



Notice of meeting of

Health Overview & Scrutiny Committee

To: Councillors Boyce (Chair), Fraser, Holvey, Kirk,
Simpson-Laing, Sunderland and Wiseman (Vice-Chair)

Date: Wednesday, 7 July 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 - 12)
To approve and sign the minutes of the last meeting of the Committee held on 29 March 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 6 July 2010.**

- 4. Work Plan 2010/11** (Pages 13 - 20)
This report presents the Committee's work plan for the forthcoming year for consideration. It asks Members to consider any additions and/or amendments they may wish to make to it.
- 5. Update on Dental Services in York** (Pages 21 - 28)
The purpose of this report is to provide Members with an update on the provision of dental services in York.
- 6. Update Report - Proposed Scrutiny Topic on Post Maternity Services** (Pages 29 - 44)
This report asks Members to receive a presentation updating them on the 'Universal Services Review' being undertaken by NHS North Yorkshire and York. It also asks them to make a decision on whether to undertake a review on a proposed scrutiny topic regarding post-maternity services.
- 7. Finance and Performance in Adult Social Services 2009/10 - Update** (Pages 45 - 48)
This report provides the 2009/10 outturn position for both finance and performance in Adult Social Services, the main area covered by the Health Overview and Scrutiny Committee.
- 8. LINKs (Local Involvement Network) Statutory Stakeholder Group** (Pages 49 - 56)
This report asks Member to note the contents of the draft terms of reference for the newly established York LINK Statutory Stakeholder Group. It also asks Members to nominate two representatives to the group.
- 9. 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
- Any special arrangements
- Copies of reports

Contact details are set out above

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Further information about what's being discussed at this 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	29 MARCH 2010
PRESENT	COUNCILLORS ALEXANDER (CHAIR), FRASER, SUE GALLOWAY, SIMPSON-LAING AND WISEMAN (VICE-CHAIR)
IN ATTENDANCE	JOHN CLARE – NHS NORTH YORKSHIRE & YORK (MENTAL HEALTH) GRAHAM PURDY –NHS NORTH YORKSHIRE & YORK SALLY FOSTER – NHS NORTH YORKSHIRE & YORK DR DAVID GEDDES – NHS NORTH YORKSHIRE & YORK JOHN BURGESS – MENTAL HEALTH FORUM ANNIE THOMPSON - LINKS SALLY HUTCHINSON – AGE CONCERN VICKY HARRISON – ON PLACEMENT WITH AGE CONCERN DOUG PHILIPS – ON PLACEMENT WITH AGE CONCERN LIBBY MCMANUS – YORK HOSPITAL PAUL BAINES – YORK HOSPITAL GOVERNOR HELEN MACKMAN – YORK HOSPITAL GOVERNOR JOHN YATES – OLDER PEOPLE’S ASSEMBLY PETE DWYER – CITY OF YORK COUNCIL KATHY CLARK – CITY OF YORK COUNCIL
APOLOGIES	COUNCILLORS ASPDEN AND SUNDERLAND

54. 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. Other than previously declared standing interests, circulated with the agenda, no additional interests were declared.

55. MINUTES

RESOLVED: That the minutes of the last meeting of the Committee held on 3 March 2010 be approved and signed by the Chair as a correct record.

56. PUBLIC PARTICIPATION

It was reported that there had been one registration to speak at the meeting under the Council's Public Participation Scheme. Details of the speaker are set out under the individual agenda items

57. WORK PLAN 2010

Consideration was given to the Committee's work plan for 2010.

The Chair reported that Cllr Wiseman was unable to attend the Committee's meeting scheduled for 19 May 2010, when consideration would be given to the final report of the Childhood Obesity Task Group of which she was Chair. Alternative dates for this meeting had been suggested as 25 or 26 May.

- RESOLVED:
- i) That the date of the May meeting be agreed by email to ensure majority attendance. ^{1.}
 - ii) That an update report on Transforming Community Services be arranged for the Committee's second meeting in July. ^{2.}

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

Action Required

- 1. Email Committee to agree date of May meeting. JP
- 2. Update Committee's Work Plan. TW

58. PRESENTATION ON TRANSFORMING COMMUNITY SERVICES

Representations were received from John Yates on behalf of the Older Peoples Assembly. He referred to the transfer of these services to yet another provider with what appeared to be little or no public/patient consultation. He questioned how and when the PCT intended to remedy this situation.

Graham Purdy, Assistant Director of North Yorkshire and York NHS gave a presentation, which updated the Committee on proposals for Transforming Community Services (TCS). This related to the separation from NHS North Yorkshire and York of the provider side of the organisation, which included community nursing and mental health services, including inpatient and community based services. He confirmed that the PCT Board were to meet the following day to sign off a letter, which outlined the current situation in relation to the changes.

The presentation related to the following areas:

Policy and Context

- Policy opportunity to focus on improving community services;

- Milestones achieved in 2009 - contractual separation required by April, business ready by October and Community Services Strategy by November;
- National timetable – December 2009 operational plan, PCTs to have determined the future organisational model for PCT provided services by October 2010, at the latest, and have implemented where possible by March 2011;
- NHS NYY timescales – Board agreement for Community & Mental Health Services to be hosted by the PCT until March 2011, organisational model determined by October 2010 and implementation plans in place through 2011;

Organisational form – the options

- 15 suggested options for Organisational Model;
- Shortlist for Community & Mental Health Services – vertical integration, horizontal integration, integrated health and social care and Social Enterprises but with rigorous assurances required.

NHS NYY Process and Timeline

- March 2010, confirm with Strategic Health Authority, organisational models that are discounted;
- Agree organisational form, March-September 2010;
- Board approval by October 2010;
- 5 Locality Boards established March 2010 to agree transformation of community services of which York was one. These would be multi agency including the PCT, Local Authority, Providers and local stakeholder;
- Mental Health Project Board established to manage mental health transfer;
- Finalise details which included separate approaches for the transfer of community services and mental health services;
- Proceed to tender Mental Health services
- NHS NYY Programme Board to oversee transition.

Members questioned various details of the presentation including:

- Confirmation that no new NHS organisations were to be formed as part of this plan;
- The status quo which had previously mentioned as an option now appeared to have been discounted and which raised concerns;
- There appeared to be no dialogue between the Authority and the PCT in relation to these changes;
- How would the PCT engage with Local Authorities in the later stages of the process?
- Details of the link Officer between the Localities Board and the Authority;
- Details of transfer costs.

Officers provided some reassurances around the local structure in that York would be considered in its own right as each PCT area had its differing local needs. It was also confirmed that the York region was one of the last to be agreed with there being a further six months until final

agreement was reached. Reference was also made to Officer links with the Locality Board.

Following further discussion it was

RESOLVED: That a further update on progress on the Transforming of Community Services be arranged for the Committees second meeting in July. The update to include details of how the PCT will consult users, carers and members of the public on these changes to the service, together with a timeline of their future intentions.¹

REASON: To continue to update the Committee on progress around Transforming Community Services.

Action Required

1. Update Committees' Work Plan.

TW

59. PRESENTATION ON THE INDIVIDUAL FUNDING REQUEST PANEL FOR NHS NORTH YORKSHIRE AND YORK

John Yates, made representations on behalf of the Older People's Assembly in relation to the presentation. He stated that, as the Assembly had had no sight or knowledge of the contents of the presentation that they felt unable to comment. He did express concern in relation to the make up of the Individual Funding Request Panels (IFR) which they felt were made up of individuals with administrative/financial abilities rather than with clinical expertise which provided no reassurance for the patient.

Dr D Geddes, Medical Director for NHS North Yorkshire and York gave the Committee a presentation on the IFR Panel which made funding decisions for patient care that may lie outside national or local commissioning policies together with the referral guidelines.

The presentation included details of:

- The NHS Constitution;
- 2009 'Directions to PCTs and NHS Trusts';
- Details of the Bodies which informed the commissioning policy which include NICE, the Drug and Therapeutics Committee and clinical networks;
- IFR was a request to a PCT to fund healthcare for an individual who fell outside the range of services and treatments that the PCT had agreed to commission;
- IFRs were not decisions related to care packages for patients with complex health needs or prior approvals, which were used to manage contacts with providers.
- IFRs generally arose either if the patient had a very rare condition, the patient had a more common condition but claimed that the usual care pathway did not work for them (exceptionality) or where the

patient wished to take advantage of a novel, developing or unproven treatment.

