

North Yorkshire County Council

Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 6 November 2015.

Present:-

Members:-

County Councillor Jim Clark (in the Chair)

County Councillors: Val Arnold, Philip Barratt, David Billing, Liz Casling, John Clark, Margaret-Ann de Coursey-Bayley, John Ennis, Shelagh Marshall OBE, Heather Moorhouse, Chris Pearson and David Simister.

Apologies for absence were received from: Cliff Trotter and Cllr Janet Sanderson.

Co-opted Members:-

District Council Representatives:- Kevin Hardisty (Hambleton), Judith Chilvers (Selby), Bob Gardiner (Ryedale), Jane E Mortimer (Scarborough), Karin Sedgwick (Richmondshire) and Ian Galloway (Harrogate).

In attendance:-

County Councillor Clare Wood

County Councillor Gareth Dadd

County Councillor Richard Welch

Scarborough and Ryedale Clinical Commissioning Group (CCG) : Simon Cox

South Tees Hospitals NHS Foundation Trust: Gill Hunt, Caroline Parnell and Ruth James

Hambleton, Richmondshire & Whitby CCG: Vicky Pleydell

Yorkshire Ambulance Service: Vince Larvin, Lorna Thornley and Ben Holdaway

Yorkshire and Humber Commissioning Support: Alex Trehwhitt

County Council Officers: Richard Webb, Dr Lincoln Sargeant, Ann-Marie Lubanski and Bryon Hunter

Approximately 20 members of the public.

Copies of all documents considered are in the Minute Book

97. Minutes

Resolved

That the Minutes of the meeting held on 4 September 2015 be taken as read and be confirmed and signed by the Chairman as a correct record subject to Councillor Keith Hardisty being changed to Kevin Hardisty.

98. Chairman's Announcements

The Chairman updated the Committee on the following matters:-

- **Dentistry in Bedale, Hawes and Leyburn** - NHS England (Yorkshire and Humber) are working with other interested parties in exploring options for the long term. The Committee will continue to closely monitor developments.
- **Work on Fracking to inform publication of the Joint Minerals and Waste Plan** – The Committee will be holding a joint meeting with the Transport, Economy and Environment Overview and Scrutiny Committee on Friday 22 January 2016 to look at this matter in detail. The objective of the meeting will be to agree policy advice to the Executive with a view to informing publication of the North Yorkshire Minerals and Waste Plan.

In preparation for 22 January Group Spokespersons met with an independent Public Health expert with a view to informing the lines of enquiry that might be pursued in January.

The British Geological Survey is establishing environmental baseline information and is liaising with Dr. Lincoln Sargeant, Director of Public Health with a view to Public Health England possibly using the area covered by the Minerals and Waste Plan to establish similar baseline information for Public Health.

99. Public Questions or Statements

Mr. David Tucker registered his wish to make a statement with regard to the Lambert Hospital – agenda item 6.

100. Ambition for Health and Out of Hospital Care Initiatives across Scarborough and Ryedale Area

Considered -

The report of the Corporate Director - Health and Adult Services and the Chief Officer, Scarborough and Ryedale Clinical Commissioning Group briefing Members on the plans to develop health and social care services across the Scarborough and Ryedale area.

Richard Webb and Simon Cox gave a presentation “Ambition for Health - Transforming health and social care services in Scarborough, Ryedale, Bridlington and Filey”.

Richard Webb introduced the topic and commented that the Committee was being given an opportunity to influence thinking at an early stage. The initiative is still very much at the development stage. He highlighted work taking place with partners across health and social care, with the voluntary sector and with NHS England. As the work also impacts on the East Riding Council it will be important to engage with overview and scrutiny in that local authority.

Members’ attention was drawn to the 3 main ambitions:

- Healthy lifestyles - to help people lead healthy lifestyles, supporting them to take control of their own health to prevent illness;
- Care at home - to improve the care provided at home and in the community with the aim of preventing people needing treatment in hospital;
- Sustainable services - to ensure that Scarborough Hospital and other major services are of a high quality and financially sustainable. Problems recruiting staff were also highlighted. The Committee was informed that the Health and Wellbeing Board is carrying out work to address these recruitment problems.

