

North Yorkshire County Council Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on Friday 21 June 2019 at 10 am.

Present:-

Members:-

County Councillors John Ennis (in the Chair), Val Arnold, Philip Barrett, Liz Colling, Heather Moorhouse, Chris Pearson and Roberta Swiers.

Co-opted Members:-

District and Borough Councillors John Clark (Ryedale), Kevin Hardisty (Hambleton), Nigel Middlemass (Harrogate), Jennifer Shaw Wright (Selby), and Sue Tucker (Scarborough).

In attendance:-

Lisa Pope, Hambleton, Richmondshire and Whitby Clinical Commissioning Group
Dr Adrian Clements, South Tees Hospitals NHS Foundation Trust
Lucy Tulloch, Service Manager, Friarage Hospital, Northallerton
Helen Edwards, South Tees Hospitals NHS Foundation Trust
Wendy Scott, Chief Operating Officer, York Teaching Hospital NHS FT

Executive Members:

Cllr Caroline Dickinson

County Council Officers:

Daniel Harry (Scrutiny)

Press and public:

Nigel Ayre, HealthWatch North Yorkshire
Stuart Minting, Local Democracy reporter
One other reporter and a member of the public.

Apologies for absence were received from:

County Councillors Jim Clark, John Mann, Zoe Metcalfe and Andy Solloway
District and Borough Councillors John Blackie (Richmondshire) and David Ireton (Craven).

Copies of all documents considered are in the Minute Book

86. Minutes

Resolved

That the Minutes of the meeting held on 15 March 2019 be taken as read and be confirmed and signed by the Chairman as a correct record.

87. Any Declarations of Interest

There were no declarations of interest to note.

88. Chairman's Announcements

The Chairman, County Councillor John Ennis, said that he had held a number of introductory meetings with NHS commissioners and providers of services for North Yorkshire. This was part of his induction as Chairman of the committee.

County Councillor John Ennis welcomed those District and Borough Council members who were newly appointed to the committee following on from the May District and Borough Council elections.

89. Public Questions or Statements

There were no public questions or statements.

90. Building a Sustainable Future for the Friarage Hospital, Northallerton

Considered -

The presentation of Dr Adrian Clements of South Tees Hospitals NHS Foundation and Lisa Pope, of the Hambleton, Richmondshire and Whitby Clinical Commissioning Group.

Dr Adrian Clements gave the presentation, noting the following key points:

- The changes came into force on 27 March 2019
- These changes had been driven by patient safety concerns, which in turn had been the result of staffing shortages, particularly in anaesthesia
- There was a need to move to the new model of delivery to maintain as much as possible of the services provided at the Friarage and avoid becoming a 'cold' site
- Maintaining a critical care unit is essential as it enables a fuller range of services to be provided
- The medical bed base has not been reduced
- A bed occupancy of 85% is aimed for to enable admission to and repatriation to the Friarage
- Colorectal surgery has moved from the Friarage to the James Cook due to the complexity of the surgery and the risks involved
- Looking at moving elements of general surgery from the James Cook to the Friarage
- 90% of in-patients continue to receive their care at the Friarage and the Friarage is still a busy and vibrant hospital playing a key role in the community and within the local health and social care system
- On average, 9 patients in a 24 hour period now receive treatment elsewhere. This figure includes the changes to colorectal surgery
- There has been an increase in the number of children treated at the Friarage
- The activity data suggested that the new model of delivery was working better than had been anticipated.
- Additional 24/7 ambulance resource has been commissioned from the Yorkshire Ambulance Service
- There has been no significant impact upon the Darlington Memorial Hospital.

Dr Adrian Clements identified a number of areas for improvement, including:

- Reduce the time taken to repatriate patients from, principally, the James Cook to the Friarage
- Increase the number of short stay and simple elective surgeries undertaken at the Friarage
- There was still a need to appoint more acute physicians and specialist nursing staff to ensure that the model was stabilised in the long term.

Lisa Pope said that the development of the model for delivery at the Friarage was done with colleagues from the Integrated Care System for the North East and North Cumbria. It was in line with the critical care strategy that was in place across the system.

