North Yorkshire County Council Scrutiny of Health Committee

ITFM 1

Minutes of the meeting held at County Hall, Northallerton on Friday 14 September 2018 at 10 am.

Present:-

Members:-

County Councillor Liz Colling (in the Chair) County Councillor Val Arnold, Philip Barrett, John Mann, Zoe Metcalfe, Heather Moorhouse, Chris Pearson, Roberta Swiers and Cliff Trotter (substitute for John Ennis).

Co-opted Members:-

District Council Representatives:- Judith Chilvers (Selby), Bob Gardiner (Ryedale), Jane E Mortimer (Scarborough) and Ann Myatt (Harrogate).

In attendance:-

Peter Beckwith, NHS Humber Foundation Trust

Dr Adrian Clements, South Tees Hospitals NHS Foundation Trust

Gill Collinson, Hambleton, Richmondshire and Whitby Clinical Commissioning Group Adele Coulthard, Director of Operations, Tees, Esk and Wear Valleys NHS Foundation Trust Martin Dale, Strategic Project Manager, Tees Esk and Wear Valleys NHS Foundation Trust Polly Etheridge, Policy and Scrutiny, Office of the Police and Crime Commissioner for North Yorkshire

Julia Harrison Mizon, Care Group Director, NHS Humber Foundation Trust

Jenni Newberry, Head of Commissioning, Office of the Police and Crime Commissioner for North Yorkshire

Denise Nightingale, Vale of York Clinical Commissioning Group

Sue Peckett, Scarborough and Ryedale Clinical Commissioning Group

Patrick Scott, Director of Operations in York and Selby, Tees Esk and Wear Valleys NHS Foundation Trust

Lucy Tulloch, Service Manager, Friarage Hospital, Northallerton

Executive Members: Cllr Caroline Dickinson

County Council Officers: Daniel Harry (Scrutiny)

Press and public: Stuart Minting, Local Democracy Reporter.

Apologies for absence were received from: County Councillors Jim Clark, John Ennis, Mel Hobson, Andy Solloway, Robert Windass and from District Councillors Kevin Hardisty (Hambleton District Council representative), Wendy Hull (Craven District Council representative), Karin Sedgwick (Richmondshire District Council representative)

Copies of all documents considered are in the Minute Book

53. Minutes

Resolved

That the Minutes of the meeting held on 22 June 2018 be taken as read and be confirmed and signed by the Chairman as a correct record.

54. Any Declarations of Interest

There were no declarations of interest to note.

55. Chairman's Announcements

In the absence of the committee Chairman, Cllr Jim Clark, there were no announcements.

56. Public Questions or Statements

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

57. Integrated Prevention, Community Care and Support in Scarborough and Ryedale

Considered -

The presentation by Julia Harrison-Mizon, and Peter Beckwith, NHS Humber Foundation Trust on the community services provided in the Scarborough and Ryedale area.

Peter Beckwith introduced the presentation and provided an overview of the NHS Humber Foundation Trust, its leadership and scope.

Julia Harrison-Mizon then gave an overview of the services that were being offered under the new contract and some of the challenges faced, as summarised below:

- The new service has four distinct elements: prevention and promotion of health and wellbeing; specialist nursing for the management of long term conditions in the community like diabetes; a crisis service that is aimed to reduce the number of admissions to hospital; and a single point of contact and access, via the Customer Access Service
- The focus is upon building partnerships than enable a 'one team' approach. This includes having data sharing in place that means that patients only have to tell their story once
- The priority was upon a safe and efficient transfer of staff and patients across to the new service. Over 200 staff transferred under TUPE and 5,500 referrals and 4,140 unique patients migrated to the Scarborough and Ryedale Community Services clinical system
- There are 3 hubs that provide services across the patch. These are: Scarborough and North (60,000 pop.), South of Scarborough (30,000 pop.); and Ryedale (30,000 pop.).

Cllr Health Moorhouse queried whether any workforce pressures had been experienced in setting up the new service, as had been experienced elsewhere in the county, particularly in rural areas.

