MEETING HEALTH OVERVIEW & SCRUTINY COMMITTEE

DATE 24 JANUARY 2011

PRESENT COUNCILLORS BOYCE (CHAIR), FRASER, KIRK,

SIMPSON-LAING AND WISEMAN (VICE-CHAIR)

IN ATTENDANCE RACHEL JOHNS – NHS NORTH YORKSHIRE AND

YORK

ANNIE THOMPSON - LINKS

JOHN BURGESS - MENTAL HEALTH FORUM

KAY GAMBLE - YORK HOSPITAL

HELEN MACKMAN – YORK HOSPITAL GOVERNOR DEE BUSH – YORK OLDER PEOPLE'S ASSEMBLY JOHN YATES – YORK OLDER PEOPLE'S ASSEMBLY

GEORGE WOOD - YORK OLDER PEOPLE'S

ASSEMBLY

MARK INMAN – YORKSHIRE AMBULANCE SERVICE

PHIL BAINBRIDGE - YORKSHIRE AMBULANCE

SERVICE

COUNCILLORS MOORE (AND MARGARET MOORE),

MORLEY, ORRELL, POTTER, RUNCIMAN AND

WAUDBY

APOLOGIES COUNCILLORS HOLVEY AND SUNDERLAND

48. 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 the standing interests detailed in the agenda no further interests were declared.

49. MINUTES

RESOLVED: That the minutes of the last meeting of the Committee

held on 21 December 2010 be approved and signed by the Chair as a correct record subject to the amendment of the third bullet point in Minute 35 (Report and Attendance of the Executive Member for Health and Adult Social Services) to read 'Lack of any consultation undertaken with the York Hospital Foundation Trust regarding the impact on hospital

discharges'.

50. PUBLIC PARTICIPATION

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

51. EXECUTIVE REFERRAL - JOINT STRATEGIC NEEDS ASSESSMENT

Members considered a report, which asked them to consider a referral made by the Executive via Scrutiny Management Committee (SMC) in relation to the Joint Strategic Needs Assessment (JSNA). All elected members had been invited to attend the meeting for consideration of this item.

The Interim Director of Public Health was in attendance and gave a presentation of the JSNA, a process to identify current and future health and wellbeing needs of the local population, which would produce priorities and targets to provide shared commissioning priorities (a copy of the full Assessment had been included as part of the online agenda). She stated that the JSNA confirmed that generally the health and well being of the residents of York remained very good in comparison with the rest of the country. However there were still inequalities in the determinants and outcomes of health for vulnerable groups and unhealthy lifestyles still impacted on a proportion of the population.

Members and Officers made a number of comments in relation to the presentation including:

- Confirmation received that the numbers drinking alcohol daily in the area was higher than the national average. Pointed out that recommended levels were developed in the context of one unit of wine being measured as one glass at a strength of 9% but many drinks now had a much greater % strength.
- Reported that physical activity levels were improving however this had been measured when free swimming had been available for the under 16's and over 60's age group.
- The changing attitudes of parents in relation to obesity.
- Clarification required of the figure of 36,000 reported people each year who will suffer from or may experience some mental health issues.
- Numbers of people living with dementia and those that went undiagnosed.
- Need to provide the right level of support and care for dementia suffers. Confirmation that this was part of the ongoing commissioning dialogue.
- Statistics for deprivation and reference to hidden pockets and to the isolation that could result if these people were overlooked
- Impact of government cuts in benefits and public sector jobs with subsequent pressure on incomes and reductions in disposable income. Questioned whether an assessment had been undertaken of the impact this was likely to have. Confirmation that the JSNA only referred to a point in time and therefore no assessment had been undertaken.

- The aim to ensure that no child lived in poverty, questioned whether any mapping had been undertaken to ensure the targeting of services.
- Confirmation from the Executive Member for Children and Young People's Services that the authority together with multi agency teams were aware of these areas of poverty and were concentrating their efforts on families rather than individuals which would continue.
- Continued concerns regarding resident's access to dentists.
- As from 1 April 2011 the Care Quality Commission would also cover dentists - reference to York LINks open session on 27 January in relation to dental issues and the availability of an online survey.

Members questioned the way forward as a number of issues contained within the Joint Strategic Needs Assessment fell into the remit of a number of different scrutiny committees with some issues appearing to require more in depth analysis. The Scrutiny Officer reminded members that SMC had acknowledged this fact when they had suggested that an invitation be extended to all elected members to attend for consideration of this report to enable them to question any issues of concern.

The Interim Director of Public Health confirmed that she could arrange for the assessment recommendations to be broken down into scrutiny areas, if required and following further discussion it was

RESOLVED: That the Scrutiny Management Committee

recommend that each scrutiny committee add to their work plans for the new municipal year, the relevant issues from the JSNA that fell within each Committee's

remit. 1.

REASON: To address the Executive referral in relation to the

Joint Strategic Needs Assessment.

Action Required

1. Refer recommendation to SMC.

TW

52. WHITE PAPER 'HEALTHY LIVES, HEALTHY PEOPLE' CONSULTATION

The Committee received a presentation from the Interim Director of Public Health in which she summarised the key points of the recently published White Paper 'Healthy Lives, Healthy People' on public health and supplementary guidance on commissioning and outcomes. She explained how the new system for public health in England would operate with the government's philosophy for health improvement and health protection. She confirmed that the Health and Social Care Bill had been introduced to Parliament on 26 January 2011.

