



Notice of meeting of

Health Overview & Scrutiny Committee

To: Councillors Alexander (Chair), Aspden, Fraser, Sue Galloway, Simpson-Laing, Sunderland and Wiseman (Vice-Chair)

Date: Wednesday, 3 March 2010

Time: 5.00 pm

Venue: The Guildhall, York

AGENDA

- 1. Declarations of Interest** (Pages 3 - 4)
At this point Members are asked to declare any personal or prejudicial interests they may have in the business on this agenda. A list of general personal interests previously declared are attached.
- 2. Minutes** (Pages 5 - 36)
To approve and sign the minutes of meetings of the Committee held on 2 December 2009 and 13 and 20 January 2010.
- 3. Public Participation**
At this point in the meeting, members of the public who have registered their wish to speak regarding an item on the agenda or an issue within the Committee's remit can do so. The deadline for registering is **5:00 pm on Tuesday 2 March 2010**.
- 4. Work Plan 2010** (Pages 37 - 42)
Members are asked to review the Committee's work plan for 2010. Extracts from the Forward Plan are included for Members' information.

- 5. Update on Dental Services in York** (Pages 43 - 50)
This report provides Members with an update on the provision of NHS dental services in York.
- 6. Update on Recommendations arising from the Local Involvement Networks (LINKs) report on Neurological Services and an Update on LINKs Report Writing Protocol** (Pages 51 - 60)
This report presents Members with a response from LINKs regarding queries in relation to the recommendations arising from their report on Neurological Services. It also presents Members with the LINKs Report Writing Protocol for information.
- 7. Finance and Performance in Adult Social Services 2009/10 - Update** (Pages 61 - 64)
This report provides an update of the 2009/10 position for both finance and performance in Adult Social Services, the main area covered by the Health Overview and Scrutiny Committee.
- 8. Urgent Business**
Any other business which the Chair considers urgent under the Local Government Act 1972

Democracy Officer:

Name: Jill Pickering

Contact Details:

- Telephone – (01904) 552061
- Email – jill.pickering@york.gov.uk

For more information about any of the following please contact the Democracy Officer responsible for servicing this meeting

- Registering to speak
- Business of the meeting
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Scrutiny Committees

The purpose of all scrutiny and ad-hoc scrutiny committees appointed by the Council is to:

- Monitor the performance and effectiveness of services;
- Review existing policies and assist in the development of new ones, as necessary; and
- Monitor best value continuous service improvement plans

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HEALTH OVERVIEW AND SCRUTINY COMMITTEE**Agenda item I: Declarations of interest.**

Please state any amendments you have to your declarations of interest:

Councillor Fraser Governor of York Hospitals NHS Foundation Trust;
Member of the retired section of Unison;
Member of the retired section of UNITE the TGWU
ACTS section
Member of York Healthy City Board.

Councillor Simpson-Laing Member of Unison
An employee of Relate
Works for the Disabilities Trust

Councillor Wiseman Member of York Healthy City Board.

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City of York Council

Committee Minutes

MEETING	Health Overview & Scrutiny Committee
DATE	2 December 2009
PRESENT	Councillors Alexander (Chair), Fraser, Simpson-Laing, Sunderland, Wiseman (Vice-Chair) and Holvey (as a substitute for Councillor Sue Galloway)
APOLOGIES	Councillors Aspden and Sue Galloway
IN ATTENDANCE	<ul style="list-style-type: none"> • Councillor Morley – Executive Member of Housing and Adult Social Services • Annie Thompson – LINKs Partnership Co-ordinator • Carolyn Murphy – LINKs Steering Group Member • John Yates – Older People’s Assembly • Jack Archer – Older People’s Assembly • Rachel Johns – Chair of Healthy City Board • Associate Director of Public Health and Locality Director for York (CYC & PCT) • Greg McGrath – Health Improvement Manager – NHS North Yorkshire and York • Kathryn Yeoman – Deputy Directorate Manager/School Health Service Manager, York Hospital Foundation Trust • Judy Kent, Children’s Trust Manager, City of York Council • Lorraine Naylor – Acting Assistant Director – Primary Care, NHS North and North Yorkshire • Vince Larvin – Yorkshire Ambulance Service • Helen Hugill – Yorkshire Ambulance Service • Mark Inman – Yorkshire Ambulance Service

21. DECLARATIONS OF INTEREST

Members were invited to declare at this point in the meeting any personal or prejudicial interests they might have in the business on the agenda.

Councillor Simpson-Laing asked that the list of standing declarations be updated to show that she works for the Disabilities Trust and to include the declarations she had made at the previous meeting.

22. MINUTES

RESOLVED: That the minutes of the last meeting of the Committee held on 23 September 2009 be approved and signed by the Chair as a correct record.

23. PUBLIC PARTICIPATION

There had been no registrations to speak under the Council's Public Participation Scheme.

24. EXECUTIVE MEMBER FOR HOUSING AND ADULT SOCIAL SERVICES

Members received an update from the Executive Member for Housing and Adult Social Services on forthcoming priorities in his area. He gave a presentation which covered the areas of Safeguarding and Personalisation as well as the outcomes of, and progress in relation to, the CSCI (Commission for Social Care Inspection) 2008 report.

With the Chair's agreement, Mr John Yates of the Older People's Assembly addressed the Committee. He raised concerns that the majority of people likely to be affected by Personalisation and Safeguarding issues may not know what these terms meant. He suggested that the Executive Member liaise with the Older Citizens Advocacy Service to ensure that target groups are kept informed of what was happening in these areas.

The Executive Member advised that he would take Members' comments on board and that he would endeavour to attend the next meeting of the Committee on 14 December 2009.

- RESOLVED:
- (i) That the update from the Executive Member of Housing and Adult Social Services be noted.
 - (ii) That Members comments be noted.
 - (iii) That the Executive Member be invited to attend the meeting on 14 December 2009.

- REASON:
- (i) In order that the Committee is kept informed on work within the remit of the Executive Member for Housing and Adult Social Services.
 - (ii) In order that the Health Overview and Scrutiny Committee can make a contribution to this portfolio area.

25. UPDATE ON DENTAL SERVICES IN YORK

Members considered a report which updated them on the provision of NHS dental services in York.

The Acting Assistant Director, Primary Care, of NHS North Yorkshire and York provided the following information and responded to Members queries on specific issues.

- NHS Dental Waiting list is currently held as an Excel spreadsheet and administered by an admin person. Problems have been identified with the current system and it has been recognised that it needs to be looked at.

- First step is to validate the current waiting list by writing to everybody on the list and asking if they are still actively waiting for an NHS dentist -need to be aware that some people may be on the waiting list for an NHS dentist but also be receiving treatment from a private dentist.
- Some dentists hold their own waiting lists and this does not feed information into NHS waiting list and does not contribute to service planning.
- Monthly variations in data contained in the report can be explained by seasonal variations and also capacity and demand influences.
- There are very few dental practices solely providing NHS treatment – most have combination of private and NHS patients.
- For clarification, abbreviations used regarding contracts in Annex C are as follows: Personal Dental Services (PDS), General Dental Services (GDS) and Trust-led Dental Services (TDS). Units of Dental Activity (UDA) refers to general dentistry, Units of Orthodontic Activity (UOA) refers to treatment for straightening of teeth – generally realignment of teeth in children.
- With regard to dental care for children, there are links with Children's Centres and the Salaried Dental Service has a rolling programme which identifies areas where children are in most need of treatment. Checks are also undertaken in schools.
- In respect of salaries, UDA system is fixed nationally but UDA rate is not – these are tendered for - the average UDA rate nationally is £21 per UDA – the “Doncaster Model” incorporates a quality measure which dentists have to meet before they receive payment for an UDA.

Members queried the figure given in annex A of the report for the number of NHS practices in the City of York area and the Acting Assistant Director – Primary Care agreed to clarify this information and provide this to Members. She referred to a data sheet which contained information on York (excluding Selby) which Members had requested and the Scrutiny Officer agreed to circulate this to Members following the meeting.

In response to a query regarding problems with recruitment and retention of dentists in York, the Acting Assistant Director – Primary Care confirmed that during the last procurement process there had been problems attracting sufficient interested parties and she had contacted the Department of Health for advice on tackling this issue. She also advised Members that there was a problem in finding suitable premises in which to locate dental surgeries.