- When a decision to refuse a request for funding had been taken then the PCT must provide a written statement of the reasons for that decision and, where necessary, offer an opportunity to speak with a clinician.
- Information on what was considered 'exceptional' and details of non-clinical factors, which could be considered as reasons for exceptionality.
- Details of the make up of the IFR Panel and confirmation that a pharmacy Advisor attended every Panel meeting;
- Details of the hierarchy/strength of evidence required together with the balance of needs of the individual with that of the community;
- 2008/09 – 1,1587 cases of which 52% of requests had been approved;
- 2009/10 – 1,380 cases of which 44% of requests had been approved;
- Details of the appeals process - 2009/10 – 7 appeals of which 2 had been successful;
- Spinal injections – evidence based commissioning.

Members questioned a number of points including:

- How requests were prioritised, particularly urgent requests;
- How changes in the levels of service e.g. in relation to back pain, were communicated to the Committee/public;
- Where successful treatments were subsequently withdrawn, following a change in the guidelines, this could result in additional costs in the long term and a loss of quality of life for patients;
- Concern that patients were still not being kept fully informed of changes;
- Lack of communication with General Practitioner's (GPs) as it appeared that differing services were offered to patients in that some requests were not being put forward for IFRs;

Dr Geddes confirmed that this was still a learning curve for the PCT and that there was a need for GPs to be better informed at an earlier stage and for an improvement in communications with patients already within the system. In answer to Members questions, in relation to back pain, he expressed concern that patients were making judgements in relation to treatments received 15 years ago and that a lot of progress had been made since then. Interpreted evidence often suggested a different pathway to injections. He explained that this was usually in the form of spinal rehabilitation, a multi disciplinary course of treatment, which drew together more than just manipulation and physiotherapy but also the psychological aspects.

RESOLVED: That the presentation be noted together with the PCTs confirmation of their proposals for communicating with patients/GP's in relation to the Panel and future requests.

REASON: To keep the Committee updated on referral guidelines and Individual Funding Requests.

60. INFORMATION REPORT ON WOMEN'S LOW SECURE UNIT, CLIFTON

The Committee considered a briefing note, which provided information on the proposals for the development of a Women's Low Secure Unit in Clifton. It had been established that there was a gap in the provision of low secure care nationally and that currently women who required specialist low secure care were often placed outside of the Yorkshire and Humber area, many within the independent sector.

It was confirmed that a number of options had been considered which had been short listed to:

- doing nothing;
- providing a new build on the Clifton House site, adjacent to the current male low secure service and
- providing a new build property on Local Authority owned land.

It was confirmed that the preferred option had been a new build on the Clifton House site. This project was now proceeding in line with the outline business case presented to the Committee.

The Chair confirmed that, in the context of this briefing, the role of the Scrutiny Committee was to comment on service need but not in relation to any planning related matters.

Members confirmed that they felt that the proposals were a sensible way forward and it was

RESOLVED: That the Committee note the details of the outline business case in relation to the new women's low secure unit proposed for the site at Clifton House, York.

REASON: To update the Committee on NHS North Yorkshire and York's proposals for a women's low secure unit in Clifton.

61. INTERIM REPORT OF THE CHILDHOOD OBESITY TASK GROUP

Members were presented with information received to date in respect of the Childhood Obesity Review.

The Scrutiny Officer referred to the following amendment required to the report:

- Paragraph 70 - Recommendations – should refer to '...the next steps set out in paragraphs 59 to 61 of this report'.

Members referred to the large amount of information received to date and for the need for the Task Group to stay focussed on the remit of the review.

Members referred to Annex E of the report, which detailed the statistics on school meal take up annually since 2003. It was pointed out that in the 1980/90's North Yorkshire County Council had the highest take up of school meals in the country. Reference was also made to the drop in take up of Free School Meals and the need for the authority to promote a general increase in take up. Members of the Committee felt that the Education Authority should proactively encourage the promotion and general take up of both school meals and free school meals through individual schools and their Governors. They suggested that the Childhood Obesity Task Group might like to consider including a recommendation about this.

The Chair thanked both Members of the Task Group and Officers for all their hard work in compiling the information contained within the interim report.

RESOLVED: That the interim report be noted together with the next steps outlined in paragraphs 59 to 61 of the report.

REASON: In order to progress this review.

CLLR J ALEXANDER, Chair
[The meeting started at 5.00 pm and finished at 6.25 pm].

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Health Overview & Scrutiny Committee

7th July 2010

Report of the Head of Civic, Legal & Democratic Services

Health Overview & Scrutiny Committee's Work Plan 2010/2011

Summary

1. This report presents the Committee's work plan for the forthcoming year for consideration. It asks Members to consider any additions and/or amendments they may wish to make to it. The work plan is attached at Annex A to this report.

Background

2. The work plan is an ongoing and fluid document that aids the Committee to plan a programme of work for the forthcoming year. The Scrutiny Officer will be in attendance at the meeting and will be happy to answer any questions Members may have on any of the items currently on the work plan.

Other Ongoing Work

3. In addition to the items listed on the work plan at Annex A to this report there is an ongoing review into Childhood Obesity being undertaken by a Task Group formed of Members of the Health Overview & Scrutiny Committee. The Task Group are due to meet again on 12th July 2010 and it is hoped that they will be able to present their final report and findings to the Committee for consideration in the not too distant future.

Possible Work Plan Items and Scrutiny Topics for the Future

	Item	Issues
1	Universal Services Review (post maternity)	Possible Scrutiny Review (original topic submitted by Councillor Wiseman). A report on this is included within today's agenda.
2	Information on how 'Service Changes' are reported to the Health Overview & Scrutiny Committee	This has been discussed at previous meetings of the Committee. Both the previous Chair and the current Vice-Chair believed that this

		needed further discussion.
3	Quality Accounts	If Members wish to comment on the Trusts' Quality Accounts in 2011 this will need to be scheduled into the work plan at the appropriate point.
4	Regular Updates from NHS North Yorkshire & York, The Hospitals Foundation Trust & the Yorkshire Ambulance Service	It is suggested that the Committee receive six monthly or annual reports (either verbal or written) from the 3 Health Trusts detailing their forthcoming priorities and any major issues they are facing. It is suggested that the current updates on dental provision could possibly be incorporated into reports from NHS North Yorkshire & York.
5	Presentation on how the Specialised Commissioning Group works	This has been offered by NHS North Yorkshire & York
6	Presentation on NHS North Yorkshire & York's 5 Year Strategic Plan	This has been offered by NHS North Yorkshire & York
7	Presentation on the Joint Strategic Needs Assessment (JSNA)	This has been offered by NHS North Yorkshire & York

4. Clearly any, or all, of the above will need scheduling within the work plan should Members wish to progress them.

Consultation

5. Members, relevant officers and external partners will be consulted and/or notified of the Committee's work plan for 2010/2011.

Options

6. Members may choose to add to their work plan some, none or all of the issues and/or topics set out in the table at Paragraph 3 to this report.
7. Members may choose to suggest alternative topics and/or issues relevant to the Committee's remit to add to the work plan.

Analysis

8. Members should consider which topics, if any, they would like to review during this forthcoming municipal year. The Childhood Obesity Scrutiny Review is nearing completion and it is hoped that once this is complete the Committee should have capacity to undertake a further review. A further possible topic is suggested at (1) of the table in paragraph 3 and a report on this is included within today's papers. Alternatively Members may suggest their own topics or ask any of the Trusts or senior officers present for suggestions.
9. In addition to this Members will be receiving the 2009/10 Year End Outturn Report and this may highlight potential topics for review.
10. The Health Overview & Scrutiny Committee also receives a wealth of other reports providing information on a wide range of health related matters. Some suggestions for further reports are set out at numbers (2) to (7) in the table above. Alternatively Members may like to receive information on other health related matters.
11. The Committee will also receive extracts of any health or social care Executive Forward Plan items as part of meeting agendas (Annex B refers). Members can request copies of these reports or further information from officers.
12. Additional meetings can be added to the meeting dates set out within the work plan at Annex A should the need arise. The Committee can, should it wish to do so, form Task Groups to undertake scrutiny reviews. All Task Groups will report their findings back to the full Committee for approval.

