

North Yorkshire County Council

Scrutiny of Health Committee

Minutes of the meeting held as a live broadcast meeting at 2pm on Friday 18 December 2020.

A recording of the meeting can be viewed on the Council's YouTube site via the following link - <https://www.northyorks.gov.uk/live-meetings>

Present:-

Members:-

County Councillors: John Ennis (in the Chair), Val Arnold, Philip Barrett, Jim Clark, Liz Colling, John Mann, Zoe Metcalfe, Heather Moorhouse, Chris Pearson, Roberta Swiers and Robert Windass.

Co-opted Members:-

District and Borough Councillors: Kevin Hardisty (Hambleton), David Ireton (Craven), Nigel Middlemass (Harrogate), Jane Mortimer as substitute for Sue Tucker (Scarborough) and Jennifer Shaw Wright (Selby).

In attendance:-

Executive Members: County Councillor Caroline Dickinson.

Officers: Daniel Harry (Democratic Services and Scrutiny, NYCC), Victoria Ononeze and Louise Wallace (Health and Adult Services, NYCC), Simon Cox (North Yorkshire CCG), Suzanne Lamb (Harrogate FT), Naomi , Martin Dale and Paul Foxtton (Tees Esk and Wear Valleys Foundation Trust), Wendy Balmain and Vanessa Burns (North Yorkshire CCG).

Scarborough Borough Councillor Richard Maw.

Apologies for absence received from: County Councillor Mel Hobson.

District and Borough Councillors John Clark (Ryedale), Pat Middlemiss (Richmondshire) and Sue Tucker (Scarborough).

Copies of all documents considered are in the Minute Book

137. Minutes

Resolved

That the Minutes of the meeting held on 11 September 2020 be taken as read and be confirmed and signed by the Chairman as a correct record.

138. Any Declarations of Interest

County Councillor Liz Colling noted a non-pecuniary interest as a resident of Scarborough and as a service user of Scarborough Hospital.

139. Chairman's Announcements

The Chairman, County Councillor John Ennis welcomed everyone to the meeting. He explained that the meeting was being held as a live broadcast meeting using MS Teams and that a recording of it would be available on the Council's YouTube site, once the meeting had finished.

County Councillor John Ennis made the following announcements.

Closer working with the Council's Area Constituency Committees

The committee is working more closely with the Council's six Area Constituency Committees. Building upon the work that the Skipton and Ripon ACC did in scrutinising the re-development of the Castleberg Hospital at Giggleswick, the following have been referred to the local ACC to ensure that local members are fully engaged in the issues:

- Thirsk and Malton ACC - project that is being set up across health and social care to look at developing primary care and ancillary services in and around Easingwold.
- Richmond (Yorks) ACC – the development of the Catterick Health Campus.

Scarborough and Whitby ACC is also taking an active role in reviewing proposed and actual changes to services and also the development of the existing hospital site.

Mid Cycle Briefing on 21 October 2020

There were seven items on the agenda for the meeting. The aim was to understand how best the committee could respond to the issues raised and when formal, public scrutiny would be scheduled:

Airedale Hospital – a presentation was given on the structural problems with the existing Airedale Hospital and the proposed new build on the existing site. A letter has subsequently been sent to the SoS and local MPs. A copy will be circulated after the meeting.

Easingwold – a verbal update was given on the progress with a project to review the provision of primary care services in and around Easingwold.

HARA and Catterick Health Campus – updates were provided on the Harrogate and Rural Alliance and the development of the Catterick Health Campus.

Urgent Care service review in York - a proposed review of the way that the Vale of York CCG provides urgent care across its patch was outlined.

Changes to Public Health England – a verbal update was given on the changes to the role of Public Health England and how this may affect local authority public health.

Scarborough Hospital – a discussion on concerns previously raised about the quality of care for patients at Scarborough Hospital and the follow up to the CQC inspection of the hospital in January 2020.

Meeting with Amanda Bloor on 8 December 2020

A regular catch up meeting was held with Amanda Bloor, the Accountable Officer for the North Yorkshire CCG.

Integrating care - Next steps to building strong and effective integrated care systems across England – NHS England

Organisations working in the Integrated Care Systems (ICS) and partnerships have been invited to respond to the consultation on the proposals in the paper. The consultation closes on 8 January 2021.