With regard to a query regarding entitlement to the use of services at Leeds Dental Institute, she advised Members that there was no charge if the patient had been referred there, although as this was a specialist centre, people should not be referred there for general treatment. Members noted that there were also open access sessions available.

RESOLVED:

- (i) That the update from NHS North Yorkshire and York be noted.
- (ii) That further updates on dental provision in York be received from NHS North Yorkshire and York on a quarterly basis.
- (iii) That the following additional information be provided to Members of the Committee:
 - (a) Clarification on number of NHS dental practices in the City of York Area referred to in Annex A of the report.
 - (b) Data received from the Acting Assistant Director – Primary Care relating to York dental statistics.

REASON:

In order the Committee carries out its duty to promote the health needs of the people they represent.

Action Required

1. Scrutiny Officer to acquire and send extra information to TW Members.

26. CHILDHOOD OBESITY REVIEW - SCOPING REPORT

Members considered a report outlining the suggested scope and timetable for the review on Childhood Obesity, which aims to address whether current service provision is effectively reducing childhood obesity in the city.

Members asked that the Scoping Report be amended to include reference to liaising with the Local Healthy Schools Advisor and the Regional Healthy Schools Advisor as they stated it was critical to involve these people in the review. The Scrutiny Officer suggested that this be added under Objective 2.

Members agreed to form a task group to undertake the remainder of the review.

Members received presentations which provided them with background information to the topic and statistical evidence collected by the School Health Team in relation to NP155 and NP156 in order to discover the extent of obesity within the city.

Presentations were heard from the:

- Health Improvement Manager (Obesity) of NHS North Yorkshire and York;
- Deputy Directorate Manager/School Health Service Manager of York Hospitals Foundation Trust
- Chair of the Healthy City Board, Associate Director of Public Health & Locality Director for York (CYC and PCT)
- Children's Trust Unit Manager, City of York Council.

The Children's Trust Unit Manager circulated a letter from the parents of a young girl who had attended the MEND (Mind, Exercise, Nutrition, Do It) programme which is run by a community based weight management team for overweight children who attend together with their parents and siblings. The letter expressed their gratitude to the team who had worked with her on the MEND programme which they said 'changed her life'.

RESOLVED:

- (i) That the scoping report be amended to include a reference to involvement of the Local Healthy Schools Advisor and Regional Healthy Schools Advisor.
- (ii) That the scope, as amended above, and timetable set out at paragraph 5 of the report, be approved.
- (iii) That a task group be set up to undertake the work

REASON:

To ensure compliance with scrutiny procedures, protocols and workplans and to progress the review.

27. WORK PLAN 2009/10

Members considered the workplan for the Health Overview and Scrutiny Committee for 2009/10.

In relation to recent news reports on the use of anti-psychotic drugs in dementia care, the Chair asked if Members would like to receive a presentation or report on this issue.

The Chair also circulated a copy of a newspaper article regarding restricted treatments, one of which was facet joint and epidural injections for lower back pain. The Chair had been contacted regarding this and asked Members of the Committee for their thoughts.

In light of the Committee's current workload it was decided to raise both these issues again under the workplan item at the January meeting.

The Committee were due to receive a Health Scrutiny Networking Update at their meeting on 20 January 2010. The Scrutiny Officer advised that this would be replaced by a series of e-mail briefing notes to Members and should any Member wish to raise an issue, this would be brought to Committee.

RESOLVED: That the workplan be noted.

REASON: To progress the work of the Committee.

Councillor Alexander, Chair

[The meeting started at 5.00 pm and finished at 7.30 pm].

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MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	13 JANUARY 2010
PRESENT	COUNCILLORS ALEXANDER (CHAIR), ASPDEN, FRASER, SIMPSON-LAING, SUNDERLAND AND WISEMAN (VICE-CHAIR)
IN ATTENDANCE	LIBBY MACMANUS – YORK HOSPITAL ALAN ROSE – CHAIR ELECT, YORK HOSPITAL FOUNDATION TRUST ANNIE THOMPSON – LINKS GEORGE WOOD – OLDER PEOPLE’S ASSEMBLY JACK ARCHER BILL HODSON – CITY OF YORK COUNCIL DEBBIE MITCHELL – CITY OF YORK COUNCIL
APOLOGIES	COUNCILLOR SUE GALLOWAY

34. DECLARATIONS OF INTEREST

Members were invited to declare at this point in the meeting any personal or prejudicial interests they might have in the business on the agenda.

Councillor Wiseman referred to her standing declaration as a Governor of York Hospitals NHS Foundation Trust and confirmed that she was no longer a member following a reduction in the number of Governors. She confirmed that she had now applied to join the Trust as a public member.

Councillor Simpson-Laing referred to her standing declaration as an employee of Relate but requested the removal of reference to working with residents of Askham Grange, which was not applicable.

35. MINUTES

Arising out of consideration of the Minutes, Cllr Fraser referred to the bullet pointed list of Members comments and questions in Minute 31 (Referral from the Executive regarding Overspends in Adult Social Services). He pointed out that he felt the following points had been omitted:

- “Queried what options the Executive Member had considered, accepted and rejected, to bring the budget back into balance. (The Executive Member refused to give this information).
- Queried the wisdom of the Council’s Executive accepting wholly uncosted amendments to their budget for 2009/10, proposed by a minor opposition party, which included notional, unspecified savings, which has no doubt exacerbated the departments budget position.
- Queried the potential impact of the ‘More for York’ programme on the future budgets in HASS, particularly for adult social care.

The Executive Member declined to comment on a number of these issues.”

Certain Members pointed out that the Executive Member had only been in attendance at the last meeting as an observer. They stated that he had been unable to report on budget information at that stage as the information was part of the budget process and they suggested amendments to Cllr Fraser’s suggested additions.

RESOLVED: That the minutes of the meeting of the Committee held on 14 December 2009 be approved and signed by the Chair as a correct record subject to the addition of the following additional bullet points to the list of Members comments in Minute 31:

- “Queried what options the Executive Member had considered, accepted and rejected, to bring the budget back into balance. (The Executive Member did not give this information).
- Queried the wisdom of the Council’s Executive accepting wholly uncosted amendments to their budget for 2009/10, proposed by a minor opposition party, which included notional, unspecified savings.

The Executive Member declined to comment on a number of these issues.”

36. PUBLIC PARTICIPATION

It was reported that there had been no registrations to speak at the meeting under the Council’s Public Participation Scheme.

37. ADULT SOCIAL SERVICES - CURRENT FINANCIAL PRESSURES

The Committee considered a report, which set out the current financial pressures within Adult Social Services together with details of the mitigating actions being taken and likely future issues.

Details of the main areas of overspend and the mitigating actions being undertaken were outlined in Annex One, with an analysis of spending in key areas over a three year period in Annex Two, to the report.

The Chair confirmed that this meeting had been arranged to consider details of the capital and revenue figures for Adult Social Services for the 2010/11 financial year. This information had been requested to enable the Committee to respond to the Executive’s request to review the reasons and possible options for offsetting the increase in demand for adult community care packages and care packages, which were having an impact on the Council’s budget.

Members expressed disappointment that the Executive Member had been unable to attend the meeting to answer questions in relation to this matter. They pointed out that under Part 4G of the Constitution – Scrutiny Review

Procedure Rules scrutiny committees could require Executive Members to explain about matters within their remit.

Some Members suggested deferment of this item to allow the necessary information to be provided together with the attendance of the Executive Member, as they felt unable to provide a response to the Executive in relation of options without this input.

Other Members referred to the Executive's request and pointed out that the information members were requesting would not be available, at this time, as it was part of the normal budget process.

Cllr Simpson-Laing then moved that further consideration of the report on current budget pressures be deferred pending receipt of the information requested at the Committee's last meeting, namely the capital and revenue figures for Adult Social Services for the 2010/11 financial year. This was seconded by Cllr Fraser but on being put to the vote the motion was lost.