Simon Cox summarised the main priorities, in particular, the need to focus on prevention including self-care and helping people of all ages to lead healthy lifestyles. Smoking cessation would have a big impact.

He also referred to improvements in mental health services.

He envisaged a network of care being established across Scarborough, Bridlington and Malton Hospitals and with specialist care being provided from York Hospital.

In response to Members' comments and questions in relation to staff recruitment and retention Simon Cox advised that there are well established training providers particularly in the York area but people once trained tend to leave the area. Banks of staff would provide more flexibility. Richard Webb commented that a number of social workers had been successfully recruited in the Scarborough area recently.

Members queried whether enough was being done to establish why people are leaving. Simon Cox advised Members that this type of information is gathered but he added that organisations need to start using the information more than they currently do.

Members also raised questions over the sustainability of services at Scarborough Hospital. Simon Cox advised Members that he could not remember a time when people have not been concerned about Scarborough Hospital. He acknowledged that there are some real challenges but there are now opportunities to improve certain services. He cited the recently introduced Stroke pathway involving both Scarborough and York Hospitals. There had been some "teething" problems over ambulance transfer arrangements but things were working well and there had been no complaints. The National Stroke Director will be auditing the pathway in the coming weeks. His report is expected in the New Year.

Members acknowledged the importance of improved housing and the need to reduce alcohol abuse.

Simon Cox advised Members that an engagement process would shortly be launched which would include events and questionnaires for stakeholders and members of the public.

Resolved -

That the Committee:

- a) supports need for change and the broad principles of Ambition for Change.
- b) looks forward to continued involvement in the initiative.
- c) That the report of the National Stroke Director into the stroke pathway recently introduced in Scarborough be considered by the Committee in the New Year.

101. Annual Report of the Director of Public Health 2015

Considered -

The Annual Report of the Director of Public Health for North Yorkshire "The health of our children: Growing up healthy in North Yorkshire". Members were asked to receive the report and to consider how Members themselves could help to implement the recommendations.

Dr Lincoln Sargeant advised Members that this was his third Annual Report and that by focusing on children and young people it was an attempt to address issues which the whole health and social care system now facing.

He drew Members' attention the Annual Report's Recommendations as set out in his report:

- Child poverty - around 10% of all children are born into circumstances that will be a disadvantage to them
- 0 – 5 Healthy Child Programme
- Parenting Programmes
- Childhood Obesity
- Personal, Social, Health and Economic education in Schools
- Maximise opportunities for “Future in Mind” - improving mental health amongst young people.

He emphasised the importance of tackling health inequalities and promoting healthy lifestyles early in people's lives. He advised the Committee that in the Health and Wellbeing Strategy “A Healthy Start” is a key theme. Access to early year's education is tremendously important.

Members commented on the importance of working closely with schools to ensure that physical activity is not overlooked in the curriculum particularly as young people are very impressionable. Whilst people are young there is an opportunity to get them used to active lifestyles and with a view to this being carried forward into their adult life.

Similarly Members remarked on the importance of working with leisure centres to promote physical activity amongst young people.

Mental health problems such as loneliness were also highlighted by Members. They were reassured that this issue would be taken forward following publication of the national report “Future in Mind”.

Resolved -

- a) That the Committee commends the Director of Public Health on the publication of his Annual report and the focus on children and young people be supported.
- b) That the Annual Report be used as a reference document to inform the work of the Committee.

102. Measures to Mitigate the Closure of In-patient Beds at the Lambert Hospital, Thirsk

Considered -

The report asking the Committee to examine the extent to which robust plans across health and social care have been put in place to support people, particularly as the winter period is approaching following the temporary closure of beds at the hospital.

Vicky Pleydell apologised for the report having to be circulated late but commented it was important for the Committee to receive the exact up to date position. It was highlighted to Members that this is only a temporary closure and was brought about

by the South Tees Hospitals NHS Foundation Trust (STHFT) being unable to recruit nursing staff at the Hospital.

Members heard that as part of its Fit4theFuture Initiative the Hambleton, Richmondshire and Whitby Clinical Commissioning Group (HRWCCG) would be taking a long term view towards developing a community healthcare facility in the Thirsk. Vicky Pleydell also referred to the accommodation problems facing the two GP surgeries on the hospital site. The success of the approach in Whitby would inform the work in Thirsk.