There followed a discussion about how the committee members could best engage in the public consultation. The conclusion was that an informal meeting could be held in early January 2021 to work through a draft response, ahead of the consultation closing date of 8 January 2021.

140. Public Questions or Statements

There was a public question from Scarborough Borough Councillor Richard Maw, relating to Scarborough Hospital, as below:

Since May of this year, direct transfer of all patients requiring acute stroke care to the Hyper Acute Stroke Units in either York or Hull has been in operation.

Is it the Ambulance crew who make this call? Are all crews in a position to ascertain that a patient presenting with signs and symptoms of stroke meet that same triage criteria as an A & E Dept? And if this is so, is it the case that the same crew are then dispatched directly to either York or Hull? How is it decided which hospital they are taken to? And how long will this type of discussion take?

Meanwhile, is the Ambulance parked up, waiting for a direction?

The efficacy of treatment in the golden hour is well documented in the stroke treatment community. Does the York Trust believe that there is a 45 minute travel time from Scarborough to York? Is there data to evidence this?

The report says that there have been no significant clinical concerns reported.

Has the plight of family and friends who may struggle to travel to see their loved one been considered? These concerns are vitally important. I raise this point because I have had personal experience. My Auntie Jean suffered a stroke in early February 2018. She was taken to York and was very poorly. I visited when I could. Her brothers visited once. Her son tried his best to visit regularly but how difficult it was. Her lack of visitors over those four weeks was not for a lack of love. A life lived full of love, she died alone.

I have other examples of such pain which I can forward should you wish to read them.

There are concerns that outpatients services could ultimately be affected too. When the last substantive stroke consultant left Scarborough in 2019, their replacement was made by bringing a consultant out of retirement. If this consultant were to stop clinical practice, is it likely that these clinics will be switched to York? After all, with no stroke ward at Scarborough Hospital, recruitment is bound to prove difficult.

York residents appear to have it lucky. Even without York Teaching Hospital, there are major hospitals nearby (with dual carriageways providing fast access). The Coast is not so lucky.

I believe the East Coast should have its own Centre of Excellence Stroke Ward. If necessary, consultants should be asked to take the 45 minute daily commute.

(although I can well imagine that any consultant may challenge their commute time allowance if it were to be a mere three quarters of one hour.)

The Stroke Assoc say, " It is important that reorganisation is undertaken in a clear and transparent way and that those affected by stroke are involved within the process."

The majority of residents along the East Coast are unaware of these potential changes. A recent survey places 91.8 percent of the Scarborough area public feeling there is not enough public information available about changes / developments in local hospitals.

Finally, can anyone in attendance of this meeting answer the following question. "Could you personally guarantee to transport your Mother from her home in, say Scalby village, to York District Hospital within the recommended time frame of ideally ONE hour at 5pm on a Bank Holiday Monday afternoon - a slot that starts at the point where the health care incident began. And let's not forget, this time-frame slot must include reasonable time for treatment!"

Simon Cox of the North Yorkshire CCG responded as summarised below:

- The questions raised by Scarborough Councillor Maw are helpful in raising a number of key issues relating to service changes that are proposed
- In 2015, an assess and transfer model for stroke was introduced at Scarborough Hospital as an independent service could not be maintained due to persistent workforce shortages
- The nationally preferred model is that of direct transfer. This has been implemented at the Friarage Hospital, Harrogate Hospital and Airedale Hospital
- It is no longer possible to maintain the necessary level of specialist clinical staff to ensure a safe and effective service using the assess and transfer model
- The nationally recommended safe operating level is that of 600 patients per year. At present, Scarborough treats about 300 to 400 per year
- Yorkshire Ambulance Service (YAS) staff assess people with a suspected stroke, following an agreed protocol and with support from a specialist. A direct transfer can then be made, which saves time and improves outcomes as the person is taken to receive the treatment that they need where they need to have it
- The patient is taken to the nearest Hyper Acute Stroke Unit (HASU)
- The referred to 'golden hour' is not supported by medical evidence. What is important, however, is that a patient with a suspected stroke is rapidly assessed and then taken to the right treatment centre and receiving treatment within 5 hours of having had the suspected stroke
- Travel times vary but on average a patient can be transferred to Scarborough to York within 52 minutes, according to YAS data.

Scarborough Borough Councillor Richard Maw then asked a supplementary question raising concerns that the apparent rejection of the 'golden hour' may be policy driven.