Officers then went through the report in more detail and some of the main points raised related to:

- Breakdown of the Residential and Nursing figures;
- Forecast of demand for services causing a similar overspend next year;
- Use of in house home care rather than private service providers following the 6 week assessment period;
- Paragraph 7 of the report to refer to 'annual average cost of packages of care' rather than 'annual cost of average packages';
- Questioned reference in paragraph 10 to 'providers are now operating at the limit of their capacity' and the future effect of this;
- Paragraph 13 reference to increased reliance on temporary staff as it was felt that maximum use should be being made of existing staff;
- Questioned Council's operation of a Bank System for staffing;
- The young people with complex needs that would be coming into adult services how would this compare with previous years;
- Questioned 'no HR implications' of report as stated in paragraph 21;
- Difference between holding vacant posts and recruitment freeze of front line posts and the effect on service levels with cover of these posts by existing staff;
- Affect of possible changes to eligibility criteria for services;
- Pro rata % of the savings made at Full Council on the Adult Social Services budget;
- Would a consequence of extending the time taken to complete care assessments and packages lead to bed blocking?
- Questioned savings in relations to each option detailed in the report;
- Changes in services and response times would have an effect on Performance Indicators and the Care Quality Commission ratings;
- Time delay with the need to consult relatives/carers etc prior to any changes to services.

Officers confirmed that they would provide Members with the following information:

- Breakdown of residents in residential and nursing care;

- Total number of hours temporary staff were employed on a monthly basis;
- Number of vacant posts held.

Following further lengthy discussion it was

- RESOLVED:
- i) That the Scrutiny Committee forward the paper to the Executive as information for the reasons of the overspend;
 - ii) That the Executive be informed that the Scrutiny Committee was unable to make any comments on savings at this point in the financial year as options suggested by Officers could have an impact on residents in the city, such changes to services would require consultation and further information on their impact for clients, staff and, partners and Councillors would need to understand any implications. Furthermore, the non-attendance of the Executive Member for Housing and Adult Social Services meant that the Committee were unable to ask his views on the impact of possible changes to services.¹

REASON: To update the Committee on the current financial pressures in order for them to make a response to the Executive.

Action Required

1. Forward the Committee report and comments to the Executive.

TW

38. WORK PLAN 2009/10

Consideration was given to the Committee's Work Plan for 2009/10.

The Scrutiny Officer referred to the following additional items scheduled for the 3 March meeting:

- Interim Report regarding Childhood Obesity - progress and evidence gathered to date.
- Presentation on the Joint Strategic Needs Assessment

In view of the heavy agenda for the March meeting she suggested the deferral of some of the items to the 30 June meeting.

RESOLVED: That the draft Work Plan be approved subject to its updating to reflect the above changes.¹

REASON: To update the Committee's Work Plan.

Action Required

1. Update the Work Plan as necessary.

TW

CLLR J ALEXANDER, Chair

[The meeting started at 5.00 pm and finished at 6.50 pm].

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MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	20 JANUARY 2010
PRESENT	COUNCILLORS ALEXANDER (CHAIR), ASPDEN, FRASER, SIMPSON-LAING, SUNDERLAND, WISEMAN (VICE-CHAIR) AND HOLVEY (SUBSTITUTE)
IN ATTENDANCE	CHARLES MILLS – NHS NORTH YORKSHIRE AND YORK GARETH WHILES – NHS NORTH YORKSHIRE AND YORK MARGARET JACKSON – YORK HOSPITAL LIBBY MCMANUS – YORK HOSPITAL ANNIE THOMPSON - LINKS CAROLYN MURPHY – LINKS STEERING GROUP JOHN YATES – OLDER PEOPLE’S ASSEMBLY GEORGE WOOD – OLDER PEOPLE’S ASSEMBLY JACK ARCHER MARK INMAN –YORKSHIRE AMBULANCE SERVICE PETE DWYER – CITY OF YORK COUNCIL BILL HODSON – CITY OF YORK COUNCIL
APOLOGIES	COUNCILLOR SUE GALLOWAY

39. DECLARATIONS OF INTEREST

Members were invited to declare at this point in the meeting any personal or prejudicial interests they might have in the business on the agenda.

Councillor Simpson-Laing confirmed her standing declarations as a member of Unison, as an employee of Relate and as she worked with the Disabilities Trust but requested removal of the reference to working with residents of Askham Grange.

Councillor Fraser declared a personal non prejudicial interest in Agenda item 4 (‘A Child’s First 6 months: Their Expected Health Input both now and in the Future’) as a Governor of Knavesmire Primary School.

40. PUBLIC PARTICIPATION

It was reported that there had been one registration to speak at the meeting under the Council’s Public Participation Scheme.

John Yates, spoke as a representative of the Older People’s Assembly. He referred to Agenda Item 5 (Annual Performance Assessment of Adult Social Services 2008/09), particularly in relation to the reference in paragraph 17 of the report, to a workforce strategy for adult social care that

had been developed in partnership with the University of York during 2009/10. He questioned the practical nature of the partnership, which he hoped would result in improved personalised services for customers.

He also expressed interest in Agenda Item 6 (Comments for the Care Quality Commissions New Registration Process) in particular to paragraph 5 of the report, and to the evidence which groups submitted to the Care Quality Commission on aspects of the Trusts' performance. He questioned how the Committee would collect evidence of Trusts' performance from the public, as the Committee's remit was to represent the public interest.

41. UPDATE ON RECOMMENDATIONS ARISING FROM THE DEMENTIA REVIEW (ACCESS TO SECONDARY CARE)

Members considered an update report on progress made in relation to implementing the recommendations arising from the 'Dementia Review' (Accessing Secondary Care).

The Committee were reminded that service providers had reported back to the Committee in June 2009 and that this was the second progress report which was set out in Annex A to the report. Information had been requested from the following:

- Director and Staff in Housing and Adult Social Services Directorate at City of York Council
- Representatives of NHS North Yorkshire & York
- Representatives from York Hospitals Foundation Trust
- Representatives from the Yorkshire Ambulance Trust

The Scrutiny Officer reported receipt of apologies from representatives of the PCT and Dr Julian Marks of the Yorkshire Ambulance Service for their non attendance at the meeting but stated that both had confirmed they would be happy to answer any questions members may have by email.

Members questioned details of and commented on the following recommendations:

Recommendation 3

- HASS/CYC (January 2010) further information on the 'carers passport'.

Recommendation 4

- PCT progress on this recommendation questioned as PCT's comment was repeated both for June 2009 and January 2010.

Recommendation 6

- PCT (June 2009) regarding the National IT Programme and progress made.
- YHFT (January 2010) LIAG acronym (Local Implication Action Group)

Officers confirmed that they would email Members the further information requested. ¹.

The Committee then considered whether they wished to see further updates on the recommendations and, if so, at what intervals. Members stated that this was still work in progress and on that basis they considered that further updates would be useful.

RESOLVED: That a further update report on the recommendations arising from the Dementia Review be brought back to the Committee's meeting in July 2010. ²

REASON: In order to carry out their duty to promote the health needs of the people they represent.

Action Required

1. Email members additional information requested at meeting. TW
2. Update report on recommendations brought back to July 2010 meeting. TW

42. ' A CHILD'S FIRST 6 MONTHS: THEIR EXPECTED HEALTH INPUT BOTH NOW AND IN THE FUTURE'

The Committee received a presentation from Charles Mills, Health Visiting Team Leader for Children's Services, NHS North Yorkshire and York on the current expected input from midwives and health visitors for the first 6 months of a child's development and the links between them.

He stated that the aim of health visiting in Selby and York was to improve the health and well being outcomes for children and their families through the provision of an evidence based, high quality value for money service. He went onto explain the geographical workings of the service together with the links between health visitors, GP surgeries, Sure Start Children's Centres and other staff. Further details were given of the input from the health visiting teams from antenatal service through to the time that a child entered full time education (the full presentation is attached as an Annex to this report).

Gareth Whiles, Assistant Director Children, Maternity and Sexual Health for NHS North Yorkshire and York, who was also in attendance for consideration of this item, confirmed that a new health strategy had been introduced in 2009 which required examination of the commissioning pathways. He pointed out that this work also involved stakeholders to ensure that the pathways were correct.