In response, Julia Harrison-Mizon said that there had been some churn of staff, as was to be expected of any significant change in service, but that the new service was attractive to prospective employees as it offered greater support, independence and autonomy. She said that there was a strong focus upon growing their own staff and professional development.

Cllr Val Arnold asked who provided services to that part of Ryedale not covered by the new contract with NHS Humber Foundation Trust (FT).

Julia Harrison-Mizon replied that this would be the remit of the Vale of York Clinical Commissioning Group (CCG) and the York Teaching Hospital Foundation Trust and that they were working closely with them to co-ordinate care.

Sue Peckett of the Scarborough and Ryedale CCG said that the CCG was working with the Vale of York CCG and the York FT on the 'One Ryedale' project to ensure that care was co-ordinated.

Cllr Chris Pearson asked how the three organisations managed patient flows through Malton and Bridlington hospitals and also what was being done around mental health under the new contract.

In response, Julia Harrison-Mizon said that although Malton hospital was owned by York FT, in-patient services were provided by NHS Humber FT as part of the new contract.

Cllr Liz Colling asked about the development of services at Whitby Hospital and whether an update could be provided at a future meeting of the committee.

Cllr Bob Gardiner queried what district nursing services were in place and how they were supported.

Julia Harrison-Mizon said that they were a key part of the services that were delivered in the community and that they were employed by NHS Humber FT.

Cllr Philip Barrett asked how long the contract was in place for and what allowances had been made for the increases in population in the area linked to housing growth.

Julia Harrison-Mizon said that the contract was in place for 5 to 7 years and that there was capacity within the service and the contract to manage an increase in demand associated with new housing developments.

Cllr John Mann noted that the Health Trainers Scheme had been very successful.

Julia Harrison-Mizon said that it was one of a number of community-based programmes and interventions that were innovative and which helped to reduce the demand for acute hospital in-patient services. Other examples were: weight management; social prescribing by GPs; and work being done with MIND and the SMILE Foundation. Julia Harrison-Mizon said that she would share a link to a film about social prescribing by GPs that could be sent out to committee members.

Cllr Liz Colling asked the following questions: how is the new community service going to work with services provided by North Yorkshire County Council; is the missed call rate of 6% by the Customer Access Service acceptable; what is the future of the inpatient beds at Malton hospital; could more be done to align commissioning arrangements so that Ryedale and other areas were not artificially split, with different providers and so services in neighbouring areas?

In response, Julia Harrison-Mizon said that NHS Humber FT has a history of working closely with North Yorkshire County Council and would continue to seek opportunities for integrated working. She noted that the Council had submitted a bid for the contract to run Integrated Prevention, Community Care and Support in Scarborough and Ryedale but had not been successful.

In terms of the Customer Access Service, Julia Harrison-Mizon said that the statistic related to calls not answered within 15 seconds. Any call that was waiting to be

answered for more than 15 seconds was automatically transferred to another team to be picked up. As such, these were not calls that were left unanswered.

Sue Peckett responded to the query about the long term use of the in-patient beds at Malton Hospital. She said that the use of the beds was focussed upon rehabilitation and reablement and that the bed occupancy was now around 90%, with the length of stay reducing. The use of the beds was under an ongoing, annual review.

Sue Peckett acknowledged that greater economies of scale could be achieved by the 4 CCGs that cover most of North Yorkshire working together more closely and that steps towards this were being made with the potential appointment of one Accountable Officer for Scarborough and Ryedale CCG, Harrogate and Rural District CCG and Hambleton, Richmondshire and Whitby CCG.

Resolved -

- 1) Thank all for attending
- 2) Representatives from NHS Humber Foundation Trust to attend a future meeting of the committee to update on the services that are provided in Whitby
- 3) Representatives from NHS Humber Foundation Trust and the Scarborough and Ryedale CCG to attend a future meeting of the committee to update on the use of the two in-patient wards in Malton Community Hospital
- 4) Representatives from NHS Humber Foundation Trust and the Scarborough and Ryedale CCG to keep the committee informed of the progress being made with the 'One Ryedale' approach to service development and delivery.

58. Services for Vulnerable People with Mental Health Needs who are in contact with the Criminal Justice System

Considered -

The report of Julia Mulligan, North Yorkshire Police and Crime Commissioner, on the number of people who are dealt with by the Police who appear to be in some form of mental distress.

