

North Yorkshire County Council Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 7 April 2017.

Present:-

Members:-

County Councillor Jim Clark (in the Chair)

County Councillors: Val Arnold, Philip Barrett, David Billing, Margaret-Ann de Courcey-Bayley, Caroline Dickinson, John Ennis, Shelagh Marshall OBE, Heather Moorhouse, Chris Pearson and David Simister.

Co-opted Members:-

District Council Representatives:- Kevin Hardisty (Hambleton), Judith Chilvers (Selby), Jane E Mortimer (Scarborough), Wendy Hull (Craven), Jamie Cameron (Richmondshire) as substitute for Karin Sedgwick and Ian Galloway (Harrogate).

In attendance:-

Amanda Bloor, Chief Officer, NHS Harrogate and Rural District Clinical Commissioning Group

Chris O'Neill, Humber Coast and Vale STP Programme Director

Lindsay Cunningham, Humber Coast and Vale STP Communications and Engagement

Janet Probert, Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG

Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG

Liz Herring, Head of Service Adult Mental Health and Substance Misuse North Yorkshire, Tees Esk and Wear Valleys NHS Foundation Trust.

County Councillor Clare Wood, Chair of the North Yorkshire Health and Wellbeing Board

County Council Officers:-

Daniel Harry, Scrutiny Team Leader

Apologies for absence were received from: County Councillor John Clark, District Councillor Karin Sedgwick (Richmondshire) and County Council officer Amanda Reynolds, Assistant Director for Integration, Health and Adult Services.

Copies of all documents considered are in the Minute Book

148. Minutes

Resolved

That the Minutes of the meeting held on 27 January 2017 be taken as read and be confirmed and signed by the Chairman as a correct record.

149. Any Declarations of Interest

There were no declarations of interest to note.

150. Chairman's Announcements

The Chairman provided the Committee with an update relating to the following matters:-

Mid Cycle Briefing – 3 March 2017

Cllr Jim Clark confirmed that the following were discussed at the Mid Cycle Briefing:

- The outcome of the initial consultation on a new mental health hospital for the Vale of York and the progress being made with the development of an outline business case that will go to the Governing Body meeting on 4 May 2017.
- The redevelopment of the Whitby Hospital and the continuous and ongoing engagement with public and stakeholders. The aim is to start building work in Autumn 2017.
- The extended scrutiny of 'End of life care in North Yorkshire' and the presentation of the final report to the North Yorkshire Health and Wellbeing Board on 17 March 2017.
- The work being undertaken by North Yorkshire County Council Public Health and Public Health England to monitor the potential human health impacts of shale extraction at Kirby Misperton.

These items were noted by the Committee Members.

Castleberg Hospital in Settle

Daniel Harry, Scrutiny Team Leader, gave an update on the recent temporary closure of the Castleberg Hospital in Settle.

Daniel Harry stated that Sue Pitkethly, Chief Operating Officer at Airedale Wharfedale and Craven CCG, had recently confirmed that the Castleberg Hospital in Settle was going to be closed on a temporary basis due to serious concerns about the safety of the building. In recent weeks there have been sewerage leaks in the building, power cuts, no heating, no hot water and fire alarms failing.

There are typically between 5 and 10 in-patients who tend to be older people who are there for a period of recuperation. The plan is to transfer patients to the Airedale Hospital site on a temporary basis, whilst the NHS estates determine what can be done repair the building and return it to safe use.

Daniel Harry confirmed that Airedale, Wharfedale and Craven CCG had spoken to North Yorkshire County Council Health and Adult Services and that there may be opportunities to use some social care beds locally, as opposed to transferring patients to Airedale Hospital.

Cllr Jim Clark raised his concern that Castleberg Hospital was in danger of going the same way as the Lambert Hospital in Thirsk, which closed temporarily and then never re-opened.

There followed a discussion, with the key points summarised as below:

Cllr Shelagh Marshall OBE raised her concerns about the distances people will have to travel now that the hospital has been closed.

Cllr Philip Barrett expressed concern that the Scrutiny of Health Committee had been circumvented. Also, that the Castleberg Hospital served an area much larger than Settle and so any resettlement arrangements would need to take this into account.

Cllr Wendy Hull acknowledged the concerns raised by the temporary closure of the Castleberg Hospital but noted that there were alternative models of delivery for integrated health and social care that could be delivered. She also stated that any support of North Yorkshire County Council in the resettlement of existing and future patients would be appreciated.