Members questioned and commented on the following points:

- It appeared that vulnerable families would get the service but questioned how would other families access the service which they would previously have received automatically;
- The ratio of health visitors per head of population/families;
- Confusion over the alignment of the Children's Centres and the health visitors staffing arrangements in relation to the city boundaries;
- Need for families to be signposted to the services available;

- The positive, valuable contribution that Children's Centres were making and the need for their retention;
- Possible problems of exclusion and isolation of families in rural areas without access to community clinics;
- Figures of people accessing the services from outside the city council's area;
- Confirmation that the ninth Children's Centre was due to open in April, which included outreach workers and would also serve part of the rural area including Bishopthorpe.

Members thanked the NHS representatives for a very useful presentation and informative discussions. They confirmed that they supported taking this review forward to examine the pathway for new mothers and users of the services to ensure that the new systems were providing the correct level of services for all. However, Members of the Committee agreed to wait for a further update on this in June 2010 before deciding whether to progress this topic to review.

RESOLVED: That further consideration in respect of the progression of this review be deferred until the first meeting of the Committee in June 2010 and, at that time, the PCT be requested to provide information on progress with their Universal Services 0-19 years review together with resident access information on the Children's Centres.¹

REASON: To address the concerns raised in the topic registration form.

Action Required

1. Add to Committee's work plan and request information from PCT at appropriate time.

TW

43. ANNUAL PERFORMANCE ASSESSMENT OF ADULT SOCIAL SERVICES 2008/09

Members were informed of the outcome of the annual performance ratings by the Care Quality Commission (CQC) of adult social services in York.

It was reported that a Performance Assessment Notebook had been compiled by CQC during the course of the year, which consisted of the performance information against key indicators together with progress against national and local priorities. It was reported that the Area Manager of the Commission had been invited to attend the meeting but had sent her apologies.

Officers confirmed that the overall grade awarded for delivery of the outcomes was 'Well' which reflected the positive progress on the improvement plan for adult social care. It was pointed out that the rating on Outcome 7 – Maintaining personal dignity and respect was primarily about Safeguarding Adults and recognised the fact that all the improvement asked for in 2008 were now in place.

Members questioned reference to the provision of meals by providers of services within the independent sector, which may not meet nutritional requirements for promoting health and wellbeing. They also mentioned the reference to the council needing to improve services for clients and carers and pointed out that this was also an area where budget cuts were proposed.

Officers confirmed that major improvements had been made which were also still ongoing which would result in a better assessment for 2009/10.

RESOLVED: That the contents of the Annual Performance Assessment of Adult Social Services 2008/09 be noted.

REASON: To ensure that the council moves forward with an ongoing plan to improve future ratings.

44. COMMENTS FOR THE CARE QUALITY COMMISSION'S NEW REGISTRATION PROCESS

Consideration was given to a report, which updated the Committee on the comments provided by a delegated task group on aspects of the various Trusts' performance as part of the Care Quality Commission's new processes for regulation of NHS Trusts.

The evidence provided would be used to help inform the Care Quality Commission's decision about the registration of providers from April 2010.

Members of the task group pointed out that only two sections of the form appeared to relate to Scrutiny Committee's and that it had been very difficult to address some of the questions. The Scrutiny Officer confirmed that she had informed the CQC that the feedback form had not proved easy to complete. Members confirmed that they hoped the CQC would take these comments on board and amend the feedback form accordingly.

RESOLVED: That the comments provided by the task group to the Care Quality Commission be noted.

REASON: To enable the Health Overview & Scrutiny Committee to carry out their duty to promote the health needs of the people they represent.

45. WORK PLAN

Consideration was given to the Committee's work plan for 2009/10, an updated copy of which was circulated for Members information. The amendments related to the slippage of some items scheduled for March to the June meeting.

It was pointed out that it had become apparent that should this happen that there would be several months where the Committee would not meet and

that during this period there could be a change of Committee membership, with no opportunity for Members to end any work or start new reviews.

Following further discussion it was

- RESOLVED:
- i) That the draft Work Plan be approved subject to the addition of further items as and when required.
 - ii) That an additional meeting of the Committee be arranged for Monday 29 March 2010.¹

REASON: To update the Committee on their Work Plan for the forthcoming year.

Action Required

1. Update work plan as necessary and arrange additional meeting.

TW

CLLR J ALEXANDER, Chair

[The meeting started at 5.00 pm and finished at 6.30 pm].



North Yorkshire and York
Community and Mental Health Services



North Yorkshire and York

A Child's First 6 Months

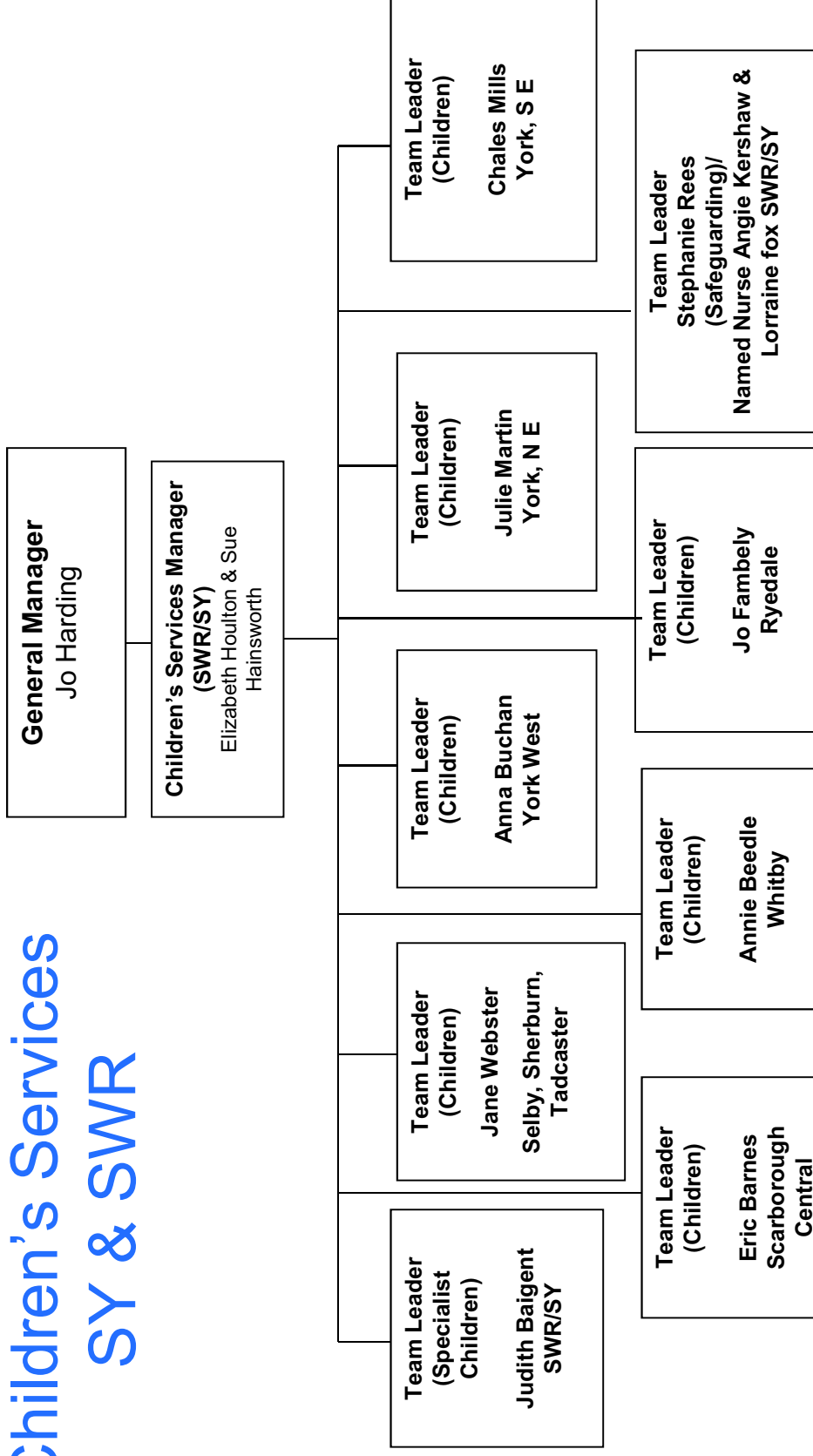


Health Visiting in Selby and York

AIM: To improve health and wellbeing outcomes for children and their families through the provision of an evidence based, high quality value for money service.