In response, Simon Cox re-iterated that the important thing was that a patient with a suspected stroke is rapidly assessed and then taken to the right treatment centre and receiving treatment within 5 hours of having had the suspected stroke.

County Councillor John Ennis said that the agenda order would be changed to enable the scrutiny of the proposed changes to some specialist services at Scarborough Hospital to be taken immediately after the public question. The item on the proposed changes to the Health Child Programme would then follow.

141. Changes to some specialist services at Scarborough Hospital

Considered -

A presentation by Simon Cox, North Yorkshire Clinical Commissioning Group

The key points from the presentation are as summarised below:

- Due to staffing shortages, a temporary model for the urology service was put in place in November 2019 whereby acute cases were transfer to York Hospital at evenings and weekends. This has been independently audited and assessed and found to be working effectively
- A temporary stroke pathway has been in place since May 2020, with transfers of hyper-acute stroke cases to York and Hull. This is being reviewed
- Due to staffing shortages, changes were made to the medical oncology service in January 2020, whereby all new outpatient activity for Scarborough and Bridlington patients and complex treatment is critical decisions is now undertaken at Hull. Complex treatment is also undertaken at Hull.

There followed a discussion with the following points being made:

- The need for a rapid response to an incidence of hyper acute stroke was accepted by all. There was interest in better understanding the 'golden hour' and the evidence behind this.
- Whilst the changes to medical oncology service will result in longer travel times for patients and may also make it more difficult for carers and loved ones to visit, the patient treatment outcomes would be improved. The service provided at Castle Hill Hospital in Hull is of the highest standard.

County Councillor John Ennis asked whether the transport and access group been setup as part of the East Coast Review, what impact the proposed changes to the Integrated Care Systems have upon specialist services at Scarborough Hospital, and whether some specialist services would be transferred back to Scarborough from York and/or Hull to fill the gaps left by those specialist services that have been or are going to be moved out?

In response, Simon Cox said the transport group has been established and has met. Their work is progressing and the impact upon patients and carers is recognised. The development of the Integrated Care Systems will promote greater collaboration between hospitals and so will create opportunities for sharing of resources and expertise.

In terms of the question about services being repatriated, Simon Cox said that this was being looked into as part of the £40m investment in Scarborough Hospital and the development of the Emergency Department.

Hambleton District Councillor Kevin Hardisty said that the travel times quoted were not realistic and did not reflect the reality of travel on the county's road network.

In response, Simon Cox said that the 52-minute travel time was an average time that had been provided by YAS. He said that the emphasis should always be upon accessing the best clinical care and not simply the nearest.

The Chairman, County Councillor John Ennis, summed up and thanked Simon Cox for attending and answering the questions raised by the committee.

Resolved -

- 1) Simon Cox to come back to the meeting on March 2021 to provide detailed information and data on the management of hyper acute stroke, treatment approaches, response times and outcomes linked to hyper acute stroke provision. This to include, detailed timings of the time taken from the point of an ambulance attending and concluding that some has had a stroke and then that person receiving the emergency treatment that they need at the HASU.

142. Healthy child programme

Considered – a presentation by Victoria Ononeze and Louise Wallace (Public Health, Health and Adult Services, NYCC).

County Councillor John Ennis said that this was an opportunity for the committee to comment on the proposed changes to the 0-5 Health Visiting Service and the 5-19 School Nursing Service as part of the consultation that runs from 26 October 2020 to 4 January 2021.

The key points from the presentation are as summarised below:

- The Healthy Child Programme is a national scheme, delivered locally by Public Health, that promotes health and support at an early stage for children, young people and their families
- A public consultation on proposed changes is being run from 26 October 2020 to 4 January 2021
- It is proposed that the new service starts in April 2021
- The Public Health Grant was subject to an 8% reduction between the financial years 2017/18 and 2019/20, with an inflationary increase only for the financial year 2020-21. As a result savings of £657,000 in public health funded services need to be found by 2024
- The priority will be children under five and maintaining the support that is necessary for them to promote their early development and to ensure that they are ready to learn
- All new-born babies and their parent(s)/carer(s) will have a face-to-face visit from a qualified Health Visitor
- Targeted support for 5-19 year olds will still be funded, albeit through a range of different programmes and services.

County Councillor John Ennis asked what criteria would be used to determine who had face-to-face assessments.

