at 12:45pm.

JW