Children's Services SY & SWR



The Policy Context

- Health for All Children 4th edition (2006)
- Every Child Matters (2004)
- Children's NSF (2004)
- Children's and Young Peoples Plan 2009-2012 (CYC 2009)
- Working Together to Safeguard Children (2003)
- Healthy Child Programme (2009)
- Commissioning a patient led NHS (2005)
- NICE guidelines



Geographical Working

Improving health outcomes for children through:

- Reducing inequalities by universal assessment enabling us to identify vulnerability.
- Concentrating resources where they have the most potential to make a difference.
- Alignment with Children's Centre's to promote integrated working as the norm.
- Enables the Family Public Health role through geographical and corporate working.



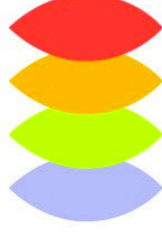
How does it work?

- Teams of Health Visitors and skill mix staff working on a corporate caseload in a defined geographical area.
- Greater resource allocation to areas of greatest need (needs led service).
- Standardised holistic Health Visitor assessment.
- Home Visiting.
- Health Visitor Link role for all GP surgeries/Sure Start Children's Centres.
- Health Visitor Modernisation Programme.
- Implementing NICE Guidelines policy and standards.



Health Visiting Service (Selby & York)

Health Visiting Team	Action
Ante Natal Service	<p>Letters to all pregnant women with details of Health Visiting Service. Visits to all antenatal clients with identified needs.</p> <p>Work closely with midwives based in the community who inform Health Visitors of any woman who is pregnant by copying front sheet of the hand-held pregnancy record to the HV. Share information about vulnerable families particularly those with Safeguarding or Child protection concerns. Carry out joint visits if required</p>
Initial Post Natal Visit (10-21 days)	<p>Informed by Midwifery Service of births and then the mothers transfer home. Red Book completed and issued to mother prior to going home following the baby's birth. On-going discussion between SCBU and HV if baby resident in SCBU. Community Midwife transfers mother and baby to care of the Health Visitor giving details of care provided and any concerns. Continuation of the Child and Family Health Assessment process, provision of health visiting service and key health promotion messages. Responsibility of Health Visitor to make contact within 10-14 days of birth.</p>
6-8 weeks old	<p>Offer of contact with Health Visitor to continue Child and Family Health Assessment and conduct maternal mood assessment.</p>



Health Visiting Service (Selby & York continued)

3-4 months	Completion of the Child and Family Health Assessment by Health Visitor/Health Visiting Team. Further input to be negotiated and offered according to need.
8-12 months	Review by Health Visiting Team. Review of Child and Family Health Assessment with further input to be negotiated and offered according to need. Complete assessment of children's circumstances and needs by 1 year of age.
24 months	Review by a Health Visiting Team. Review Child and Family Health Assessment with further input to be negotiated and offered according to need.
Around 4 years when child enters full time school	Completed and up to date Child Health Records handed over to School Health Services.



Summary

The Health Visitor role is entrenched in public health with a key focus on tackling inequalities, social exclusion and promoting the health of children, families and communities. (CPHVA/Unite the Union April 2009)

The Health Visiting Teams are integral in the establishment of Children's Centres as a place where health, social care and education can come together to achieve the best for local people. (Department of Health October 2009)



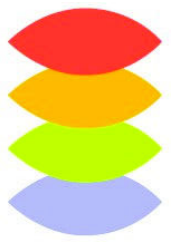


North Yorkshire and York
Community and Mental Health Services



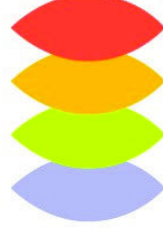
North Yorkshire and York

Review Of Universal Services For 0-19 Year Olds



Review of Universal services for 0-19 year olds

- NHS Child Health Strategy
- Healthy Child Programme for 0 – 5 year olds
- After birth, by 14 days, between 6 -8 weeks, at 8 weeks, at 3 months, at 4 months, by 1year etc
- Develop new commissioned pathway to ensure needs outlined in the strategy are met
- Work with stakeholders – local GPs, providers, council services
- We will seek input from users, including groups such as York MSLC and children centres etc
- October 2010



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Health Overview & Scrutiny Committee Work Plan 2010

Meeting Date	Work Programme
20 January 2010	<ol style="list-style-type: none"> 1. Update on the Dementia Review 2. Annual Assessment of Adult Social Care – Update Report. 3. Presentation from NHS North Yorkshire & York on a Universal Services Review (post maternity) 4. Response to CQC on the registration process
3 March 2010	<ol style="list-style-type: none"> 1. Third Quarter Monitoring Report 2. Quarterly Update from the Primary Care Trust on Dental Provision in York 3. LINKs Public Awareness & Consultation (PACE) report – neurological services – update on recommendation to Committee
29 March 2010	<ol style="list-style-type: none"> 1. Interim Report on the Childhood Obesity Scrutiny Review 2. Presentation/further update on Mental Health Transfer 3. LINKs Public Awareness & Consultation (PACE) report – end of life care
30 June 2010	<ol style="list-style-type: none"> 1. Presentation from LINKs regarding their Annual Report 2. Attendance & report of Executive Member for Housing & Adult Social Services 3. Annual Report from relevant Local Strategic Partners 4. Presentation on Joint Strategic Needs Assessment (JSNA) 5. Update on NHS North Yorkshire & York's Universal Services Review (post maternity)

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Health Overview & Scrutiny Committee Work Plan 2010

Meeting Date	Work Programme
3 March 2010	<ol style="list-style-type: none"> 1. Third Quarter Monitoring Report 2. Quarterly Update from the Primary Care Trust on Dental Provision in York 3. LINks Public Awareness & Consultation (PACE) report – neurological services – update on recommendation to Committee
29 March 2010	<ol style="list-style-type: none"> 1. Interim Report on the Childhood Obesity Scrutiny Review 2. LINks Public Awareness & Consultation (PACE) report – end of life care* 3. Presentation from NHS North Yorkshire & York on the Exceptions Panel (Dr David Geddes) *
19 April 2010	<ol style="list-style-type: none"> 1. Meeting of the Childhood Obesity Task Group
25 or 26 th May (TBC)	<ol style="list-style-type: none"> 1. Presentation/further update on Mental Health Transfer 2. Final Report of the Childhood Obesity Task Group
7 th July 2010	<ol style="list-style-type: none"> 1. 2009/10 Year End Outturn Report & Proposals for Corporate Priorities 2. Presentation from LINks regarding their Annual Report & work plan for the forthcoming year (2010/11) 3. Annual Report from relevant Local Strategic Partners 4. Update on NHS North Yorkshire & York's Universal Services Review (post maternity)
July (TBC)	<ol style="list-style-type: none"> 1. Update on Recommendations Arising from the Dementia Review 2. Quarterly Update from the Primary Care Trust on Dental Provision in York
22 nd September 2010 (provisional)	<ol style="list-style-type: none"> 1. Quarter 1 Monitoring Report & Report or Attendance of the Executive Member
1 st December 2010 (provisional)	<ol style="list-style-type: none"> 1. Quarter 2 Monitoring Report
19 th January 2011 (provisional)	
2 March 2011 (provisional)	<ol style="list-style-type: none"> 1. Quarter 3 Monitoring Report & Annual Report from the LSP Chairs

*To be confirmed

In addition to the above NHS North Yorkshire & York have also offered presentations on the following:

1. Presentation on how Specialised Commissioning Group (SCG) works (David Cockayne)
2. Presentation on their 5 year Strategic Plan (David Cockayne)
3. Presentation on Joint Strategic Needs Assessment (JSNA)

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FORWARD PLAN ITEM

Meeting: Executive

Meeting Date: 16/02/10

Keyword:

Item Type: Executive Decision - of 'Normal' Importance

Title of Report: 10:10 Campaign and Sustainability Update

Description: Purpose of report: The report will outline the 10:10 campaign and identify planned projects, resources and timescales for implementation of the campaign across CYC directorates. Also update members on key sustainability projects, including the Climate Change Framework and Action Plan.

Members are asked to: Note the campaign and proposed projects that will enable the council to achieve the aims of the 10:10 campaign. Note progress of key sustainability projects being carried out across CYC and across York.