Corporate Strategy 2009/2012

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

Implications

14. There are no known financial, human resources, legal or other implications associated with the recommendation within this report. Any implications arising from reviews will be addressed within reports associated with individual reviews.

Risk Management

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

Recommendations

16. Members are requested to agree a work plan for 2010/2011 and consider which topics/issues they would like to address.

Reason: In order to provide the Committee with a work programme for future meetings.

Contact Details

Author:

Tracy Wallis
Scrutiny Officer
Scrutiny Services
Tel: 01904 551714

Chief Officer Responsible for the report:

Andrew Docherty
Head of Civic, Legal & Democratic Services
Tel: 01904 551004

Report Approved

Date 26.06.2010

Specialist Implications Officer(s) None

Wards Affected:

All

For further information please contact the author of the report

Background Papers:

None

Annexes

Annex A Work plan

Annex B Forward Plan Extracts

Health Overview & Scrutiny Committee Work Plan 2010/11

Meeting Date	Work Programme
7 th July 2010	<ol style="list-style-type: none"> 1. 2009/10 Year End Outturn Report 2. Update on NHS North Yorkshire & York's Universal Services Review (post maternity) 3. Update on Dental Provision in York 4. Work Plan Report 5. LINKs Stakeholder Group Report
20 th July 2010	<ol style="list-style-type: none"> 1. Update on Recommendations Arising from the Dementia Review 2. Presentation on Transforming Community Services 3. Presentation from LINKs regarding their Annual Report & work plan for the forthcoming year (2010/11) 4. LINKs Public Awareness & Consultation (PACE) reports on End of Life Care and Dignity & Respect
22 nd September 2010	<ol style="list-style-type: none"> 1. Quarter 1 Monitoring Report & Report or Attendance of the Executive Member 2. Annual Report from relevant Local Strategic Partners
1 st December 2010	<ol style="list-style-type: none"> 1. Quarter 2 Monitoring Report
19 th January 2011	
2 March 2011	<ol style="list-style-type: none"> 1. Quarter 3 Monitoring Report & Annual Report from the LSP Chairs

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FORWARD PLAN ITEM

Meeting: Executive Member for Housing & Adult Social Services

Meeting Date: 27/07/10

Keyword: Health; Adult Social Care; Policy Framework; Life in the community;

Item Type: Executive Member Decision - of 'Normal' importance

Title of Report: Joint Vision for Older People's Health and Social Care in York

Description: Purpose of report: The vision will require health and social care commissioners to work together to understand need, define service requirements and use resources. Through this they should give health and social care professional the ability to work more collaboratively across traditional boundaries and provide more integrate care for older people in the city. This is proposed as a five year vision. Improvements should be delivered progressively but begin immediately.

Members are asked to: To agree the vision and strategic outcomes within the vision.

Wards Affected: All Wards;

Report Writer: Kathy Clark

Deadline for Report: 13/07/10

Lead Member: Councillor Jonathan Morley

Lead Director: Director of Adults, Children & Education

Contact Details: Kathy Clark, Assistant Director (Commissioning and Partnerships)

kathy.clark@york.gov.uk

Implications Equalities

Level of Risk: 04-08 Regular monitoring required

Reason Key:

Making Representations: N/A

Process: The vision was developed in consultation with health commissioners. Key stakeholders were invited to two workshops. The vision has been considered by the Older People's Partnership Board.

Consultees: Representatives from: Older People's Assembly, Carers Forums, GPs, York Hospital Foundation Trust, Voluntary Sector, Care Managers, Community Health services

Background Documents: Committee Report for Joint Vision for Older People's Health and Social Care in York

Call-In

If this item is called-in either pre or post decision, it will be considered by Scrutiny Management Committee on: 31/08/10

Internal Clearance Process

Pre-Decision

FORWARD PLAN ITEM	
Meeting:	Executive Member for Housing & Adult Social Services
Meeting Date:	28/09/10
Keyword:	Adult Social Care;
Item Type:	Executive Member Decision - of 'Normal' importance
Title of Report:	Safeguarding Board (Adults) Annual Report
Description:	Purpose of report: It is a requirement to advise the Executive Member of adult safeguarding activity last year. There is no decision to be taken, but the paper is to be formally accepted and recorded as seen by the Executive Member.
Wards Affected:	Members are asked to: Formally accept and record. All Wards;
Report Writer:	Anne Bygrave
Lead Member:	Councillor Jonathan Morley
Lead Director:	Director of Adults, Children & Education
Contact Details:	Anne Bygrave
Deadline for Report:	14/09/10
Implications	
Level of Risk:	01-03 Acceptable
Reason Key:	
Making Representations:	N/A
Process:	None
Consultees:	N/A
Background Documents:	Committee Report for Safeguarding Board (Adults) Annual Report
Call-In	
If this item is called-in either pre or post decision, it will be considered by Scrutiny Management Committee on: 11/10/10	
<u>Internal Clearance Process</u>	
<u>Pre-Decision</u>	
By Chief Officers at	on:
By Political Group Leaders on:	
By Strategic Policy Panel (if required) on:	
<u>Post-Decision</u>	
By Strategic Policy Panel (if Required) on:	



Health Overview & Scrutiny Committee

7 July 2010

Report of the 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 dental services in York.

Background Information

2. Members of the Health Overview & Scrutiny Committee have been receiving regular updates from NHS North Yorkshire & York regarding dental services in York for some time now.
3. At a meeting on 3rd March 2010 the Committee received further information from NHS North Yorkshire & York on the provision of dental services in the area; this included:
 - The number of new patients seen in 2009/2010 by quarter
 - Access – new patients assigned to a dentist
 - Demand for NHS Primary Care Dentistry
 - Waiting times
 - Supply of Primary Dental Services
 - Future Plans
4. At the March meeting the Assistant Director – Primary Care informed Members that the Primary Care Trust would shortly be procuring further NHS dentists for the area. Since this time the dental procurement due to take place has had to be rescheduled to start in September (due to legal reasons), therefore the new services will not start until April next year. However the Assistant Director – Primary Care would like to reassure the Committee that the York area is one of the key target areas expected to benefit from the procurement.
5. The Committee had also requested further information be provided to their May 2010 meeting (subsequently cancelled) showing comparative data and overall trend information in relation to the provision of dental services. The Assistant Director – Primary Care has had difficulty obtaining any meaningful data on historic trends for the dental waiting lists and allocations for the City of York area. The data available, where York is separated from other regions,

only gives 2009 as a complete year, prior to this the individual patient postcode was not recorded and information reverts to the old Primary Care Trust area of Selby & York.

6. The most recent information is attached at Annexes A & B to this report for Members consideration. The Assistant Director – Primary Care will be in attendance at the meeting to answer any questions that Members might have.

Consultation

7. 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

8. Members have the following options:

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

Option B Consider receiving regular updates in relation to dental provision on a six monthly or annual basis

Option C Consider receiving information on dental services as part of a more comprehensive regular update from NHS North Yorkshire & York (paragraph 11 refers)

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

Analysis

9. At meetings of the Health Scrutiny Committee held on 2nd February 2009 and 11th May 2009 the Committee considered a possible scrutiny topic submitted by Councillor Moore in relation to 'Access to Dental Services in the York Area'. After due consideration of the matter and of additional information the Committee decided not to undertake a review on this topic but to continue monitoring dental provision on a quarterly basis.
10. 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 their work plan.
11. Members may like to consider receiving information on dental provision on a six-monthly or annual basis. Alternatively, as identified in the report on the work plan item of this agenda, Members may like to consider receiving regular updates on the key priorities of NHS North Yorkshire & York and this could incorporate some data on dental provision within the City.