Jenni Newberry, Head of Commissioning, Office of the Police and Crime Commissioner (OPCC) for North Yorkshire presented the report on behalf of Julia Mulligan who had sent her apologies as she was not able to attend. The key points from the report are summarised below:

- North Yorkshire police data shows a steady increase over the last 4 years in the use of health based places of safety
- Often the Police are used to transport people, as there is no ambulance available. In 2017, the police conveyed 52% of s.136 detentions to a health based place of safety
- Public Safety and Welfare incidents dealt with by the police in 2017/18 is currently at 79,709 which is up by 34.16%
- There are currently four s.136 suites across North Yorkshire and York
- The closure of the mental health wards in the Friarage Hospital in Northallerton and possibly those at Briary Wing in Harrogate Hospital, would reduce the capacity by half. Data from the police and the NHS both suggest that the number of patients detained will continue to increase and so reducing the current provision of beds is not an option
- A number of services have been jointly funded by the OPCC to respond to this rising demand, including: York Pathways; FOCUS; and Alternative Places of Safety.

Jenni Newberry said that welfare and public safety issues were impacting upon the Police and were taking time and resources away from responding to crime. She said that the Office of the Police and Crime Commissioner have devoted a great deal of time effort in working with the CCGs and Tees Esk and Wear Valleys NHS Foundation Trust to develop new ways of working that will reduce the demand upon the police. This included developing new and innovative services to fill gaps in service. The issue remained, however, that the likely reduction in s.136 suite capacity would have a huge impact upon the police.

Cllr Liz Colling asked whether there was a more detailed analysis of the data available that would help the committee to better understand the root cause of the problem and so which organisations were best placed to respond. In particular, how many people who presented to the police in a state of distress were intoxicated on drugs and/or alcohol and highly emotional, rather than mentally ill.

Cllr Liz Colling asked Adele Coulthard, Director of Operations at Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), whether she would like to engage in the discussions. Adele Coulthard was attending for a subsequent item on the agenda.

Adele Coulthard said that there was a difference in how a 'place of safety' was interpreted.

Jenni Newberry said that the definition worked to by the OPCC and the police was that outlined in recent Home Office guidance that stated that "The expectation remains that, with limited exception, the person's needs will most appropriately be met by taking them to a 'health-based' place of safety - a dedicated section 136 suite where they can be looked after by properly trained and qualified mental health and other medical professionals."

Adele Coulthard said that a Crisis Care Concordat was in place that helped ensure that agencies worked together to promote a joined up response to people in crisis would had mental health needs. This was jointly chaired by the Police and Crime Commissioner and Amanda Bloor, Accountable Officer for the Harrogate and Rural District CCG.

Adele Coulthard offered to share the data that she had about the profile of people who currently use the s.136 suites in the county. She said that, in her experience, many people who were in distress in public places were intoxicated with drugs and/or alcohol and highly emotional. They had no underlying mental health problem and simply needed somewhere to calm down and dry out.

Adele Coulthard said that some really positive examples of joint work with the OPCC and the police were underway and beginning to have an impact. This included the 'Street Triage' scheme.

Adele Coulthard said that the Mental Health Act allowed Accident and Emergency and other sites to be used as a health-based place of safety. This was cheaper than using dedicated s.136 suites, which cost around £0.5 million pounds a year to run but were often rarely used. She said that, on average, the s.136 suite at the Friarage was only used 3 times a month.

Adele Coulthard stated that two dedicated s.136 suites would be enough to meet demand. There would then be a further six health-based places of safety that could be accessed that would be supported by people that could help address the emotional needs of people who were in distress but not mentally ill. She said that further work was being done with the Yorkshire Ambulance Service to address the concerns that had been raised about transport. All of this was being done through the Crisis Care Concordat.

Cllr Heather Moorhouse raised her concerns that agencies did not seem to be working together effectively.

Cllr Zoe Metcalfe said that she would welcome the roll out of the street triage programme across the county and asked what provision was in place for children and young people who were in a state of distress in public places.