Wards Affected:

Report Writer: David Warburton **Deadline for Report:** 04/02/10

Lead Member: Councillor Steve Galloway

Lead Director: Director of City Strategy

Contact Details: David Warburton

david.warburton@york.gov.uk

Implications

Level of Risk: 04-08 Regular **Reason Key:**
monitoring required

Making Representations: N/A

Process: N/A

Consultees: N/A

Background Documents: Committee Report for 10:10 Campaign and Sustainability Update

Call-In

If this item is called-in either pre or post decision, it will be considered by Scrutiny Management Committee on: 22/02/10

Internal Clearance Process

Pre-Decision

By Chief Officers at CMT on: 20/01/10

By Political Group Leaders on:

By Strategic Policy Panel (if required) on:

FORWARD PLAN ITEM**Meeting:** Executive**Meeting Date:** 16/02/10**Keyword:** Adult Social Care;**Item Type:** Executive Decision - of 'Normal' Importance**Title of Report:** Comments from the Health Overview & Scrutiny Committee regarding the referral from the Executive on overspends in Adult Social services**Description:** Purpose of report: To inform the Executive of the Health Overview & Scrutiny Committee's comments regarding the HASS overspend

Members are asked to: Consider the Committee's comments alongside the budget proposals for 2010/11

Wards Affected: All Wards;**Report Writer:** Tracy Wallis **Deadline for Report:** 04/02/10**Lead Member:** Councillor Jonathan Morley**Lead Director:** Director of People and Improvement**Contact Details:** Tracy Wallis
Tel: 01904 552062
tracy.wallis@york.gov.uk**Implications****Level of Risk:** 01-03 Acceptable **Reason Key:****Making Representations:** N/A**Process:** N/A**Consultees:** N/A**Background Documents:** Committee Report for Comments from the Health Overview & Scrutiny Committee regarding the referral from the Executive on overspends in Adult Social services**Call-In**

If this item is called-in either pre or post decision, it will be considered by Scrutiny Management Committee on: 22/02/10

Internal Clearance Process**Pre-Decision***By Chief Officers at* QCG (No meeting - Circulation Deadline only) *on:* 28/01/10*By Political Group Leaders on:*

FORWARD PLAN ITEM

Meeting: Executive

Meeting Date: 30/03/10

Keyword: Education;

Item Type: Executive Decision - of 'Normal' Importance

Title of Report: School Meal Tender Process - Selection of a preferred supplier

Description: Purpose of report: If members agree with the officers' decisions, all schools that have stated that they wish to be involved in the tender will be affected as this will decide which supplier is to provide catering to these schools until at least 2015. If a different supplier is selected to the current incumbent supplier there will be TUPE issues to resolve before the contract commences in September 2010. The intention is that the new supplier will be providing school meals from September 2010. Due to the lead in time with the new supplier a decision, at this EXEC, needs to be made as to which supplier is selected to provide school meals from September 2010. The resulting effects will be seen by the pupils in September 2010. CYC, school staff, and, if applicable, any staff that are involved in TUPE will see the effects earlier as the selected supplier will be required to start implementing the contract before the start of the contract in September 2010.

Members are asked to: Review the evaluation outcome of the school meal tender and then make a decision as to the preferred supplier to award the contract to.

Wards Affected: All Wards;

Report Writer: Maggie Tansley **Deadline for Report:** 18/03/10

Lead Member: Councillor Carol Runciman

Lead Director: Director of Learning, Culture & Children's Services

Contact Details: Maggie Tansley, Head of Planning & Resources

maggie.tansley@york.gov.uk

Implications: Financial

Level of Risk: 04-08 Regular **Reason Key:**
monitoring required

Making Representations: N/A

Process: N/A

Consultees: N/A

Background Documents: Committee Report for School Meal Tender Process - Selection of a preferred supplier

Call-In

If this item is called-in either pre or post decision, it will 07/04/10

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Health Overview & Scrutiny Committee

3rd March 2010

Report of the Interim Head of Civic, Legal & Democratic Services

Update on Dental Services in York

Summary

1. The purpose of this report is to provide Members with an update on the provision of NHS dental services in York.

Background

2. Members of the Health Overview & Scrutiny Committee receive regular updates from NHS North Yorkshire & York regarding dental services in York; the last of these was on 2nd December 2009.
3. The most recent information from NHS North Yorkshire & York is attached at Annex A, to this report. Lorraine Naylor, the Assistant Director – Primary Care, will be in attendance at the meeting to present the paper and answer any questions Members of the Committee may have.

Consultation

4. This report is part of ongoing consultation between Members and NHS North Yorkshire & York in relation to the provision of dental services in York.

Options

5. Members have the following options:

Option A Continue receiving quarterly updates regarding dental provision from NHS North Yorkshire & York

Option B Stop receiving quarterly updates regarding dental provision from NHS North Yorkshire & York

Analysis

6. Although receiving regular updates is invaluable in keeping Members informed of progress concerning dental provision in the area, Members may wish to consider whether this will have an impact on other work scheduled on the current work plan.

Corporate Strategy 2009/2012

7. This report relates to the 'Healthy City' theme of the Corporate Strategy 2009/2012.

Implications

8. **Financial** - There are no known financial implications associated with the recommendations within this report.
9. **Human Resources** – There are no known Human Resources implications associated with the recommendations within this report.
10. There are no known equalities, legal, crime & disorder, information technology, property or other implications associated with this report.

Risk Management

11. In compliance with the Council's risk management strategy there are no known risks associated with the recommendations in this report.

Recommendations

12. Members are asked to:
- i. Note the update from NHS North Yorkshire & York
 - ii. Decide whether they wish to receive further updates on dental provision in York from NHS North Yorkshire & York

Reason: In order to carry out their duty to promote the health needs of the people they represent.

Contact Details

Author:

Tracy Wallis
Scrutiny Officer
Scrutiny Services
Tel: 01904 551714

Chief Officer Responsible for the report:

Alison Lowton
Interim Head of Civic, Legal & Democratic
Services
Tel: 01904 551004

Report Approved

Date 23.02.2010

Specialist Implications Officer(s) None

Wards Affected:

All

For further information please contact the author of the report

Background Papers:

None

Annexes

Annexes A Update on dental services from NHS North Yorkshire & York

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Report To: City of York Council Health Scrutiny Committee -
February 2010

Report From: Assistant Director of Commissioning and Service
Development

Report Subject: Dental Services

1. Introduction

This paper updates the previous quarterly report to the OSC about the numbers of patients accessing NHS dental services and the length of time patients are on the dental access database before they are allocated to a dentist.

The information provided relates to the Selby & York area only and information on the number of dentists in the area providing NHS services.

2. Numbers Of New Patients Seen

Table 1: New capacity for patients across NHS NYY in 2009/10 by quarter

Impact of new commissioning 09/10	UDAs	Capacity (patients)
Q1		
Q2	15,000	5,019
Q3	40,000	13,383
Q4	153,000	51,223
TOTAL	208,000	69,625

3. Access – New Patients Assigned to a Dentist

Table 2: The numbers of patients assigned to a dentist from the database for the period 1 April 2009 – 6 January 2010;

Locality	Q1 2009	Q2	Oct	Nov	Dec	TOTAL
Selby & York	1,533	1,471	362	636	248	4,250

4. Demand for NHS Primary Care Dentistry

Table 3: The numbers of patients who have been added to the database for the period 1 April 2009 – 6 January 2010;

Locality	Q1 2009	Q2	Oct	Nov	Dec
Selby & York	4,536	4,054	1,132	757	857

5. Waiting times

As at 6 January 2010 the total number of patients registered on the dental database awaiting allocation to an NHS dentist within the NYYPCT area is 11,856.

The table below highlights the waiting times of patients awaiting a NHS dentist as at Jan 2010:

Number of patients assigned in
January 10 230

1 Month	1
1 to 2 Months	0
2 to 3 Months	3
3 to 4 Months	0
4 to 5 Months	0
5 to 6 Months	2
6 to 12 Months	0
Over 12 Months	224
Total Waiting	230
Median waiting time for those assigned (days)	226
Median waiting time for those still waiting (days)	138

6. Supply of Primary Dental Services

There are currently 17 NHS Practices in the City of York area, and these are commissioned on the basis of UDA activity.