Suzanne Lamb said that the aim was to provide face-to-face assessments and appointments as the norm. Virtual assessments and appointments would only be done where a family has been deemed to be not at risk. The focus was upon providing targeted support in addition to the mandated contacts.

County Councillor Liz Colling queried what preparatory work was being done for the new service prior to its establishment in April 2021.

Suzanne Lamb said that the new workforce model was under development. This would not lead to redundancies but will involve some retraining of some staff.

County Councillor Heather Moorhouse said that there were concerns about how the proposed changes may reduce young people's access to sexual health and substance misuse services.

County Councillor John Ennis, summed up as follows:

- There was support for the focus upon the 0 to 5 years age group and those most in need
- It was noted that lessons have been learned from running the service during the pandemic, which have then been applied to the design of the proposed new model of working
- It was understood that there are opportunities to work in greater depth with a broad range of community organisations
- The explanation about how appointments will be carried out and the assessment process used to determine which would be face-to-face and which would be remote was appreciated.

Resolved –

- 1) Welcome the renewed focus on prevention
- 2) That the views of Area Constituency Committees be taken into account
- 3) Thank colleagues from Public Health for their engagement with the committee on these proposed changes
- 4) That the consultation analysis be made available to the committee, once completed.

143. Developments in community and in-patient mental health services

Considered – a report by Naomi Lonergan, Martin Dale and Paul Foxton, Tees Esk and Wear Valleys NHS Foundation Trust

The report covered the following:

- i. Community mental health hub at Selby
- ii. Community mental health hub at Northallerton
- iii. Foss Park Hospital, York
- iv. Relocation of mental health services in Harrogate since the closure of the Briary Wing
- v. Enhanced community model for mental health services.

The key points from the report are as summarised below:

Community mental health hub at Selby

- Community mental health services in Selby are currently based in a number of sites. TEWV have been looking for one site to accommodate all the services since 2017
- There is a general lack of availability of sites to enable a purpose-built facility in Selby. As such, the facilities at Worsley Court have been refurbished to enable the community mental health services to be accommodated at one site. TEWV will continue to look for a new premises and/or site.

Community mental health hub at Northallerton

- The work to develop a new community mental health hub has been underway since 2018
- The hub will co-locate services from all 4 mental health specialties (Adults, Older Persons, Children and Young People and Learning Disabilities)
- Construction began in March 2020 and is expected to be completed in April 2021.

Foss Park Hospital, York

- The 72-bed hospital provides two adult, single sex wards and two older people's wards. It was opened in April 2020
- TEWV invested approximately £40m in this development
- There was a reduction of 2 adult beds from Harrogate and York when Foss Park became operational in April 2020. 2 beds are available at Cross Lane Hospital in Scarborough.

Paul Foxtan suggested that committee members could take part in a virtual tour of the Foss Park Hospital via the following link - <https://pandhs.co.uk/featured-projects>

Relocation of mental health services in Harrogate since the closure of the Briary Wing

- The community mental health teams previously located at the Briary Wing have been relocated
- The in-patient services have been relocated to the Foss Park Hospital
- It is recognised that some of these moves have impacted service users and carers, and clinical staff
- New remote working solutions such as BT Attend Anywhere and Microsoft Teams have been adopted and this has helped to reduce travelling and increase team availability.

There followed a discussion during which the following points were made:

- Worsley Court in Selby could be developed further and so become the permanent solution to the accommodation problems, as opposed to being an interim fix
- The construction of the community mental health hub at Northallerton was welcomed
- The in-patient beds at Foss Park are available to all people. A specific proportion of them is not reserved for people from the Harrogate area. Instead, beds are allocated according to need
- The Cross Lane Hospital in Scarborough was noted as providing excellent care
- The pandemic and the series of lockdowns has led to more people seeking help from mental health services
- Work on Roseberry Park continues. There have been delays with the rectification work as the full extent of the repairs required has been apparent.

County Councillor Jim Clark asked what was being done with the site in Harrogate that had previously been purchased by TEWV for the build of a mental health in-patient unit.

In response, Paul Foxtan said that TEWV were looking to sell the site and that there had been interest from the North Yorkshire Clinical Commissioning Group and the County Council.

County Councillor Jim Clark said that the development of the Integrated Care Systems may have implications for the commissioning and provision of mental health services in the county.

County Councillor John Ennis, asked for TEWV to share their response to the public consultation on the development of the Integrated Care Systems with the committee.