Lisa Pope said that the next steps were to go through the NHS Gateway Assurance processes and then go out for public consultation. The intention was to bring the proposed consultation to the Scrutiny of Health Committee meeting on 13 September 2019, for endorsement. The results of that consultation would then be brought back to the Scrutiny of Health Committee meeting on 13 December 2019.

Dr Adrian Clements said that it was important to have a stable model in place that could be recruited to. It is extremely difficult to recruit to a model the future of which is uncertain.

County Councillor John Ennis asked whether there had been feedback from patients.

In response, Lucy Tulloch said that the patient feedback received to date had been overwhelmingly positive and the rapid access to services was appreciated.

County Councillor John Ennis asked whether the current Judicial Review was impacting upon the services provided.

Dr Adrian Clements said that there was to be a hearing at the end of July but that this did not stop the delivery of the new model of care.

County Councillor Health Moorhouse said that she attended the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP Joint Health Overview and Scrutiny Committee and had been disappointed with the apparent lack of progress being made with the development of new services.

Lisa Pope said that Sir Ian Carruthers was leading on a system wide review of NHS services in the Integrated Care System for Cumbria and the North East. This was a huge piece of work and so was taking time. Lisa Pope said that the emphasis was upon the development of sustainable local service delivery.

District Councillor Kevin Hardisty queried whether the Friarage service model had been future proofed. The concern was that there was an ageing group of consultants and specialists who would need to be replaced in the next couple of years.

Dr Adrian Clements said that long term recruitment to key posts was an issue but that work was underway to explore different ways of filling vacancies and training new, specialist staff. This included the use of 'Article 14' GP conversion, also known as the Certificate of Eligibility for Specialist Registration, to enable doctors to take up honorary, substantive or fixed term consultant posts after a period of training.

County Councillor John Ennis summed up the discussions noting that the committee was cautiously optimistic about the long term future of critical care and specialist services at the Friarage.

Resolved -

- 1) Thank the clinicians for attending the committee and all of the work that they have done to secure a sustainable model of service delivery for the Friarage
- 2) Adrian Clements, Simon Cox and Lisa Pope to attend the NYCC Scrutiny of Health Committee meeting on 13 September 2019 to outline the proposed consultation on the options for the sustainable delivery of urgent treatment and critical care at the Friarage Hospital

- 3) Adrian Clements, Simon Cox and Lisa Pope to attend the NYCC Scrutiny of Health Committee meeting on 13 December 2019 to outline early analysis of the findings from the consultation and proposed next steps
- 4) Lisa Pope to provide further details of the review that Sir Ian Carruthers is undertaking, of NHS services in the Integrated Care System for Cumbria and the North East, at a future meeting of the committee.

91. Scarborough Acute Service Review – update on the provision of a sustainable general surgery rota at Scarborough Hospital

Considered -

The report of Simon Cox, North Yorkshire Clinical Commissioning Groups and Wendy Scott, Chief Operating Officer, York Teaching Hospital NHS FT about changes to the general surgery rota at Scarborough Hospital.

Wendy Scott introduced the report, the key elements of which are summarised below:

- There have been ongoing difficulties in recruiting general surgeons to work at Scarborough Hospital
- It is easier to appoint to York Hospital
- The overall medical vacancy rate in at Scarborough Hospital is 12%, compared to 6% at York Hospital
- The creation of a shared rota across the two sites, Option 4 in the briefing paper, means that general surgery at Scarborough Hospital will be maintained. This also means that Scarborough Hospital will keep its 'trauma' status
- Scarborough Hospital is 42 miles away from any other hospital and so it is important to maintain as full as possible a range of services there
- Colorectal surgery will be moved to York due to the complexity of this surgery and the attendant risks.

County Councillor Liz Colling said that Option 4 in the paper seemed like a good solution but queried how sustainable it would be in the long term.

In response, Wendy Scott said that the rota and the on-call rota was being shared across 18 people. This meant that the on-call requirements were not too onerous. Also that work was being done with Scarborough Borough Council to promote Scarborough and the surrounding area as a great place to live and work.