The PCT has no commissioning relationship with private dentists.

There are approximately 5 fully private practices.

7. Future plans

The Oral Health Strategic Commissioning group has undertaken a review of the impact of previous procurements from 2008/9 to inform future commissioning plans. Within these plans various priorities were identified including;

- Access to NHS dental care to meet the Vital Signs target monitored by the SHA – 66% of patients must have accessed an NHS dentist in the previous 24 months
- Access to services in areas where practitioners have decided not to continue to provide NHS dental care
- Access for patients in areas that have traditionally been underserved.

With reference to the Vital Signs target, NHS NYY is currently achieving 51%. To address this significant work has been undertaken last year, and further procurement plans for 2010/11 have been developed.

The recent paper submitted to the NYY internal commissioning committee (ICE) to outline these plans was agreed. This plan outlines a further procurement covering both general dental care and Orthodontics.

To establish priority areas for this procurement the Oral Health group have analysed coverage of UDAs across each locality and head of population, waiting list size, length of wait and areas of deprivation. This has provided a picture of need versus demand.

However, the Oral Health group is keen to ensure that a collaborative approach is taken to build on access in areas felt locally to be underserved before this procurement is started. The group is therefore keen to learn from OSC where their own priority areas for NHS dental access across York, and ensure that this is fed into the procurement project. This will establish a plan to focus resources on the areas agreed by both parties.

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Health Overview & Scrutiny Committee

3rd March 2010

Report of the Interim Head of Civic, Legal & Democratic Services

Update on Recommendations arising from the LINKs¹ report on Neurological Services and an Update on LINKs Report Writing Protocol

Summary

1. This report presents Members with a response from LINKs regarding queries in relation to the recommendations arising from their report on Neurological Services. It also presents a copy of the LINKs report writing protocol for information.

Background

Neurological Services Recommendation

2. At a meeting of the Health Overview & Scrutiny Committee on 23rd September 2009 Members received a report from LINKs on Neurological Services. This reported back on a Public Consultation and Awareness Event they had held. The report contained the following recommendation for the Health Overview & Scrutiny Committee:

'York LINK recommends to City of York Council Health Overview & Scrutiny Committee that they monitor regular reports on how many members of staff have undergone the different types of training'

3. At their meeting on 23rd September Members of the Committee asked for further clarification on the recommendation, especially the type of training required. The LINK has now responded to the Committee and the letter containing this information is attached at Annex A to this report.

Protocol

4. The publication of the first LINK reports was an important milestone in the development of the York LINK. In recognising this, the Council and other health partners also felt that there could be improvements in the way information was presented to them and to the public.

¹ Local Involvement Networks

5. Since that meeting, the York LINK has developed a Protocol to improve the process of identifying and agreeing an issue for inquiry through to the production and presentation of the final report. This is attached at Annex B to this report. The protocol sets out the method by which reports will be written and issued. It also defines the roles and responsibilities of different agencies. All future reports will comply with this protocol

Consultation

6. LINKs Public Awareness and Consultation Events are carried out in liaison with many people; these are set out within each report the LINK produces.
7. A draft of the original Report Writing Protocol was e-mailed to all relevant health partners, including the Committee for comments in January 2010.

Options

8. Members are asked to note the Protocol at Annex B to this report.
9. They are also asked to note the contents of the letter from LINKs at Annex A to this report (paragraphs 2 & 3 of this report refer)

Analysis

Neurological Services Recommendation

10. Annex A to this report sets out the LINKs response to the Health Overview & Scrutiny Committee as referred to in paragraphs 2 & 3 of this report. The LINK Steering Group Members discussed the request made by the Committee to clarify the recommendation and have now devised an alternative approach to monitoring the number of Home Care staff that have undergone the differing types of training required to care for people with neurological conditions.
11. There are no options directly associated with this part of the report and no further action needed from the Committee today.

Protocol

12. The development of the Protocol is a further positive step in the development of York Link. York LINK is very keen to uphold their role as an independent body and recognises that it will be most effective if it can build and sustain healthy relationships with key partners such as the Health Overview & Scrutiny Committee.
13. From a contractual perspective York LINKs have done well to complete and issue reports eighteen months after the award of the contract. There is a real desire locally for LINKs to succeed and add value to the healthcare system of York and to achieve this York LINKs needs to be respected and supported.
14. This means that we expect the LINK at times to make difficult or unpopular findings as their purpose is to provide objectivity, alternative voice and

challenge. However for that difficult role to be fulfilled the LINK will need support to help it develop. Therefore, the Report Writing Protocol presented today gives an opportunity for the Health Overview & Scrutiny Committee, amongst other partners, to reflect on what has been learnt from the issuing of the first reports and consider how the process of producing and issuing reports may be improved in the future.

Corporate Strategy 2009/2012

15. This relates to the Healthy City and Inclusive City themes of the Corporate Strategy.

Implications

16. There are no known Financial, Human Resources, Legal or other implications associated with the recommendations within this report.

Risk Management

17. In compliance with the Council's risk management strategy there are no known risks associated with the recommendations within this report.

Recommendations

18. Members are asked to:
 - i. Note the contents of the letter at Annex A to this report
 - ii. Note the LINKs Report Writing Protocol at Annex B to this report.

Reason: To enable the Health Overview & Scrutiny Committee to keep up to date with the work of the York LINK & continue to build a positive relationship with them.

Contact Details

Author:
Tracy Wallis
Scrutiny Officer
Scrutiny Services
Tel: 01904 551714

Chief Officer Responsible for the report:
Alison Lowton
Interim Head of Civic, Legal & Democratic
Services

Report Approved **Date** 26 February 2010

Specialist Implications Officer(s) None

Wards Affected: All

For further information please contact the author of the report

Background Papers:

LINks Public Awareness & Consultation Event on Neurological Services – 25 June 2009

Annexes

Annex A Letter to Health Overview & Scrutiny Committee - 04.02.2010

Annex B LINks Report Writing Protocol

Tracy Wallis, Scrutiny Officer
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York
YO1 9QN

YORK LINK

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Phone: 01904 621631 Mob: 07971 054 829

E-mail: admin@yorklink.org.uk

Web: www.yorklink.org.uk



04/02/10

Dear Tracy

Thank you for your reply to the LINK recommendation contained in the PACE report on Neurological services.

The LINK Steering Group members would like to make the following comments on the recommendation:-

The LINK recommends that the OSC monitors regular reports on the numbers of Home Care staff that have undergone the differing types of training required to care for people with neurological conditions.

The LINK Steering Group members discussed the problems that were identified by the OSC in meeting this recommendation and have devised an alternative approach.

The LINK has discovered that all Home Carers, whether they are employed directly by the Council or by Home Care agencies, and non-nursing staff employed in residential and nursing homes should receive training to meet the National Minimum Standards.

The standards are part of the Care Quality Commission assessment and include the following Common Induction Standards (CIS) that have been developed by Skills for Care:-

- Understanding principles of care
- Understanding the organisation and the role of the worker
- Maintain safety at work
- Communicate effectively
- Recognise and respond to abuse and neglect
- Develop as a worker

Each of these standards must be met within a period of 12 weeks before a worker is deemed 'safe to leave' i.e. is able to work unsupervised.

Further statutory standards specifically for first aid, moving and handling, food hygiene, safeguarding and health and safety must also be undertaken and many workers are encouraged to undertake NVQ level 2 in Health and Social Care for Home Care Workers. However, these standards do not include training on aspects of care for people with a specific condition.

The LINK carried out a small survey of Home Care providers and Care Homes in the York area and discovered that some, but not all, provide additional training for staff on specific conditions. It appears that the biggest barriers to this are the costs and the difficulty in finding organisations to deliver the training.

The LINK has contact with a large number of local voluntary groups (mainly linked to national charities) and local charities and some have stated that they would be willing to provide training free of charge. The LINK has now written to all Home Care providers, Residential and Nursing Homes in the area asking them if a list of free training providers made available via the LINK office would improve matters. This proposal has received a positive response as most providers wish to improve staff performance and the LINK is now in the process of collating a list of voluntary organisations willing to provide free training. Although this training may not include a great deal of Anatomy and Physiology about conditions it will be in the main be provided by the people who have the condition or their Carer so they will be able to give the Home Carers information that they cannot gain from books or formal training courses.