Gill Hunt described the shortage of nurses that exist nationally and highlighted that the STHFT currently has a 6% vacancy rate. The Trust is actively marketing itself as an attractive place to work and it has a standing advertisement on the NHS recruitment website. The Trust is continually advertising and recruiting. Nursing staff for medical wards and theatres are especially difficult to recruit. Band 5 Registered Nurses are in short supply.

The Trust has recently published an advertisement for nurses specifically for the Lambert Hospital.

Cllr Jim Clark enquired as to whether or not it was likely that the Hospital would reopen following the review planned for January 2016. He commented that the Trust needs to be more open on this point.

Gill Hunt conceded that it was doubtful the Hospital would reopen at the end of January.

Vicky Pleydell described the work of the System Resilience Group and what is being done to assess people at home and on the Rutson Ward at the Friarage Hospital. The close monitoring of the situation will continue over the winter. In the longer term Members heard there may be scope to use care homes/extra care facilities for some patients requiring step-up and step-down care.

Anne-Marie Lubanski described how over and above plans which had already been drawn up in preparation for the winter period additional resources have been allocated to care services across the area as a result of the closure of the beds at the Lambert Hospital.

Mr David Tucker addressed the Committee:

- Commented that he was representing the Lambert Hospital Action Group (LHAG) and that he was accompanied by a number of nurses from the Hospital. He was also speaking on their behalf.
- described how the LHAG were lobbying for the Hospital to be reopened as a matter of urgency and that he would be monitoring the situation closely until it did reopen.
- Expressed concern at the manner in which the decision to close the Hospital had been taken in September.
- called on the Committee to require the STHFT not to take any such similar action without first consulting this Committee.
- communities in and around Thirsk need access to step-up, step-down care and palliative care locally.

Cllr Dadd, Member for Thirsk, referred to the unprecedented concerns which communities in and around Thirsk were expressing. He paid tribute to the work of the CCG and to the County Councils Health and Adult Services to strengthen community services and social care.

In response to Members' questions Gill Hunt commented that were in the region of 90 vacant Band 5 nursing posts out of approximately 1,500 nursing posts across the trust. She also commented that asking staff to work overtime could not be a long term solution.

Members expressed concern that they had not heard anything new to what had reported in September and that there appears to have been very little progress.

Vicky Pleydell commented that the closure of the ward would be significant system risk and commented that a way must be found to reopen the ward as a matter of urgency. Vicky referred to the potential for Practice Nurses to work more closely with the community teams. The Committee was informed that the Governing Body of the CCG at its meeting on 26 November 2015 would receive a report on this matter from the STHFT.

Resolved -

- a) The Committee expresses deep concern that there has been very little progress since September and that unless urgent action is taken immediately there will be very little chance of the ward reopening when the situation is reviewed in January 2016.
- b) Consideration around safety must include safety from the perspective of patients for whom being admitted to the Lambert Hospital is currently not an option.
- c) The Committee acknowledges the range of measures across health and social care that has been put in place to mitigate the situation but the situation remains a major concern to the Committee particularly as Vicky Pleydell commented there are major risks in the system.
- d) The Chairman be authorised by the Committee to write to the Trust requesting a formal response by the end of this month on progress towards recruiting new staff and if they have not been successful to set out the implications.
- e) Councillor Jim Clark to attend the meeting of the Governing Body to make further representations on behalf of the Committee including to call on the Trust and the CCG to examine every possible option for reopening the ward at the Lambert Hospital as a matter of urgency.

As Vicky Pleydell would shortly be retiring the Committee joined with the Chairman, Jim Clark, in thanking her for the level of co-operation she had always provided and in wishing her well for the future.

103. South Tees Hospitals NHS Foundation Trust (STHFT): Overview of on-going Work following on from review by MONITOR in 2014 and Response to Care Quality Commission (CQC) Inspection 2015

Considered -

A presentation by Ruth James, Director of Quality STHFT briefing Members on continuing work taking place across the Trust to address issues identified by MONITOR in 2014 and by the recent CQC Inspection.