12. If Members still choose to continue receiving quarterly updates then it is unlikely that there will be any significant change in the statistics until the new NHS dentists have been appointed in April next year (paragraph 4 of this report refers).
13. However, at a meeting of the Committee held on 3rd March 2010 the Assistant Director – Primary Care asked Members where any additionally procured dentists should be placed within the City. Brief discussions led to there being a possible under provision in the Acomb area of the City but statistics were not available at the meeting to confirm this. NHS North Yorkshire & York have now undertaken work, as part of the procurement process, to identify those parts of the city where dental provision is required.
14. However the procurement and evaluation process is ongoing and NHS North Yorkshire & York have indicated that it may be useful if a representative of the Health Overview & Scrutiny Committee takes part in this process. In light of this NHS North Yorkshire & York have asked if any Member of the Committee would like to act as a 'lay person' on the 'Evaluation Committee'. The Assistant Director – Primary Care will be able to provide more information regarding this offer at today's meeting.

Corporate Strategy 2009/2012

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

Implications

16. There are no known financial, human resources, legal, crime & disorder 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 in this report.

Recommendations

18. Members are asked to:
- i. Note the contents of this report and its associated annexes
 - ii. Consider using the method set out in Option C as a means to obtaining information on dental services in the future.
 - iii. Consider whether they would like to nominate a Member of the Health Overview & Scrutiny Committee as a 'lay person' on the 'Evaluation Committee'.

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

Contact Details

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Chief Officer Responsible for the report:

Andrew Docherty
Head of Civic, Legal & Democratic Services
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Report Approved

Date 25.06.2010

Specialist Implications Officer(s) None

Wards Affected:

All

For further information please contact the author of the report

Background Papers:

None

Annexes

Annex A City of York Dental Waiting List Data - May 2010

Annex B Dentistry Waiting List

City of York Dentist Waiting List Data - May 2010.

Number on the waiting list as at 01/06/10 - 6,016

Waiting Times for those on waiting list as at 01/06/10	Total
1 Month	371
1 to 2 Months	538
2 to 3 Months	544
3 to 4 Months	563
4 to 5 Months	664
5 to 6 Months	362
6 to 7 Months	507
Over 7 Months	2,467
Total Waiting	6,016

Number of patients assigned in May 2010 - 44

Waiting Times for those assigned in May 10	Total
1 Month	5
1 to 2 Months	1
2 to 3 Months	1
3 to 4 Months	1
4 to 5 Months	1
5 to 6 Months	1
6 to 7 Months	2
Over 7 Months	32
Total Assigned	44

Median waiting time for those assigned (days) 237

Median waiting time for those still waiting (days) 177

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Annex B

Dentistry Waiting List

Month	Added				Assigned				Current Waiting List							
	Added Total	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area	Assigned Total	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area
April 2008	1941								3,380							
May 2008	1669								3,607							
June 2008	1606								2,948							
July 2008	1254								3,049							
August 2008	2395								3,478							
September 2008	2031								2,441	1,484	106	498	128	225	0	4,663
October 2008	2826								3,563	2,595	43	650	48	227	0	2,907
November 2008	2094	1240	56	380			224		3,119	834	135	500	71	0	0	2,418
December 2008	1292	754	33	265			89		1,540	1,302	0	1,189	147	151	0	2,390
January 2009	2672	1456	38	539			221		2,789	1,901	101	307	43	50	0	2,728
February 2009	1981	1155	49	347			184		1,492	928	0	586	374	1	0	3,134
March 2009	1839	1278	70	49			182		1,989	928	0	586	374	1	0	3,134
April 2009	1841	1349	104	94			216		1,689	685	0	426	379	199	0	4,060
May 2009	2699	1705	36	495			43		1,465	348	231	0	173	0	0	7,751
June 2009	2693	1482	123	488			441		924	500	0	0	128	296	0	7,751
July 2009	2396	1222	113	558			106		1,684	424	0	463	0	767	0	11,006
August 2009	2911	1559	85	703			480		610	100	0	360	148	2	0	10,396
September 2009	2342	1293	69	519			53		1,558	947	0	470	41	200	0	12,071
October 2009	2136	1132	37	493			92		1,926	362	476	790	100	198	0	11,023
November 2009	1391	757	80	293			41		2,191	636	0	711	249	595	0	11,023
December 2009	1649	857	101	371			217		1,091	248	0	502	54	257	0	11,856
January 2010	2038	1126	77	413			66		1,884	510	275	503	62	544	0	11,856
February 2010	1541	846	74	294			35		1,123	840	0	101	182	0	0	12,489
March 2010	1823	862	54	274			74		2,480	1,088	0	693	110	589	0	11,639
April 2010	2242	1172	110	481			69		1,736	491	1	301	0	104	20	12,715
May 2010	1811	868	114	383			0		1,653	215	0	493	0	93	852	0

Assigned in May

Age Split	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area	Total
0-4	14	0	37	0	2	65	0	118
5-10	17	0	38	0	1	84	0	140
11-16	7	0	0	0	1	57	0	101
17-59	152	0	309	0	42	529	0	1,032
>60	24	0	72	0	47	117	0	260
No Age Listed	1	0	1	0	0	0	0	2
Total	215	0	493	0	93	852	0	1,653

Still Waiting at 1st June

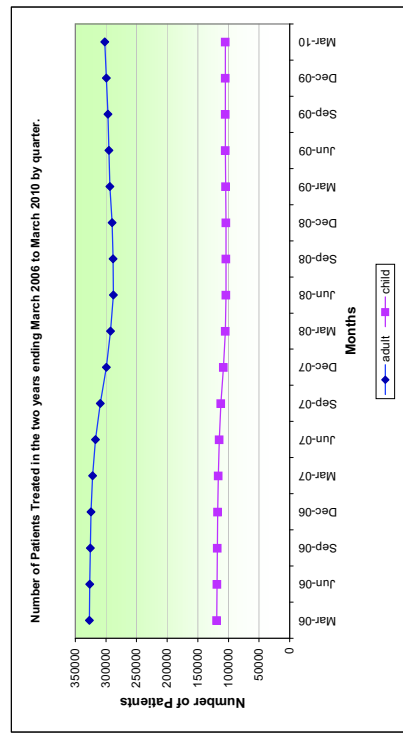
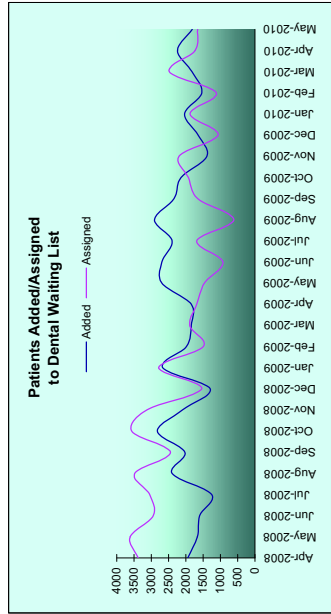
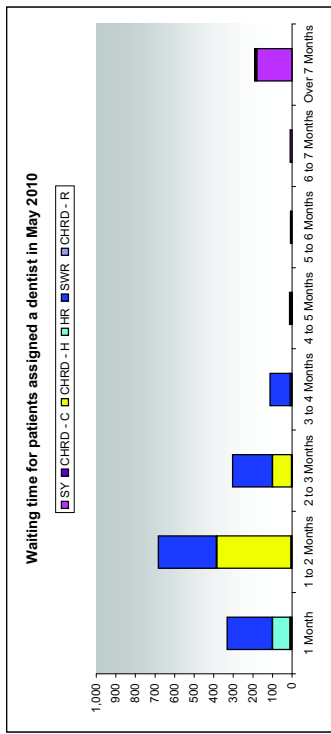
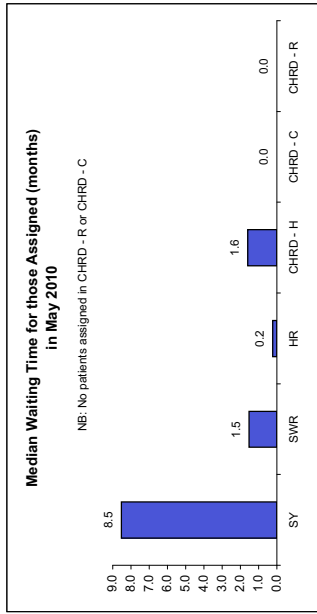
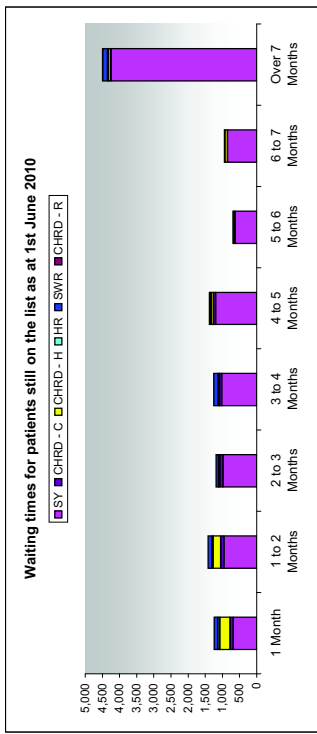
Age Split	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area	Total
0-4	862	30	48	1	10	49	22	1,022
5-10	820	26	63	1	5	37	22	974
11-16	544	22	51	0	3	45	11	676
17-59	7,261	265	514	2	75	389	188	8,694
>60	1,064	76	156	3	30	151	32	1,512
No Age Listed	0	0	0	0	0	0	0	0
Total	10,551	419	832	7	123	671	275	12,878