Adele Coulthard replied that an s.136 suite was available for use by all ages and oncall support was available from TEWV. It was noted, however, that not many children or young people used s.136 suites.

Cllr John Mann queried when the pause in the development of mental health in-patient services would end.

Adele Coulthard said that a comprehensive review of mental health services in and around Harrogate was currently underway and that it was intended to commence the implementation of a new service model in the spring of 2019, subject to any necessary public consultation.

Jenni Newberry said that the OPCC was keen to see the roll out of street triage across the county and was seeking support from the relevant CCGs and from TEWV to do so.

Adele Coulthard stated that the review of mental health service provision in Harrogate would pick up street triage and other similar interventions and programmes.

Cllr Philip Barrett asked what role Airedale, Wharfedale and Craven CCG and Bradford FT had to play in the discussions about the provision of mental health services.

Adele Coulthard replied that TEWV worked closely with Bradford District Care NHS Foundation Trust to co-ordinate care provision in North Yorkshire. She said that North Yorkshire Police have protocols in place with the FT.

Jenni Newberry indicated that the data in the report included Craven.

Resolved -

- 1) Thank all for attending
- 2) Adele Coulthard of Tees Esk and Wear Valleys NHS Foundation Trust (TEWV) and Jennie Newberry of the Office of the Police and Crime Commissioner (OPCC) to provide the committee with detailed data on those people who are taken by the Police to a s.136 suite or place of safety
- Adele Coulthard of TEWV and representatives from the Crisis Care Concordat to attend a future meeting of the committee to outline the scope of their work and the progress that has been made against targets/objectives.

59. Mental Health Inpatient Services in York - Development of the new hospital and community services transformation

Considered -

The report of Martin Dale, Strategic Project Manager and Patrick Scott, Director of Operations in York and Selby, Tees Esk and Wear Valleys NHS Foundation Trust, and Denise Nightingale of the Vale of York Clinical Commissioning Group providing an update regarding the development of the new mental health hospital which is being built on Haxby Road in York, and the proposed community mental health hub for Selby.

Martin Dale introduced the report and provided an overview of the current situation, the key points of which are as summarised below:

- A new purpose-designed 72 bed hospital is due to be open in April 2020
- The Full Business Case was approved by TEWV Board of Directors on 22nd May 2018
- TEWV is investing approximately £37m (including VAT, fees and land purchase) from internal cash resources to develop the new hospital
- A new community mental health hub for Selby is in development and will also be funded by TEWV from its internal capital resource
- Once a site is identified it is anticipated that the building programme will take approximately 24 months from site purchase to operational handover
- There has been extensive engagement with service users and carers
- TEWV has partnership arrangements with York St John University, the Joseph Rowntree Housing Foundation and the University of York which have helped with the development of both the York and Selby sites and services.

Martin Dale said that, once the new hospital in York was up and running, there would be a staged transfer of patients. He said that the Selby site offered an opportunity to deliver a range of services from one site, which currently were delivered from a number of unsuitable and disparate sites.

Patrick Scott said that they were looking for a site for the Selby community hub, as the site that had previously been identified had been bought by a housing developer.

Cllr Chris Pearson asked where the new hospital would be built on Haxby Road.

In response, Martin Dale said that it was next to the York St John University sports campus and benefited from good bus access, being on the No.1 bus service route.

Patrick Scott said that the existing bus stops and shelters were to be upgraded as part of the scheme.

Cllr Liz Colling asked what the links were with the building of the new York hospital and the pause on the build of the mental health in-patient unit at Cardale Park in Harrogate.

Martin Dale replied that the two developments were separate and distinct and that the increase in the number of beds at the York hospital from 60 to 72 was a result of a need to future proof the site.

Adele Coulthard was invited to speak at this point and said that an engagement exercise was underway in Harrogate and the surrounding area to see how the NHS £ could be used to best effect. The options that were being developed would need to go through the governance processes for TEWV, the CCG, NHS England and the Clinical Senate before going out for a formal public consultation, if a consultation was necessary.

Cllr Chris Pearson queried where the community hub would be built and what would happen to the existing Worsley Court site.