Ruth James guided Members through her presentation. Ruth summarised how the action plan in response to the CQC Inspection is divided into 6 work streams:

- ❖ Staffing
- ❖ End of life care
- ❖ Medication
- ❖ Clinical standards

- ❖ Urgent care and accident and emergency
- ❖ Estate

Actions relating to staffing, clinical standards and estate are complete. Work in relation to medication and end of life care is on-going.

In respect of its financial situation Members noted the STHFT is on track to deliver year 2 of the 3 year plan and there are robust arrangements in place under which an externally validated action plan is in place to control rates of clostridium difficile.

Members welcomed developments taking place across the Trust such as improvements in the Accident and Emergency Units to create more child friendly environments.

Members were informed there are no immediate plans for service reconfigurations in the Trust for which a formal consultation would be required.

Resolved -

- a) That Ruth James be thanked for her presentation.
- b) The presentation be noted.

104. Yorkshire Ambulance Service (YAS) - Response to Care Quality Commission (CQC) Inspection

Considered -

The report of Locality Director, North and East Yorkshire Clinical Business Unit, YAS summarising a range of service developments in the Yorkshire Ambulance Service (YAS) including measures being taken in response to the recent Care Quality Commission Inspection and informing Members of action being taken in the Craven area to improve ambulance response times against national standards.

Vince Lavin commented that following the CQC Inspection improvements have been made with regards to standardised procedures in the work of the Hazardous Area Response Team (HART). He was confident that when the CQC carries out its follow-up inspection they will see that YAS now complies with the relevant guidelines.

In response to the CQC's comments about dirty ambulances he commented that a deep clean of an ambulance takes approximately 2 hours and is carried out once per month. A new "pit stop" approach for cleaning ambulances has been set up with a dedicated team of staff rather than relying on paramedics to clean the ambulances themselves when they have time.

In terms of service developments in North Yorkshire Vince Lavin highlighted work in the Hambleton, Richmondshire and Whitby area under which Emergency Care Practitioners are being located in GP surgeries. These staff have a broader role than paramedics. YAS is working closely with GP surgeries to establish more pathways into which patients can be referred and which have the added benefits of preventing ambulances leaving the area.

YAS and the network of Community First Responders are also working with the Fire and Rescue Service to provide a more co-ordinated response to emergency calls

Vince Lavin summarised that YAS' performance on a range of key measures.

He advised Members that:

- The current survival to discharge is better than the same period last year and for a rural area is better than the YAS average. He added that this has been possible because of the skill of rural clinicians working proactively with Community First Responder support schemes.
- “Return of Spontaneous Circulation” (ROSC) performance is very good in rural areas such as North Yorkshire – it is ahead of the YAS average.
- The Stroke care bundle is constantly very good.
- “Stemi” care bundle is ahead of the national standard.
- The “Stroke 60” target is always a challenge in rural areas has improved in NY but is declining nationally.

Members expressed concern that some of the issues identified by the CQC were fundamental aspects of care and were surprised that the problems had not been identified by YAS itself.

Councillor Welch addressed the Committee and summarised a range of incidents in which YAS’ response times had given rise to serious concern in the Craven area.

Resolved -

- a) That measures taken by YAS in response to the CQC Inspection be noted and that the outcome of the CQC’s follow-up inspection be reported to this Committee in due course.
- b) That the response times that YAS is achieving be noted.
- c) That arrangements be made for YAS to attend a meeting of the Craven Area Committee to discuss ambulance response times with local Members.

105. Work Programme

Considered -

The report of the Scrutiny Team Leader presenting the future Work Programme and inviting Members to comment/amend and suggest additional items to be included.

Councillor Jim Clark drew Members’ attention to the joint meeting with the Transport, Economy and Environment Overview and Scrutiny Committee on 22 January 2016. This will be a single item agenda with a view to the Committees informing the Minerals and Waste Plan with regard to Fracking operations. Councillor Clark also highlighted that the mid-cycle briefing on 11 December will be used to keep abreast of developments such as the All Age Autism Strategy, Child and Adolescent Mental Health Services and Mental Health Services the in Selby area now that the Tees, Esk and Wear Valleys NHS Foundation Trust has taken over from the Leeds and York Partnership NHS Foundation Trust.

Resolved -

That the Work Programme be noted.

The meeting concluded at 1.20pm.
BH