County Councillor Liz Colling asked for further information about a related issue, regarding recent changes to children's autism and learning disability services provided at Scarborough Hospital by York Foundation Trust. She raised the following:

- Has there been a disruption to service provision as one provider pulls out and another is found to replace them? If so, then how long has the disruption in service been for, how many people have been affected and what support has been put in place?
- Have children who previously accessed the service at Scarborough Hospital been transferred to GPs? If so, then what is the clinical rationale for this?
- Have there been changes to the prescription of Melatonin?

Wendy Scott was unable to provide an answer to these questions and so offered to provide a written answer following on from the committee meeting.

County Councillor John Ennis asked whether any other procedures, in addition to colorectal surgery, were likely to be moved from Scarborough Hospital to York Hospital.

In response, Wendy Scott said that this was not the case and that the intention was to move more general surgery into Scarborough Hospital.

County Councillor Liz Colling proposed a motion that Option 4, provide a single Trust-wide rota, be supported by the committee.

This was seconded by County Councillor Roberta Swiers.

A vote was taken and the motion passed unanimously.

Resolved -

- 1) Thank Wendy Scott for attending and updating the committee
- 2) To support Option 4 – the provision of a single Trust – wide rota
- 3) That an overview of the operation of the first 6 months of the new single Trust-wide rota is brought back to the committee on 13 March 2020.

92. Decommissioning of the minor injury service in GP practices in the HRW CCG area – rationale, impact and mitigation

Considered -

The report of Simon Cox, North Yorkshire Clinical Commissioning Groups, and Lisa Pope, Hambleton Richmondshire and Whitby CCG, about the withdrawal of Minor Injuries Local Enhanced Scheme in the Hambleton Richmondshire and Whitby CCG area.

The report was presented by Lisa Pope, Hambleton Richmondshire and Whitby CCG, the key points of which are summarised as below:

- The ongoing financial pressures have meant that the CCG has reviewed all existing contracts for services
- The service has been paying twice for the provision of a minor injury service as Accident and Emergency services at the Friarage and Minor Injuries in Whitby are already provided by a block contract arrangement
- The level of use of the minor injury service in GP practices has been varied and often high cost per unit of activity
- A distance of 25 miles or less, from someone's GP practice to another health treatment facility, is seen to be a 'reasonable' distance for people to travel
- There are two 'super-rural' GP practices over the 25 miles limit that will still continue to receive the local enhanced service, Central Dales and Reeth.

County Councillor John Ennis noted that the report was frank and open and made it clear that financial pressures were the key factor in making the decision to decommission the service. He said that the decision seemed to contradict the current thinking within the NHS which was to enable more services to be delivered in the community, treating people closer to home and so avoiding hospital admissions. County Councillor John Ennis also queried whether the de-commissioning of the service would save money within the health system as a whole or whether it would merely push to costs from the commissioner to the hospital provider.

In response, Lisa Pope said that the payment of a block contract to hospital providers for a minor injury and an accident and emergency service whilst also paying GP practices for a minor injury service was not sustainable.

District Councillor John Clark asked why the contract with the hospital providers was not varied to enable funding to be diverted to pay for the GP based minor injury service.

In response, Lisa Pope said that the block contract that was in place with the hospital providers was for 3 years.

County Councillor Liz Colling said that it was regrettable that an effective and highly valued service was lost due to the commissioning body being tied into a block contract.

County Councillor John Ennis asked how well the service had been publicised and whether more could have been done to divert people from hospital treatment, saving time and money for both service providers and patients.

Borough Councillor Sue Tucker asked whether there was still an X-ray service being provided at Whitby Hospital. Locally, people have said that they have been directed elsewhere for an X-ray when attending with minor injuries.

Lisa Pope was unable to respond directly to the question but said that she would find out and respond in writing to the councillor.

County Councillor John Ennis summed up the discussions and noted the concerns of the committee that the decision to decommission the Minor Injuries Local Enhanced Scheme in the Hambleton Richmondshire and Whitby CCG area was a backward step and out of sync with prevailing wisdom on the commissioning of health services.