Cllr Health Moorhouse stated her disappointment with the Foundation Trust and their lack of early engagement with patients and key stakeholders over the problems experienced with the running of the hospital.

Resolved –

- a) That senior representatives from the Airedale, Wharfedale and Craven CCG and Airedale NHS Foundation Trust attend the next meeting of the Committee to explain what led to the temporary closure of the Castleberg hospital site and what the plans there are for future provision of that service.

151. Public Questions or Statements

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

152. Sustainability and Transformation Plans

Considered –

The report of Amanda Bloor, Chief Officer, NHS Harrogate and Rural District Clinical Commissioning Group, Janet Probert, Chief Officer, NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group and Chris O'Neill, Humber Coast and Vale STP Programme Director on the current position on the development of the STP plans and also the outcome of the refresh of the NHS Five Year Forward View and the revised NHS England guidance for STPs.

Amanda Bloor introduced this item, providing an update on progress being made with the development of the three Sustainability and Transformation Partnerships that cover North Yorkshire. She emphasised that the focus remained upon the provision of integrated and responsive care in the community, with specialist care offered in regional centres where this made clinical sense.

Amanda Boor stated that primary care, the first point of contact with health services in the community, included a wide range of agencies and organisations and was not just about GPs. The integration of primary care services in 'hubs' across the county offered real opportunities for sustainable and local care.

In reference to the Harrogate and Craven element of the West Yorkshire and Harrogate STP, Amanda Bloor made the following points:

- Current STP plan is well aligned to the priorities in the recently released NHS England 'Next Steps on the NHS Five Year Forward View'
- Awaiting confirmation of transformation funding to support the development of cancer diagnosis and A&E services
- Workforce issues are steadily being addressed
- Anticipated that there will be additional funding to support diabetes prevention, screening and treatment
- A joint committee of health commissioners across the STP has been established.

In reference to the North Yorkshire element of the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP, Janet Probert made the following points:

- Both physical and mental health services are being reviewed in parallel
- Greater use of primary care services is being looked at to help reduce hospital admissions, such as more testing in the community at GP practices
- Focus upon the best quality service and where it makes best sense to provide it
- More use of early diagnosis and treatment
- Expansion of the 'step-up and step-down' system of beds in the community
- Stronger links with care homes and nursing care homes, looking at ways to support the providers and promote a resilient and stable market of care across more rural areas.

In reference to the North Yorkshire element of the Humber Coast and Vale STP, Chris O'Neill made the following points:

- The plans that were published in October 2016 were just the starting point
- The planning for changes to health services was initially thought to have been needed to meet a need a number of years in the future. It is apparent that the need is now, which leaves less time to plan
- The priority is the same for Humber Coast and Vale as for the other STPs covering North Yorkshire, being to develop integrated services that are local with a smaller number of centralised specialist services provided where there is a strong business case to support it
- The development of an integrated system of hospital services, primary care and social care based in Scarborough and Ryedale is a model that could be applied elsewhere
- There are also developments in the Vale of York and the creation of an Accountable Care System.

Cllr Jim Clark re-iterated the concerns that had previously been raised by the Committee regarding the STP process, specifically:

- The apparent lack of meaningful engagement with non-NHS services
- That the increasing demand upon social care services will impact upon NHS services, placing the achievement of identified NHS savings in doubt
- The shortage of necessary capital funding to enable service transformation
- The impact of any NHS-led service re-configuration upon travel distances and times
- The risk posed to local health and social care, community-based funding and services in the county by the need to support acute care and increase capacity in large, urban population centres elsewhere
- That short term workforce shortages are driving reconfiguration and not patient need.

There followed a general discussion on the development of the STPs.

Cllr David Billing raised concerns about the ability of the NHS to successfully undertake large procurement exercises, particularly in the wake of a number of failed procurements nationally.

In response, Chris O'Neill stated that a NHS England assurance process had been introduced that helped to ensure that any procurement was robust and not open to challenge.

Cllr Wendy Hull noted that there needed to be a full and open discussion with the public about the provision of health care services and when it was appropriate for services to remain local and when it was appropriate for them to be centralised.

Janet Probert agreed and stated that the challenge for the NHS was articulate the evidence in a way that was easy to understand and not to resort to jargon or technical explanations.