Waiting Times	Total	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area
1 Month	331	6	0	4	0	89	232	0
1 to 2 Months	683	5	0	379	0	2	297	0
2 to 3 Months	304	5	0	98	0	0	204	0
3 to 4 Months	113	5	0	3	0	0	105	0
4 to 5 Months	13	2	0	2	0	2	7	0
5 to 6 Months	8	0	0	0	0	0	1	0
6 to 7 Months	0	9	0	0	0	0	1	0
Over 7 Months	191	180	0	6	0	0	5	0
Total Assigned	1,653	215	0	493	0	93	852	0

Waiting Times	Total	SY	CHRD - C	CHRD - H	CHRD - R	HR	SWR	Out of Area
1 Month	1,248	683	94	235	0	53	115	8
1 to 2 Months	1,435	956	91	222	0	26	126	14
2 to 3 Months	1,193	977	95	25	0	11	131	12
3 to 4 Months	1,283	1,019	65	36	2	0	48	30
4 to 5 Months	1,424	1,198	57	73	2	3	48	43
5 to 6 Months	711	628	2	51	0	1	11	18
6 to 7 Months	957	846	3	71	0	1	20	16
Over 7 Months	4,627	4,244	12	59	3	28	147	134
Total Waiting	12,878	10,551	419	832	7	123	671	275

Dentistry

Number of patients on waiting list as at 1st June 2010 12,878





Health Overview & Scrutiny Committee

7th July 2010

Report of the Head of Civic, Legal & Democratic Services

Update Report – Proposed Scrutiny Topic on Post Maternity Services

Summary

1. This report asks Members to receive a presentation updating them on the 'Universal Services Review' being undertaken by NHS North Yorkshire & York. It also asks them to make a decision on whether to undertake a review on a proposed scrutiny topic regarding post-maternity services.

Background

2. In October 2009 Councillor Wiseman submitted a scrutiny topic regarding whether the way health visitors are currently working in the York, allows them to offer a full and effective service to mothers and their babies from birth to six months.
3. At a meeting on 14th December 2010 the Committee considered a feasibility report (Appendix 1 and Annexes A and B refer). This report advised that because NHS North Yorkshire & York were currently undertaking a piece of work that would culminate in a revised universal services model for 0 to 19 year olds, it would be better to receive further information from them prior to making a decision on whether to proceed with this topic.
4. The review being undertaken by NHS North Yorkshire & York is being undertaken in order to develop a service specification for 0 - 19 universal health services (historically known as health visiting and school nursing services) based around the National Healthy Child Programmes. It will be a countywide specification outlining what services need to be delivered and what outcomes are expected. There will however be flexibility built in to enable providers to work with users and stakeholders to agree on the model of local delivery. The aim is to define a detailed service specification for these elements of health services by the end of October 2010. This will then enable the PCT to be clear how current services may differ from the Healthy Child Programme and what is required to move forward.
5. At a meeting on 20th January 2010 the Committee received a presentation from the 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. (A copy of this presentation is available on request). It was confirmed that a new health strategy had been introduced in 2009, which required examination of the commissioning pathways.

6. On consideration of the information received in the original report and the presentation Members confirmed that they generally supported progressing this topic to review as they wished to ensure that any new pathways/models would provide the correct level of services for all. However, Members agreed to wait for a further update from NHS North Yorkshire & York before committing to undertake a review on this topic; this update is available at today's meeting.
7. The Head of Children's & Young People's Commissioning will be in attendance at today's meeting to present Members with an update on the work they are currently undertaking.

Consultation

8. The following persons were consulted when the topic was originally put forward by Councillor Wiseman and their views are in the attached feasibility report:
 - Executive Member for Children's Services
 - Director of Learning, Culture & Children's Services
 - Representatives of NHS North Yorkshire & York
 - Representatives of York Hospitals Foundation Trust
 - York LINK (Local Involvement Network)

Options

9. Members are asked to consider the following options:

Option A Progress this topic to review

Option B Do not progress this topic to review

Analysis

10. At an earlier meeting of the Committee Members indicated that they were minded to progress this topic to review. However, they are advised to carefully consider both the information received today and that within the feasibility study and its associated annexes (Appendix 1 and Annexes A & B refer), in particular the analysis section at paragraphs 6 to 11 of the feasibility report before they make a decision on whether to progress this topic to review.
11. Should Members choose to proceed with the review then it is suggested that the work be undertaken by a small cross-party task group who would report back on a regular basis to the Health Overview & Scrutiny Committee. It is also suggested that the first meeting of the task group be dedicated to approving a workable remit and scope for the review in conjunction with the Scrutiny Officer and NHS North Yorkshire & York.

Corporate Strategy 2009/2010

12. The contents of this report and the focus of any review that might be undertaken are directly linked to the 'Healthy City' theme of the Corporate Strategy.

Implications

13. **Financial** – There are no known financial implications associated with the recommendations within this report however; should Members of the Committee choose to progress this topic to review implications may arise. There is a small amount of funding in the scrutiny budget to enable reviews to take place.
14. **Legal** – There are no known legal implications associated with the recommendations within this report however; should this topic be progressed to review implications may arise.
15. **Human Resources** – There are no known Human Resources implications associated with the recommendations within this report.
16. There are no known equalities, crime & disorder, information technology or property implications associated with the recommendations within this report.

Risk Management

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

Recommendations

18. Members of the Committee are advised to receive the update on the Universal Services Review from NHS North Yorkshire and decide, in light of this, whether they still wish to progress this topic to review.

Reason: To address the concerns raised within the topic registration form.

Contact Details

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Chief Officer Responsible for the report:

Andrew Docherty
Head of Civic, Legal & Democratic Services
01904 551004

Report Approved

Date 28.06.2010

Specialist Implications Officer(s) None

Wards Affected:

All

For further information please contact the author of the report

Background Papers:

Attached as Annexes

Annexes

Appendix 1 Feasibility Study dated 14th December 2010

Annex A Topic Registration Form

Annex B Comments from consultees



Health Overview & Scrutiny Committee

14th December 2010

Feasibility Report – Maternity Matters

Summary

1. At a meeting on 8 July 2009 Councillor Wiseman indicated that she was considering submitting a scrutiny topic on improving care for newborns and new mothers. Members of the Committee indicated that this was potentially a good topic to review and subsequently, in October 2009, Councillor Wiseman submitted a topic registration form. This is attached at Annex A to this report.

Criteria

2. Councillor Wiseman has identified the following criteria as being relevant to this topic:
 - Public Interest (i.e. in terms of both proposals being in the public interest and resident perceptions)
 - In keeping with Corporate Priorities
 - National/local/regional significance e.g. A central government priority area, concerns joint working arrangements at a local 'York' or wider regional context
3. Councillor Wiseman also made the following additional comments on the topic registration form in support of the eligibility criteria:
 - **Public Interest** – It is in the public interest that the care provided by Health Visitors for new mothers and their babies from birth to six months be as effective and complete as possible
 - **In keeping with Corporate Priorities** – This fits in with the 'Healthy City' theme of the recently refreshed Corporate Strategy – 'we want to be a city where residents enjoy long, healthy and independent lives. For this to happen we will make sure that people are supported to make healthier lifestyle choices and that health and social care services are quick to respond to those that need them.'
 - **National/local/regional significance** – The Department of Health is emphasising improvements to the care of mothers and their babies as shown by the recent paper 'Maternity Matters'. Also 'Facing the Future: A Review of the Role of Health Visitors'.