Patrick Scott said that the price of development land was such that suitable sites were often out of reach of public sector organisations. This meant that the plans for the Selby community hub may have to be tailored to fit the site that is available. In terms of Worsley Court, this building was not fit for purpose and so would be handed back to NHS Property Services, once vacated.

Resolved -

- 1) Thank all for attending
- 2) Martin Dale and Patrick Scott from TEWV to attend a future meeting of the committee Mid Cycle Briefing to provide an update on progress with the

development of the new in-patient facility in York and the new community hub in Selby.

60. Transforming Adult and Older People's Mental Health Services in Hambleton and Richmondshire

Considered -

The oral update of Gill Collinson, Hambleton, Richmondshire and Whitby CCG and Adele Coulthard, Tees, Esk and Wear Valley NHS Foundation Trust.

Adele Coulthard said that there had been no significant progress since the last update to the committee in June 2018. The date for the completion of the work to repair and refurbish the buildings at the Roseberry Park mental health hospital was not certain, as the scale of the works needed was still being ascertained.

Adele Coulthard said that more resources had been put in place in Hambleton and Richmondshire to enable more robust home treatment, reducing the need for in-patient care at the Friarage. She said that staff and service users and carers were being kept informed of progress with the Roseberry Park site and plans for the move of patients across to there.

Adele Coulthard confirmed that the plans for the mental health community hub on the Friarage site were due to be submitted to Hambleton District Council.

Resolved -

- 1) Thank all for attending
- 2) Adele Coulthard from TEWV and Gill Collinson from the Hambleton, Richmondshire and Whitby CCG to provide further updates to the committee and the Mid Cycle Briefings on progress with the refurbishment of the Roseberry park in-patient hospital in Middlesbrough and the development of the new community hub at the Friarage in Northallerton.

61. Building a Sustainable Future for the Friarage Hospital, Northallerton (including the dedicated ambulance for maternity services and paediatrics)

Considered -

The oral report of Gill Collinson, Hambleton Richmondshire and Whitby CCG, Dr Adrian Clements, South Tees Hospitals NHS Foundation Trust and Lucy Tulloch, Service Manager, Friarage Hospital

Dr Adrian Clements confirmed that both the Hambleton, Richmondshire and Whitby CCG and South Tees Hospitals NHS Foundation Trust had agreed the preferred clinical model. The next stage in the process was for the CCG to complete the business case and take this through NHS England and the Clinical Senate.

Dr Adrian Clements confirmed that the Scrutiny of Health Committee would have sight of the preferred clinical model before it went out for consultation.

Gill Collinson said that the preferred clinical model was under review, as any changes to the services provided at the Friarage had to fit with other services on the patch.

Cllr Liz Colling queried what impact the delays in finding a preferred clinical model had had on staff morale and the public.

Dr Adrian Clements said that he was regularly providing briefings and updates to staff at the Friarage and members of the public. He said that he understood the concerns that had been raised by both staff and the public about the future of the Friarage but stated that the Friarage was here to stay.

Gill Collinson reminded members that a lot of investment was going into the Friarage site, including the new Sir Robert Ogden Macmillan Centre for the treatment of cancer that is due to open in a number of weeks. Also, that services that had previously only been provided at the James Cook were now being provided at the Friarage, such as the 'black out' service.

Resolved -

- 1) Thank all for attending
- 2) Dr Adrian Clements, South Tees Hospitals NHS Foundation Trust, Lucy Tulloch, Service Manager, Friarage Hospital and Gill Collinson, Hambleton, Richmondshire and Whitby CCG to bring further updates to the committee and the Mid Cycle Briefings on progress with implementation of a new clinical model for the delivery of Anaesthesia and Emergency Medicine at the Friarage Hospital.

62. Work Programme

Considered -

Daniel Harry introduced this item and asked Members to consider the items that had been identified on the Work Programme.

Resolved -

Members to review the Committee's Work Programme and come back to Daniel Harry after the meeting if there were any particular issues that they felt needed to be included.

63. Other Business which the Chairman agrees should be considered as a matter of urgency because of special circumstances

There were no items of other business.

The meeting concluded at 12:30pm

DH