Resolved -

- 1) Thank Lisa Pope for attending and updating the committee
- 2) Whilst recognising the financial position and apparent double payments being made, Lisa Pope to note the concerns raised by committee members about how the decommissioning of this service from all but two of the GP practices in the HRW CCG area. In particular, the concern that this is a retrograde step at a time when all of the discussions within the NHS locally, regionally and nationally are focussed upon local provision and keeping people out of hospital
- 3) That details of the level of use of the enhanced minor injuries services that was commissioned at GP practices is provided ahead of the 13 September 2019 committee meeting
- 4) That details of any enhanced minor injuries services that are commissioned from GP practices elsewhere in the county are provided ahead of the 13 September 2019 committee meeting
- 5) That Lisa Pope provides a response to the question raised by Scarborough Borough Councillor Sue Tucker regarding the provision of X-ray services at Whitby Hospital.

93. Protocol for co-ordination of work between the Health and Wellbeing Board and Overview and Scrutiny

Considered -

The report of Daniel Harry, Democratic Services and Scrutiny Manager, North Yorkshire County Council regarding a protocol between the Health and Wellbeing Board and Overview and Scrutiny to ensure that work is effectively co-ordinated.

Daniel Harry introduced the report and said that the protocol had been drafted following a recommendation from a recent peer review of the Council's Health and Adult Services department. He said that the protocol formalised activity that was already underway to co-ordinate the work of the different committees.

County Councillor John Ennis asked committee members whether they were happy to adopt the protocol. A vote was taken and the protocol unanimously adopted.

Resolved -

- 1) That the protocol be adopted.

94. Patient Transport Service – changes to the application of eligibility criteria - update on implementation of changes and response to issues raised by the Scrutiny of Health Committee.

Considered -

The report of John Darley, Hambleton Richmondshire and Whitby CCG, on the impact of the changes to the eligibility criteria for the Patient Transport Service that were previously outlined at the meeting on 14 December 2018.

Daniel Harry, Democratic Services and Scrutiny Manager, North Yorkshire County Council, introduced the report and said that it was for information only. He said that the indications for the service provided in the Hambleton Richmondshire and Whitby CCG were that:

- Changes to the eligibility criteria and the assessment questions/script used by YAS were made following the 14 December 2018 committee meeting
- The service appears to have improved by focussing resources where most needed and removing the 'social transport' element
- There appears to have been no adverse impact upon hospital attendance
- There have been no complaints received through the PALS service
- There have been 34 appeals and all have been investigated and upheld.

Daniel Harry said that any queries or concerns that committee members had would be relayed back to John Darley to answer.

Borough Councillor Sue Tucker said that she had anecdotal evidence from the Whitby area that people who had previously accessed the Patient Transport Service were now being directed to community transport.

District Councillor Kevin Hardisty said that the concerns raised at the December 2018 meeting of the committee and had been addressed by the CCGs.

Resolved –

- 1) Thank John Darley for providing the briefing note on the Patient Transport Service being provided in the Hambleton Richmondshire and Whitby CCG
- 2) That a further update be provided to the committee meeting on 13 December 2019 for all of the Patient Transport Service schemes being commissioned across North Yorkshire.

95. Work Programme

Considered -

Daniel Harry, Democratic Services and Scrutiny Manager, North Yorkshire County Council, introduced this item and asked Members to review the work programme and make suggestions for areas of scrutiny for inclusion on the work programme.

The following items were suggested for inclusion in the committee work programme:

- Children's mental health services, in association with the County Council's Young People's Overview and Scrutiny Committee. Specifically, the services provided, level of unmet need locally and any gaps in services compared to similar areas.

- The development of integrated health and social care services in the greater Harrogate area, in association with the County Council's Care and Independence Overview and Scrutiny Committee
- The work being done by Sir Ian Carruthers as part of a system wide review of NHS services in the Integrated Care System for Cumbria and the North East
- The work of the Yorkshire Air Ambulance Service.

Resolved -

- 1) Daniel Harry to update the committee work programme accordingly and develop lines of enquiry for each scrutiny item.

96. 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 12:10pm

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