County Councillor John Ennis, asked why a 7 day a week service was provided for older people but only a 6 day a week service was provided for adults.

In response, Naomi Lonergan said older people with mental health conditions such as dementia and their families can really struggle over the weekend and so more support was put in place for them.

Naomi Lonergan said that the implementation of the enhanced community mental health service model had been delayed due to the pandemic but that the aim was still to establish closer links with GPs and primary care services.

County Councillor John Ennis, summed up and thanked all for attending and providing such a comprehensive update to the committee.

Resolved –

- 1) Naomi Lonergan to come back to the committee at 10am on 18 June 2021 with updates on Roseberry Park, the Selby Community Hub and the development of enhanced community services
- 2) Naomi Lonergan to share a copy of the TEWV response to the current national consultation on Integrated Care Systems, so that the committee can better understand how TEWV intends to work with the ICS structures
- 3) Martin Dale to make the necessary arrangements for a small number of councillors from the committee to have a site visit of facilities at Foss Park and also Roseberry Park, once fully re-opened and as appropriate.

144. NHS response to Covid-19

Considered – a presentation by Wendy Balmain and Vanessa Burns of the North Yorkshire CCG.

The key points from the report are as summarised below:

- The experience of the pandemic has driven changes in service delivery
- There has been increased use of remote access technologies for assessments and diagnostics and much closer working between health and social care
- There is a need to re-focus upon the routine work, which helps identify and treat health conditions early on
- There is also a need to maintain an emergency response to the pandemic and prevent hospital acquired infections
- There are some concerns about what 'long-covid' will mean for patients and health and social care services
- The need to maintain covid-safe working means that simple procedures can take longer and also that there is less space within which to work
- There is a drive to reduce long waits for access to treatments and cancer assessment and treatment is back to the pre-covid levels
- A development that is being considered is the increased use of community diagnostic hubs to support the work of hospitals.
- There are no plans for the NHS Nightingale Hospital in Harrogate to be used for admissions at this time.

There followed a discussion.

County Councillor John Ennis said that there was a general perception that people could not go to the GP for a face-to-face appointment and they were being discouraged from accessing medical services.

Wendy Balmain said that primary care services are open and available. If people need to see their GP or a nurse, then they should book in and see them. An appointment may not, initially, be face-to-face but would most likely be by phone.

Harrogate Borough Councillor Nigel Middlemass said that recent national media stories had suggested that as much as 40% of covid infections were hospital acquired.

Wendy Balmain said that this was not a figure that she had heard before and would need to look into the source and the data referred to.

County Councillor John Ennis said that the NHS had been working on an emergency footing for 9 months now and the ongoing commitment and hard work of people in all sorts of different roles was recognised and appreciated.

Wendy Balmain gave an update on the roll out of the vaccination programme in North Yorkshire, as summarised below:

- The administration of the vaccination programme is complex as two injections are needed and the vaccine is difficult to transport and store
- The national vaccination programme will take months and will build up over time
- People will be contacted by their GP when they are due to be vaccinated
- To date the Did Not Attend rate for vaccination slots has been low.

County Councillor John Ennis summed up and said that councillors had a role to play in raising awareness that GP surgeries and primary care were open and services could be accessed.

Resolved –

- 1) Wendy Balmain to review data on hospital acquired covid infections. The reference in the committee was to a figure of 40%, based upon a recent newspaper article
- 2) Wendy Balmain to provide further information on the NHS recovery from the pandemic at the committee meeting at 10am on 12 March 2021, with a focus upon how people access primary care appointments (telephone, computer, NHS app).

145. Update on Covid-19 in North Yorkshire

Considered – a presentation by Louise Wallace, interim Director of Public Health, Health and Adult Services, North Yorkshire County Council

The key points from the report are as summarised below:

- The infection rates for the seven district and borough council areas in North Yorkshire are currently below the England average
- The rates can be volatile, moving up quickly when there has been a spate of infections
- It is important that key messages are promoted and Councillors have a role to play in this
- The focus should be upon reducing social contact
- Full details of the current data and statistics are available on the North Yorkshire County Council website.

Resolved –

- 1) Thank Louise Wallace for the information presented

- 2) All committee members to help reinforce the core messages of 'hands, space, face'.

146. 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.

Resolved -

- 1) That the issue of access to NHS dentistry during the pandemic be included in the work programme.

147. 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 1:05pm

DH

DRAFT