Consultation

4. The following persons were consulted as part of the feasibility process and comments received are set out at Annex B to this report:
 - Executive Member for Children's Services
 - Director of Learning, Culture & Children's Services
 - Representatives of NHS North Yorkshire & York
 - Representatives of York Hospitals Foundation Trust
 - York LINK (Local Involvement Network)

Options

5. Members are asked to consider the following options:

Option A Progress the topic to review

Option B Do not progress this topic to review

Option C Receive a presentation from NHS North Yorkshire & York on the work being undertaken in this area.

Analysis

6. Based on the evidence provided in Annex B to this report the Committee are not advised to proceed with this review. NHS North Yorkshire & York are undertaking a piece of work that will culminate in a revised universal services model for 0-19 year olds and this work will take into account how health visiting services are provided in York.
7. There would seem little point in the Health Overview & Scrutiny Committee duplicating the work of the Primary Care Trust (PCT) by undertaking a review at this stage. However, they may wish to receive a presentation from NHS North Yorkshire & York to find out more about the work they are undertaking on this subject. It is therefore recommended that the Committee choose Option C as set out in paragraph 5 of this report.
8. Should any review be undertaken it is recommended that the title be changed from 'Maternity Matters' to reflect the nature of the request for a review into the health visitor service, particular in relation to the service they offer to mothers and their babies from birth to six months.
9. Should Members choose to proceed with a review on this topic then a draft remit, scope and timetable will need to be produced. These should clearly define the aim and key objectives of the review. It is suggested that, should these be required, they be drafted at an informal meeting by a small cross-party task group and presented to a future meeting of the Health Overview & Scrutiny Committee for formal approval.

10. The topic registration form at Annex A suggests possible consultees and a time frame of 3 to 6 months to complete should the topic be progressed to review.
11. Members will also need to take into consideration commitments already in their work plan and decide where any review would be best placed.

Corporate Strategy 2009/2012

12. The contents of this report and the focus of any review that may be undertaken are directly linked to the 'Healthy City' theme of the Corporate Strategy.

Implications

13. **Financial** – There are no financial implications associated with the recommendations within this report however; should Members of the Committee choose to progress this topic to review implications may arise. There is a small amount of funding in the scrutiny budget to enable reviews to take place.
14. **Legal** – There are no known legal implications associated with the recommendations within this report however; should this topic be progressed to review implications may arise.
15. **Human Resources** – There are no known Human Resources implications associated with the recommendations within this report.
16. There are no known equalities, crime & disorder, information technology or property implications associated with the recommendations within this report.

Risk Management

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

Recommendations

18. Members of the Committee are advised to proceed with Option C and request that NHS North Yorkshire & York provide a presentation on the work they are undertaking in relation to this subject.

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

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

**Feasibility Study
Approved**



Date 01.12.2009

Specialist Implications Officer(s) None

Wards Affected:

All



For further information please contact the author of the report

Background Papers:

None

Annexes

Annex A Topic Registration Form
Annex B Comments from consultees



SCRUTINY TOPIC REGISTRATION FORM

PROPOSED TOPIC:

Study into whether the way Health Visitors in York work presently, allows them to offer a full and effective service to mothers and their babies from birth to six months

COUNCILLOR (S) REGISTERING THE TOPIC: Councillor S Wiseman

SECTION 1: ABOUT THE TOPIC

Please complete this section as thoroughly as you can. The information provided will help Scrutiny Officers and Scrutiny Members to assess the following key elements to the success of any scrutiny review:

How a review should best be undertaken given the subject

Who needs to be involved

What should be looked at

By when it should be achieved; and

Why we are doing it ?

Please describe how the proposed topic fits with 3 of the eligibility criteria attached.

As a general rule, topics will only proceed to review if they meet 3 of the criteria below. However, where it is adequately demonstrated that a topic is of significant public interest and fits with the first criteria but does not meet 3, Scrutiny Management Committee may still decide to allocate the topic for review. Please indicate which 3 criteria the review would meet and the relevant scrutiny roles:

	✓	Policy Development & Review	Service Improvement & Delivery	Accountability of Executive Decisions
Public Interest (ie. in terms of both proposals being in the public interest and resident perceptions)	✓		✓	
Under Performance / Service Dissatisfaction				
In keeping with corporate priorities	✓		✓	
Level of Risk				
Service Efficiency				
National/local/regional significance e.g. A central government priority area, concerns joint working arrangements at a local 'York' or wider regional context	✓		✓	

Public Interest: It is in the public interest that the care provided by Health Visitors for new mothers and their babies from birth to six months be as effective and complete as possible

In keeping with Corporate priorities: This fits in with the 'Healthy City' theme of the recently refreshed Corporate Strategy - 'we want to be a city where residents enjoy long, healthy and independent lives. For this to happen we will make sure that people are supported to make healthier lifestyle choices and that health and social care services are quick to respond to those that need them'

National/local/regional significance: The Dept of Health is emphasising improvements to the care of mothers and their babies as shown by the recent paper "Maternity Matters". Also "Facing the Future: a review of the role of Health Visitors".

Set out briefly the purpose of any scrutiny review of your proposed topic. What do you think it should achieve?

If you have not already done so above, please indicate in response to this, how any review would be in the public or Council's interest e.g. reviewing recycling options in the city would reduce the cost to the Council for landfill

This scrutiny review should aim to achieve:

- An understanding of both government and local initiatives in relation to post natal care (health and well-being of both mother and child (until the child reaches 6 months)
- Recommendations for an improved post natal service for all mothers and their new born children (to the age of 6 months)
- A better understanding amongst users/prospective users of the services available to them

It is in both the public and the Council's interest to offer a good service as this will, ultimately improve the standards of health and well being amongst new born children and their mothers.

Good quality care and access to relevant services when they are needed is necessary for healthy and thriving children.

Please explain briefly what you think any scrutiny review of your proposed topic should cover.

This information will be used to help prepare a remit for the review should Scrutiny Management Committee decide the topic meets the criteria e.g. How much recycling is presently being done and ways of increasing it

- History of both initiatives ('Delivering Healthy Ambitions' & 'Maternity Matters' and background on the services available in York
- Statistic evidence (how many use the service, what services are available, where they are available, how people find out about them)
- How many care centres offer post natal services in York (for both mother and child until 6 months of age)
- Raising awareness – if people are not using the services then why not. Are they aware of how to access them and what is available?
- Will health visitors be able to offer a complete/satisfactory service once the new 'maternity matters' initiative is introduced?
- Could any improvements be made to the service?

Please indicate which other Councils, partners or external services could, in your opinion, participate in the review, saying why.

Involving the right people throughout the process is crucial to any successful review e.g. CYC Commercial Services / other local councils who have reviewed best practice for recycling / other organisations who use recycled goods

Margaret Jackson- York Hospitals NHS Foundation Trust
 NHS North Yorkshire & York
 Relevant Officers at CYC/Children's Social Services
 Health visitors/nursing staff/midwives
 GP Practices (David Geddes)
 Maternity Services Liaison Committee (MSLC)
 LINKs
 Paediatric and SCBU staff York Hospitals NHS Foundation Trust
 Health Visitor management staff from NY&Y PCT
 Mothers

Explain briefly how, in your opinion, such a review might be most efficiently undertaken?

This is not about who might be involved (addressed above) but how the review might be conducted e.g. sending a questionnaire to each household to gather information on current recycling practices and gathering information on how recycling is carried out in Cities similar to York

1. Receive background information followed by;
2. Informal discussion day on key issues
3. From this may follow specific discussions with certain groups to discuss possibilities for tackling issues/concerns raised at the informal day
4. Leading to recommendations arising from the review

Estimate the timescale for completion.

Please circle below the nearest timescale group, in your estimation, based on the information you have given in this form.