The actual training will need to be agreed between the agencies and voluntary/charitable groups concerned but it is hoped that a record of the numbers of staff who attend as well as an evaluation of how it will improve Staff's performance at work will be gathered by the LINK. It is hoped that this information will be helpful in the commissioning process for Home Care services and for public information for those who are undertaking personalisation of their care. The LINK also proposes to publicise this scheme to the CQC and Department of Health in the hopes that it will be adopted as best practice for other areas.

Thank you for your help in this area and please do not hesitate to contact the LINK if you require further information.

Yours sincerely

.....

Lesley Pratt, Vice-chair

York LINK

LINK Report Writing Protocol

Following an enquiry of issues, York LINK will publish a report containing the findings and any recommendations to improve or develop services.

It is important to try to make sure that everyone in the community has a chance to contribute towards the evidence given to the LINK and statutory services have the chance to verify that the LINK has the correct factual information about the services necessary to provide constructive recommendations.

This will be achieved through the following steps:-

Prior to adopting an issue for enquiry

1. Information on how to refer 'issues' for the work plan will be published in the LINK newsletter and posted on the website at least two months prior to the Annual General Meeting (AGM).
2. When all issues have been gathered they will be collated into an 'issues voting form' that will be sent to all members. Members will be asked to complete and return the form at least two weeks before the date of the LINK AGM.
3. The result of the voting will be assessed by at least two members of the Steering Group and the issues collecting the highest number of votes will be adopted to form the LINK the work plan for the following year.
4. The work plan will be announced at the AGM and communicated to other members via the next LINK newsletter and posted on the LINK website.
5. All voting papers will be retained by the LINK until at least the next AGM.

Collecting information

1. Following the AGM the LINK Steering Group will agree dates to begin enquiries into the various issues during the year.
2. Notification of the start of an enquiry will be published via a letter in the 'letters page' or an editorial in the 'Press' newspaper. This will appear at least two weeks

prior to the agreed date for an enquiry and will request further information on the relevant issue.

3. The LINK will request information from statutory services, arrange 'enter and view' visits or Public Awareness and Information Events (PACE) to gain further information prior to writing a report.
4. The LINK will cross reference all evidence and information gained from the above actions to the Care Quality Commission Essential Standards of Quality and Safety; all information will be retained and made available to the Care Quality Commission Assessors on request.

Writing a LINK report

1. When Steering Group members are satisfied that all information has been collected a report of the findings will be written in draft form and sent to presenters at PACE events etc as required, for verification.
2. A meeting will be arranged with at least two Steering Group members who will go through the information in the report and agree recommendations that meet the Care Quality Commission Essential Standards.
3. The recommendations, including the numbers of people who provided evidence, will be written into the draft report which will then be sent to statutory services for initial comment and verification of factual accuracy - with a timescale of twenty working days to respond.
4. The draft report will then be sent to all Steering Group members for final agreement / approval at the following Steering Group meeting. Any responses from statutory services to the draft report will be discussed at that meeting.

Publishing a LINK report

1. When a draft report has been agreed at a LINK Steering Group meeting it will be published within a period of two weeks.
2. The published report and a letter outlining the recommendations will be sent by the LINK to the relevant statutory authority requesting a response within 20 days or a reason why this is unavailable.
3. The expected response should include details of how the relevant statutory authority intends to take forward the recommendations made, or provide an explanation as to why this will not be feasible.

- 4. A notice will be put in the 'Press' newspaper and the LINK newsletter and posted on the website to inform members and the public that the published report is available via the website, and on request from the LINK office.
- 5. A copy of the published report will also be sent to all public libraries and as many public gathering places as possible in York with a request to put it on display.
- 6. A letter will be sent to everyone who provided evidence asking them to inform the LINK office if they would like a copy of the published report.

This protocol has been agreed by the LINK Steering Group and statutory authorities.

Signed:Date.....

Name: Andrew Kent, Chair York LINK

Signed:Date.....

Name: Bill Hodson, Director of Adult Social Services, City of York Council

Signed:Date.....

Name: Patrick Crowley, Chief Executive, York Foundation Hospital

Signed:Date.....

Name: Jayne Brown, Chief Executive, NHS North Yorkshire & York

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Health Overview and Scrutiny Committee3rd March 2010**Report of the Director of Housing & Adult Social Services****Finance and Performance in Adult Social Services 2009/10 - Update****Summary**

1. This report provides an update of the 2009/10 position for both finance and performance in Adult Social Services, the main area covered by the Health Overview and Scrutiny Committee.

AnalysisFinance – overview

2. The net approved budget for Adult Social Services is £41m and, after identifying £822k of in-year savings to address cost pressures in the year, it is currently projected that Adult Social Services will overspend by £1.7m, an increase of £600k from the 2nd monitoring report.
3. The underlying cause of the overspend reported previously still exists, namely the rise in demand across all areas of adult social care, which is resulting in increased Direct Payment take up (£883k), costs related to Home Care (£519k), Mental Health placements (£254k), residential and nursing placements (£231k) and rising costs at Elderly Persons Homes (£158k). The directorate had already identified in year savings of £606k to address the overspend prior to Monitor 2 and has since identified a further £216k, which includes vacancy management measures and redirection of grants.
4. The increase in demand from older and disabled people was anticipated and the York Long Term Commissioning Strategy reported to members in October 2007 projected that by 2020 there would be an increase of 31% in the over 65 population and, within this number, an increase in the over 85s of 60%. People over 85 are more likely to need support from health and social care services. The strategy also went on to project the likely impact on service demands and costs.
5. It is for this reason that the major reviews of direct services were agreed by members and these are being brought within the broader More for York programme. However, within this context of increasing demand it will be not be possible to produce a balanced outturn position in 2009/10 in advance of the completion of the major reviews.

Performance – overview

6. NPIs 132 & 133 – timeliness of social care assessments and packages. Both these indicators cover areas that need to show improvement to address performance issues highlighted in the 2008-09 Adult Social Care inspection. Progress so far this year is mixed:
 - NPI 132: Timeliness of assessments. Performance has improved from 67.1% to 79%, already exceeding the 2009-10 target of 77%. If this is maintained, York would move up from the bottom to the 3rd quartile, based on PwC benchmarking data.
 - NPI 133: Timeliness of care packages. The improvements made on social care assessments are having a knock on effect for the timeliness of care packages as services are struggling to keep up. Performance so far this year is at 80.2%, a drop of 10% on the 90.3% achieved in 2008 - 09. This falls short of the 90% target set for 2009 -10 and if no further improvement is made this year, this will move York from 3rd to the bottom quartile of unitary authorities. A number of actions are in place to address the issue of incorrect reporting (i.e. how certain types of residential respite stays are reported). The delivery of re-enablement home care when people leave hospital is also being explored and it is anticipated that these actions should lead to improvement and that performance will be closer to target by March 2010.
7. NPI 141: Vulnerable people achieving independent living (LAA indicator). Performance has fallen slightly due to an amendment made by the Government Office to the quarter 1 figure previously reported to members in September. This was due to a technical issue relating to a workbook supplied by a provider being deemed invalid. This has resulted in a 2.2% drop, taking performance from 70.7%, to 68.5% (for the first 6 months of 2009 -10), which places York in the bottom quartile. HASS are currently investigating the possibility of resubmission to correct this figure.

Corporate Priorities

8. The information included in this report demonstrates progress on achieving the council's corporate strategy (2007-11) and the priorities set out in it.

Implications

9. There are no human resources, equalities, legal, crime & disorder, information technology, property or other implications associated with this report. The reasons for the budgetary pressures on adult social care were discussed in detail at the meeting on 13th January and have been reported to the Executive.

Risk Management

10. There are no new risks associated with this report.

Recommendations

11. As this report is for information only, there are no recommendations.

Author:	Chief Officer Responsible for the report:		
Debbie Mitchell Head of HASS Finance (01904) 554161	Bill Hodson Director of Housing & Adult Social Services (01904) 554001		
	Report Approved	√	Date 16 February 2010

Specialist Implications Officer(s) None

Wards Affected: *List wards or tick box to indicate all* **All**

√

Background Papers

Third Performance and Financial Report for 2009/10, Executive 16th February 2010

Annexes

None

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