Cllr Chris Pearson queried what role community pharmacies had to play in the delivery of primary care, particularly as the Scrutiny of Health Committee had recently heard that central government funding was being reduced and that this may lead to mergers and/or closures of community pharmacies in the longer term.

Amanda Bloor stated that a broad range of allied health professionals had a role to play in the development of integrated and local community care services that took the pressure off GPs and Hospitals.

Cllr Philip Barrett suggested that greater use could be made of GP practices, where there was capacity to do so. He questioned, however, whether there was a willingness amongst GPs to change how they work.

Cllr Jane Mortimer asked where the necessary capital funding would come from the develop the necessary hospital and community infrastructure.

In response, Janet Probert stated that some capital could be generated by partial or complete sales of existing sites, such as in the case for the redevelopment of the Whitby Hospital. In terms of the national STP capital funding pot, each area would have to make a bid for funding and that an award would be made on the strength of the business case.

Cllr Heather Moorhouse suggested that the whole approach to the Accident and Emergency service provision in the county needed to be re-thought.

In summing up, Cllr Jim Clark noted that the messages given out by NHS England were often confused and that further engagement was needed with the public to make it clear what services there were and which were most appropriate for different conditions at different points in time. Otherwise, people would continue to go to their GP or Accident and Emergency, when they did not need to.

Daniel Harry confirmed that both a copy of the presentation and the paper by Chris O'Neill on the Humber Coast and Vale STP would be circulated to Committee Members by email after the meeting.

Resolved –

- a) Thank Amanda Bloor, Janet Probert and Chris O'Neill for attending
- b) That an update on the development of the STPs and any outline programme for formal public consultation be brought to a future meeting of the Committee.

153. Transforming our Communities – Mental Health Services

Considered –

The report of Janet Probert, Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG, Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG and Liz Herring, Head of Service Adult Mental Health and Substance Misuse North Yorkshire, Tees Esk and Wear Valleys NHS Foundation

Trust providing the context and background to a proposed re-configuration of adult and older peoples' mental health services in Hambleton, Richmondshire and Whitby.

Janet Probert gave an overview of the pre-engagement work that had been undertaken and people's priorities, as summarised below:

- keep care close to home
- end mixed sex units
- maintain high levels of privacy and dignity
- improve crisis care
- make sure that the right care is in place at the right time
- focus upon home-based care rather than hospitals
- treat people as a whole person and not just as a diagnosis
- treat physical ill health at the same time as mental ill health.

Lisa Pope highlighted that over time the minimum requirements and standards for mental health services had risen as had the expectations of the Care Quality Commission (CQC). In many cases, the existing service provision was not future proof and in some cases insufficient to meet the regulatory standards. It was noted that the CQC had previously raised concerns about the mental health units at the Friarage Hospital in Northallerton.

Janet Probert emphasised that NHS England was promoting collaborative approaches across physical and mental health care services.

Cllr James Cameron noted that there remained a significant social stigma around mental ill health and this prevented people from seeking treatment at the early stages.

Liz Herring stated that Tees Esk and Wear Valleys NHS Foundation Trust is working with North Yorkshire County Council on ways in which people can be encouraged to come forward and seek help at the early onset of mental ill health.

Janet Probert referred to the 'Time to Change' campaign which is aimed at ending mental health stigma. A link will be circulated.

Daniel Harry confirmed that a copy of the presentation would be circulated to Committee Members by email after the meeting.

Resolved –

- a) Thank Janet Probert and Lisa Pope for attending
- b) That a further report on the proposed next steps for the process of service reconfiguration and consultation on proposals be brought to this committee at the meeting on 23 June 2017.

154. Work Programme

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, highlighting the role of the Scrutiny of Health Committee and reviewing the work programme, taking into account current areas of involvement and decisions taken in respect of earlier agenda items.

Resolved –

a) That the Work Programme be noted.

155. Chairman's closing comments

Cllr Jim Clark noted that this was the last meeting of the North Yorkshire Scrutiny of Health Committee before the May local government elections. He passed on his best wishes to all those people who were standing for re-election and also to those that had decided to stand down and move onto other things. In particular, he thanked Cllrs Shelagh Marshall OBE, Clare Wood and David Simister for their support over the past years.

In response, committee members expressed their thanks to Cllr Jim Clark for all of his work as the Chair of the Committee and wished him well for the future.

The meeting concluded at 12:00

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