- (a) 1-3 months;
- (b) **3-6 months**; or
- (c) 6-9 months

PLEASE ENCLOSE ANY SUPPORTING DOCUMENTS OR OTHER INFORMATION YOU FEEL MIGHT BE USEFUL BACKGROUND TO THE SUBMISSION OF THIS TOPIC FOR CONSIDERATION.

Useful documents for background material are:

'Delivering healthy Ambitions'

'Maternity Matters'

Children's National Service Framework

Child Health Promotion Programme (NSF 17 March 2008)

Facing the Future: a review of the role of the Health Visitor (DOH 2007)

Concerns regarding this service were raised at the MSLC meeting initially in the context of no longer having a Health Visitor attending the MSLC which, was feared might be a factor in a break in communication between HV's and other Maternity Service Staff as well as the Paediatric Department. The fact that HV's do not now come to the MSLC seems to be related to their new way of working.

It is important that we put a good service in place from the beginning as Maternity Matters is being introduced at the end of 2009. We need to avoid people slipping through the net and not getting the care and support they need. To date my understanding is that HV's proactively contact women 10 days after they give birth when they take over from the midwife. I am not sure what their schedule of visits is or what their criteria for assessing that a family is "in need" of regular visits. My impression is that this has changed, i.e. been reduced. I am uncertain how HV's interact with GP's.

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Maternity Matters – Proposed Scrutiny Topic Consultation Comments

1. Pete Dwyer – Director of Learning, Culture & Children’s Services

On reflection, it appears from the contents of the form that the topic proposed is looking more to the issues of whether the core health visiting service is meeting the needs of local families. The service has been changing with a more targeted approach - some would also challenge as to whether the level of Health Visitor provision is adequate and I am aware that NHS North Yorkshire & York are undertaking a review of the service and its level of resourcing.

I would defer to others, in particular Rachel Johns, as to whether a scrutiny debate at this stage would add value to those reflections. To be clear, whilst entitled ‘Maternity Matters’ the questions being asked do not pertain to the work of the midwifery service about which I am not aware of any concerns being raised.

2. Councillor Runciman – Executive Member for Children’s Services

The main focus of this topic seems to be on services provided by the PCT and the Acute Hospitals Trust. Although it could relate to provision for post natal care at our Children's Centres and some voluntary sector provision such as the ‘Treasure Chest’ groups, the main source of information should be in places other than CYC.

It could be a valuable topic and it would be interesting to see if there could be an effect on changing outcomes in the service, which is not controlled and managed by the council.

3. Margaret Jackson – Head of Midwifery Services – York Hospitals Foundation Trust

I agree with Pete Dwyer’s comments. In the light of the new policy document it seems appropriate to wait for the local response to this in relation to Health Visitor Services.

4. Gareth Whiles - Assistant Director Children, Maternity and Sexual Health - NHS North Yorkshire & York

Dated 03.11.2009

This is definitely an important area of work as good health visiting services are a vital part of a baby and child development. However there is work being undertaken locally that may affect whether this is the best time to carry out this study.

NHS North Yorkshire and York are beginning a piece of work that will culminate in a revised universal services model for 0-19 year olds that will be

in line with the Healthy Child Programmes for both 0-4 (released nationally in February 09) and 5 – 19 programme released last week. This work has 2 streams to it. The first is aimed at tackling key immediate major capacity concerns. By tackling these immediate issues it will allow time for the longer-term model to be developed and commissioned. This work will obviously take into account how Health Visiting services are provided in York

A workshop is being held later this week with Health Visitors to take the immediate work forward and make recommendations to the NHS North Yorkshire and York Integrated Commissioning Executive Committee (ICE)

The longer stream of work is starting its planning process and will be overseen by ICE but carried out through the PCT Children, Maternity and Sexual Health Commissioning Group with appropriate working group arrangements within this. The exact arrangements and project plans for this work are being finalised but will obviously need to take into account user, staff, and broader stakeholder views and requirements

Paul Murphy, CYC officer, is a member of the PCT Commissioning Group and both he, Gareth Whiles (Assistant Director at the PCT) and Jo Harding (General Manager- Children and Specialist Services North Yorkshire and York NHS Community and Mental Health Services) are members of City of York Integrated Commissioning Group that reports into the YorOk Board. Progress of this work will be fed through the ICG group

With this in mind it is felt that now may not be the appropriate time to undertake a study of this nature

5. York LINK

Members of the York LINK Steering Group think this is a feasible topic for scrutiny and fits with the eligibility criteria set out in the topic registration form.



Health Overview and Scrutiny Committee

7 July 2010

Report of the Director of Adults, Children & Education**Finance and Performance in Adult Social Services 2009/10 - Update****Summary**

1. This report provides the 2009/10 outturn 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 outturn position for Adult Social Services is an overspend of £1.7m on a total net budget of £45.0m.
3. Whilst the outturn is broadly in line with the forecast reported to members in February, there are still some significant variations that give cause for concern in relation to their impact on the 2010/11 budgets. Further increases in referrals demonstrates that the predicted change in demographics and resulting increase in demand for Adult Social Services continues to put pressure on budgets across the department.
4. The dramatic rise in demand for adult social care across the city is the prime driver for the overspend and an increasing number of assessments are being undertaken as a result of demographic pressures. The subsequent improved take-up of individual budgets and direct payments (increase of 27%) resulted in an overspend of £578k. Elsewhere in the service, further overspends have been caused by an increase in customers in Residential and Nursing placements (£298k), an increase in the needs of Community Support customers (£247k) and staffing issues within social care teams (£156k).
5. The rise in demand also impacted on the in-house services within the Service Delivery and Transformation area. The home care service delivered £520k of savings in year but this was below its £950k savings target leaving a shortfall of £430k. The age and condition of our Elderly Persons Homes required higher repairs and maintenance costs and with reduced income from lower occupancy levels this resulted in an overspend of £311k. A continuing increase in the number of warden call customers led to extra staffing costs of £131k to meet this demand. In year savings and reductions in use of agency staff (approx 50% lower than the previous

year) mitigated a significantly higher projected overspend in this service area.

6. Despite the pressures, £765k of savings were delivered across the department to mitigate the overspend including vacancy management measures and use of grants.
7. 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.
8. 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.

Performance – overview

9. Performance across the 7 adult social care indicators is good, with 5 improving and achieving 2009-10 targets. There are 3 LAA indicators, which represent the need to improve independent living in York. Two of these (NPI 130 & 135) have improved significantly and exceeded their 2009-10 targets, however the third indicator (NPI 141) has declined slightly. Key performance headlines are:
 - a. NPI 130: Social Care clients receiving Self Directed Support – all York's social care customers now have the option of self-directed support through their assessment process and can opt for the delivery of individual budgets through a number of routes. As a result, performance for 2009-10 increased to 14.4% (945 customers out of 6566) from 7.4% in 2008-09. (calculated for comparison as definition changed between 08/09 and 09/10). This exceeds the 2009-10 LAA target of 12.5%.
 - b. NPI 135: Carers receiving needs assessment or review – The council has continued to improve the numbers of carers it assesses and reviews, with 20% more carers receiving assessments last year. As a result, performance for 2009-10 improved to 24.6% (from 17.1% in 2008-09), exceeding both the 2009-10 and 2010-11 LAA target of 20.2% and 21.5% respectively. Adult Social Care Services have also streamlined the management processes and consolidated how their team works to place more emphasis on carers support by having dedicated carers support workers within the locality teams who can advise and support others as well as work with the carers directly. A new Self Assessment / Supported Questionnaire starting in July 2010 will actively support their involvement in the assessment process and may lead to further improvement on this indicator.

- c. NPI 141: Vulnerable people achieving independent living – Performance has fallen slightly from 70% to 69.4%, however this is still below the LAA target of 70% for 2009-10. This year the council will continue working with University of York St John to help provide clients with a stepping stone to independence, giving people who have recently left hospital or residential care the support they need to regain skills that have been lost through illness or injury, learn new skills and adapt to independent living. The reablement team will help customers improve their mobility, build stamina and practise their personal care, helping them to make the transition to living in their own homes.

Corporate Priorities

10. 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

11. There are no human resources, equalities, legal, crime & disorder, information technology, property or other implications associated with this report.