Members questioned a number of points in relation to the presentation and highlighted some of their concerns for the future proposals for public health:

- Confirmation that public consultation would run until March allowing the Committee to feed into the corporate response.
- The 'Giving every child the best start in life' reference, concern that changes in benefits etc would have a knock on effect on families.
- Concerns regarding the proposal of 'working collaboratively with business and the voluntary sector'. Certain members felt that this was a finance issue rather than a holistic approach.
- Reductions in funding from the PCT for the voluntary sector eg services for young people may result in further pressure on local authorities.
- Conflict with other government policies coming through required joined up thinking to alleviate any problems.
- Regional overview of GP providers required.
- Accountability concerns and responsibility to hold the commissioners to account.
- Concerns that consortia may have differing outcomes in each area.
- Importance of the Health and Wellbeing Board and Scrutiny arrangements in scrutinising the provision of services and the providers.

Following further discussion the Chair thanked the Interim Director for her informative presentation and it was

RESOLVED:

That the following issues be recommended for inclusion in the Council's corporate response to Public Health England at the Department of Health on the White Paper:

- Felt that the intentions of the Health and Wellbeing Board were correct but the Committee would like the opportunity to examine its workings in more detail at a later date.
- Committee welcomed the clarity around accountability but required more detail when further information became available
- All public health funding would require scrutiny.
- Consistency required in each area and how local commissioners would be held to account
- If there was disagreement who would arbitrate and how would any conflict be managed.

REASON:

In order that the Committee's response to the governments White Paper can be included in the City of York corporate response.

Action Required

1. Ensure item included on the work plan.

53. CHILDREN'S CARDIAC SURGERY SERVICES - NATIONAL REVIEW

Consideration was given to a report, which sought the Committee's view on the potential significance of any proposals/recommendations arising from the national review of Children's Cardiac Services. Further information had been presented at Annexes A, B and C with the online agenda.

The Scrutiny Officer confirmed that the proposal was to reduce the number of centres, which delivered congenital heart services with the final review document being due for publication in February. It was reported that currently Leeds Teaching Hospitals NHS Trust was the only provider of these services in the Yorkshire and Humber region. Reference was made to the regulations, which allowed two or more local authorities to appoint joint committees to exercise the scrutiny function to consider any substantial service variation or development. Members were therefore advised to take part in any joint scrutiny that may be undertaken in order that their views could be heard.

Members confirmed their wish to take part in any regional joint scrutiny of this important service. As this was presently provided in a centre of excellence in Leeds any substantial changes in service would have an impact in York.

RESOLVED:

- i) That the Committee confirm with the consultees that they would wish to take part in any regional joint scrutiny that may take place in relation to Children's Cardiac Surgery services.
- ii) That Councillors Fraser and Wiseman be nominated to represent the City of York Council on any regional joint health committee that should subsequently be arranged. 1.

REASON:

In order that the Committee's voice is heard in relation to the national consultation on Children's Cardiac Surgery.

Action Required

1. Confirm wish to take part in any future joint scrutiny together with details of nominated representatives.

TW

54. CARER'S REVIEW - INTERIM REPORT

The Committee considered the Carer's Review interim report which set out work to date undertaken by the Carer's Task Group.

The Scrutiny Officer reported on the recent public event and the number of carer and care workers questionnaires which had been returned to further inform the Task Groups work.

Certain members referred to the planned changes in the way in which home care services were delivered. They stated that it was important that any changes to the service did not have a detrimental affect on carers and that an examination should be made of the impact of any changes. Officers confirmed that they were unaware of the details of the changes to services but it was confirmed that the scope of this review did not include an examination of paid professional carers.

RESOLVED: That the contents of the interim report and work

undertaken to date on the Carer's Review by the Task

Group be received and noted.

REASON: To progress this review.

55. YORKSHIRE AMBULANCE SERVICE PRIORITY INDICATORS FOR QUALITY ACCOUNTS

Members considered a report which asked them to rate the potential indicators that they believed should appear in the Yorkshire Ambulance Service's (YAS) Quality Accounts. As a framework for discussion YAS had selected a number of different indicators to report in their Quality accounts based on the judgement of what would be most valuable to patients, partners and stakeholders.

It was reported that the Committee Chair had completed (in draft) the document, attached as Annex A to the report, and members were asked to approve and/or make any amendments they felt appropriate.

Member questioned representatives of the Yorkshire Ambulance Service, who were in attendance at the meeting, on the suggested ratings given for each potential indicator. The YAS representatives confirmed that the maintenance of the 8 minutes standard was still a key measure and that the Committee's suggested indicators for inclusion would be useful to rate the quality of care delivered by the service.

RESOLVED: That the suggested ratings for the potential indicators

to be included in the next issue of the Quality Accounts be agreed, noted and forwarded to YAS for

consideration.

REASON: To make Yorkshire Ambulance Service aware of the

Committee's views in relation to the service.

Action Required

1. Forward suggested ratings to YAS.

TW

56. WORK PLAN

Consideration was given to the Committee's work plan for 2010/11 which set out suggested changes in italics.

The LINks representative referred to a report on dental issues they were preparing for the Care Quality Commission. The report was due for completion at the end of February and she confirmed that this could be brought to the Committee for their information.

RESOLVED: That the updated work plan be approved and noted

subject to the addition of the LINks dental report together with the update on dental services in York from NHS North Yorkshire and York being added to

the 6 July 2011 (provisional) meeting. 1.

REASON: In order to progress the work of the Committee.

Action Required

1. Updates Committee's work plan.

TW

CLLR B BOYCE, Chair

[The meeting started at 5.00 pm and finished at 7.15 pm].