Risk Management

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

Recommendations

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

Author:	Chief Officer Responsible for the report:		
Authors: Debbie Mitchell Head of HASS Finance (01904) 554161	Pete Dwyer Director of Adults, Children & Education (01904) 554200		
	Report Approved	<input checked="" type="checkbox"/>	Date <i>Insert Date</i>
Specialist Implications Officer(s) <i>List information for all</i> <i>Implication ie Financial</i> <i>Implication ie Legal</i> <i>Name</i> <i>Name</i> <i>Title</i> <i>Title</i> <i>Tel No.</i> <i>Tel No.</i>			
Wards Affected: <i>List wards or tick box to indicate all</i>			All <input checked="" type="checkbox"/>
For further information please contact the author of the report			

Background Papers

Year end Financial and Performance Report for 2009/10, Executive 22nd June 2010

Annexes

None



Health Overview & Scrutiny Committee

7th July 2010

Report of the Head of Civic, Legal & Democratic Services

LINKs¹ Statutory Stakeholder Group

Summary

1. This report asks Members to note the contents of the draft terms of reference for the newly established York LINK Statutory Stakeholder Group (**Annex A** refers). It also asks Members to nominate two representatives to the group.

Background

2. LINKs are the independent, formally constituted bodies that have replaced Patient Forums, previously attached to all local NHS trusts. The York LINK has now been in operation since April 2008.
3. In order to provide a mechanism to facilitate involvement in the LINK for individuals from organisations whose responsibilities compromise them being a member of the LINK, a Statutory Stakeholder Group has been established. The overall aim of the group being to improve health and social care services within the City of York by working together in partnership. Further details are set out in the draft terms of reference attached at **Annex A** to this report.
4. It is envisaged that the group will meet at least quarterly and It is proposed that the group be comprised of the following:
 - i. Two representatives from York LINK Steering Group
 - ii. Two representatives from City of York Council Health Overview & Scrutiny Committee
 - iii. Two representatives from City of York Council Social Services
 - iv. Two representatives from York Hospitals NHS Foundation Trust
 - v. Two representatives from NHS North Yorkshire & York
 - vi. Two representatives from York Health Group
 - vii. One representative from the Yorkshire Ambulance Group

Consultation

5. The LINK has sent a copy of the draft terms of reference to all those invited to join the group. As of writing it is known that NHS North Yorkshire & York, the

¹ Local Involvement Networks

York Health Group and the York LINK Steering Group have confirmed who their representatives will be.

Options

6. Members are asked to note the contents of **Annex A**.
7. Members can also:
 - i. Choose for the Committee to be represented on this group
 - ii. Decline the offer for the Committee to be represented on this group

Analysis

8. Members are advised to nominate two representatives to the Statutory Stakeholder Group. It is suggested that for continuity, as membership of the Committee can change, one of these representatives be the Scrutiny Officer.
9. The current Vice-Chair of the Committee has expressed an interest in being the other nominee.

Corporate Strategy 2009/2012

10. This relates to the Healthy City theme of the Corporate Strategy 2009/2012.

Implications

11. There are no financial, human resources, equalities or other implications associated with this report.

Risk Management

12. If Members choose not to nominate to the Statutory Stakeholder Group there is a risk that the Overview & Scrutiny Committee will not have any input into this group.

Recommendations

13. Members are recommended to appoint the Scrutiny Officer and the current Vice-Chair of the Committee to the Statutory Stakeholder Group.

Reason: To give the Committee a voice on the group and to promote partnership working.

Contact Details

Author:

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Chief Officer Responsible for the report:

Andrew Docherty
Head of Civic, Democratic & Legal Services
Tel: 01904 551004

Report Approved

Date 23rd June 2010

Specialist Implications Officer(s) None

Wards Affected:

All

For further information please contact the author of the report

Background Papers:

None

Annexes

Annex A Draft Terms of Reference for York LINK Statutory Stakeholder Group

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Draft Terms of Reference for York LINK Statutory Stakeholder Group

Introduction

The purpose of York LINK statutory Stakeholder Group is to provide a mechanism to facilitate involvement in the LINK for individuals from organisations whose responsibilities compromise their membership of the LINK.

Mission Statement

To work together to improve health and social care services within the boundaries of the City of York Council

Aims

- To work in partnership with representatives from health and social care providers providing and commissioning services in York.
- To complement existing statutory engagement mechanisms.
- To develop processes to ensure that effective and ongoing two way communication routes are established between the LINK Steering Group and providers/commissioners of health and social care and health services across York.
- To develop mechanisms for engaging with and exchanging information with existing user/carer groups facilitated by statutory health and social care providers.

Objectives

- To contribute to the development and implementation of the work plan for York LINK
- To facilitate a Forum in which to channel discussion and action on LINK process and operational issues.
- To feed the user voice into the development of commissioning and the modernisation of services.
- To provide information for the LINK on quality assurance for the provision of services.
- To sign post and feed back to and from voluntary organisations

Membership

The Group members will include:

- Two representatives from York LINK Steering Group
- Two representatives from City of York Council Health OSC
- Two representatives from City of York Council Social services
- Two representatives from York Hospital NHS Foundation Trust
- Two representatives from NHS North Yorkshire & York
- Two representatives from York Health Group
- One representative from YAS

When a representative cannot attend a nominated deputy should attend instead. Representatives from organisations can also be co-opted to attend to present information or provide expert advice.

Chair

The Chair of York LINK will chair all meetings. In the absence of the Chair a Deputy Chair will be elected prior to commencement of business.

Quorum

For Statutory Stakeholder meetings to be quorate at least seven representatives (or their nominated deputies) must attend

Frequency of meetings

The Statutory Stakeholder Group will meet at least quarterly

Urgent matters arising between meetings

Any urgent matters arising between meetings will be handled by at least two nominated members.

Confidentiality

Every reasonable effort should be made to ensure confidentiality to allow a free flow of discussions between representatives.

Secretarial support and administration

Administration and secretarial support for all meetings will be provided by the York LINK office.

Review of Terms of Reference

These terms of Reference will be reviewed annually or sooner if required in light of national or local policy changes.

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0 – 19 Universal Services Review

Tara Cox

Head of Joint Commissioning and Partnerships





department for
children, schools and families



Department
of Health

Healthy lives, brighter futures

The strategy for children and young people's health

EXECUTIVE SUMMARY



A commitment from
The Children's Plan



North Yorkshire and York

Healthy lives, brighter futures

The strategy for children and young people's health

- A joint Strategy between DH & DCSF
- It is a long term Strategy to improve health outcomes for all children & young people
- It is a direct response of the views and concerns of young people, parents and professionals working with children and families
- It sets out how Local Authorities and PCT can work together across children's services to build the quality of support for families at key stages in their children's lives



Drivers for the review

- National Child Health Strategy
- Healthy Child Programmes



How we make it work in North Yorkshire and York

- Develop a countywide service specification for 0-19 universal services based around the Healthy Child Programmes.
- Build in local flexibility to enable providers to work with local users and stakeholders to agree on the model of delivery.



What we hope the review will do...

- Identify gaps in current commissioned services compared to HCP expectations
- Help shape the future service for North Yorkshire and York
- Focus on the professional roles within the HCP
- Help identify the expected outcomes and benefits of the approach



Where are we up to?

- Initiative within the 5 year Strategic plan and a key priority within the 2010/11 operational plan
- Project plan developed
- Engagement Plans
 - Phase 1 April/May Clinical
 - Phase 2 late May/June/July Wider stakeholders
- We aim to have the approach and service specification clearly outlined by end October 2010



Engagement Includes:

- Clinicians – GPs, HVs, SNs, Paediatricians, Midwives, Safeguarding leads
- Children's Trust Unit
- Children Centre Management and Health Groups
- Integrated Youth Support Leads
- Healthy Schools Groups
- Teenage pregnancy Groups
- CANDI
- York Youth Council



Next Steps

- Consolidate information gathered through engagement
- Develop draft service specification over summer
- Continue to discuss developments with current providers and stakeholders
- Produce a final version for October 2010



Have your say....

To contribute to the engagement of the 0-19 review and access more information please go to..

www.northyorkshireandyork.nhs.uk

