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MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	20 FEBRUARY 2012
PRESENT	COUNCILLORS FUNNELL (CHAIR), BOYCE, CUTHBERTSON, DOUGHTY (VICE-CHAIR), FITZPATRICK, HODGSON AND RICHARDSON
IN ATTENDANCE	COUNCILLORS JEFFRIES AND SIMPSON LAING,  MEMBERS, CHIEF OFFICERS, REPRESENTATIVES AND VOLUNTEERS FOR YORK BLIND AND PARTIALLY SIGHTED SOCIETY (YBPSS),  ROY RUDDICK (ROYAL NATIONAL INSTITUTE FOR THE BLIND (RNIB),  JOHN YATES AND GEORGE WOOD (YORK OLDER PEOPLE'S ASSEMBLY (YOPA) )  ADAM GRAY AND PAUL MURPHY (CYC)  JENNY MORTON, GEMMA CUSS, SARAH ANDERSON AND ALAN ROSE (YORK TEACHING HOSPITAL NHS FOUNDATION TRUST)  SUE METCALFE AND JUDITH KNAPTON (NHS NORTH YORKSHIRE AND YORK)  JOHN BURGESS (YORK MENTAL HEALTH FORUM)

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#### **44. DECLARATIONS OF INTEREST**

Members were invited to declare at this point any personal or prejudicial interests, other than those listed on the standing declarations of interests attached to the agenda, that they might have had in the business on the agenda.

Councillor Boyce requested that her personal interest of her mother being in receipt of care services, be removed from the listed standing declarations of interest.

Councillor Cuthbertson declared a personal non prejudicial interest in the general remit of the Committee as a user of services in the audiology service at York Hospital.

No other interests were declared.

#### **45. MINUTES**

RESOLVED: That the minutes of the meetings of the Health Overview and Scrutiny held on 14 December 2011 and 18 January 2012 be approved and signed by the Chair as a correct record.

#### **46. PUBLIC PARTICIPATION**

It was reported that there had been eight registrations to speak under the Council's Public Participation Scheme. All of the speakers spoke on Agenda Item 5 (Voluntary Sector Funding).

The Chief Officer of York Blind and Partially Sighted Society (YBPSS) spoke about the proposed cut in funds to their service from NHS North Yorkshire and York. She circulated 26 letters against the cut in funding from all those involved with YBPSS. She raised concerns that the cut in funding of voluntary services was being carried out at a time of increasing need, and felt that important services would be closed without proper consultation. She stated that York had excellent sight services and that this was partly due to working jointly with the NHS over the years to develop these. She felt it would be very detrimental to users if the services were to end.

The Volunteer Manager for YBPSS spoke about the organisation's Home Visiting Service and how their role would be affected by the cut in funding. She spoke about the sharing of expertise from specialists to volunteers in order to provide greater level of care and support to users of the YBPSS's services that would be lost due to the withdrawal of funding.

A Member and Volunteer from YBPSS told Members that she felt that nurses would not have sufficient time to deal with blind and partially sighted patients, and that this could lead to an increase in levels of depression and entries into care homes. She felt that the loss of services would mean that blind and partially sighted people would not be able to maintain their independence, as they currently do, with the support of these services.

A Consultant Ophthalmologist from York Hospital spoke about her concerns at the withdrawal of funding for an Eye Clinic Liaison Officer (ECLO). She outlined the role of the ECLO, who provided immediate advice for recently diagnosed patients. She added that the ECLO could identify other problems that those from a clinical side might not do such as if the patient had fallen or felt that they were losing their independence.

The Chair of the YBPSS spoke about NHS North Yorkshire and York's own five year strategy plan, and referred to its aim to work closely with partners to create seamless care and recognise the role of the voluntary sector in developing services. He felt that by the removal of funding, NHS North Yorkshire and York had abdicated its responsibility towards patients. Further to this, he felt that if they could show a decline in the use of the services that they funded, then this could give them some justification for the withdrawal of funding.

A representative from the Royal National Institute for the Blind (RNIB) spoke about the ECLO who was situated outside of clinical care. He felt that NHS North Yorkshire and York wanted to demarcate this instead of allowing for partnership working.

A Governor of York Teaching Hospital spoke about how the excellent sight services at the hospital had helped him to recover his sight. He questioned the reason that had been given (services were duplicated elsewhere) by NHS North Yorkshire and York for withdrawal of funds to the YBPSS. He felt that the YBPSS fitted perfectly into the new local health partnerships

model, and that daily pressures always existed at the hospital in dealing with patients with sight problems. However the hospital could not afford to lose the supporting role that YBPSS played. .

A teacher of Visually Impaired Children spoke about how the funding changes would affect children with visual impairments. He stated that visual impairment was rare in children, but that most were in mainstream education. However, support for teachers and visually impaired children needed to be properly resourced and that this would not be as effective without the role of an ECLO, or the equipment base in York.

Following the last public speaker, the Chair of YBPSS requested that his gratitude to all those who had spoken under Public Participation, be noted in the minutes.

#### **47. LOCAL HEALTHWATCH YORK: PROGRESS UPDATE**

Members received a report which updated them on the progress from LINKs (Local Involvement Networks) to Local HealthWatch by April 2013.

Some Members raised concerns about management costs in the new organisation and highlighted that it was important for the contract tendering process to be highly transparent.

RESOLVED: That the report and latest progress towards establishing HealthWatch be noted.

REASON: To oversee the transition from LINKs to HealthWatch is identified as a priority in the Health Overview and Scrutiny Work Plan.

#### **48. VOLUNTARY SECTOR FUNDING**

Members received a report which apprised them of the response that had been received from NHS North Yorkshire and York, following a letter sent to them in relation to Voluntary Sector Funding by the Chair of the Committee.

The Deputy Chief Executive and Head of Commissioning (Adult and Community Services) of NHS North Yorkshire and York attended the meeting and responded to concerns raised by the

public speakers. They informed the Committee of a number of points including;

- That 134 voluntary sector services had been reviewed in total, and that of 80 of those reviewed in 2011, the York Blind and Partially Sighted Society (YBPSS) was only one of a number of services where it was decided to discontinue or cut funding.
- That they felt that the contractual issues of giving notice of an appeal process had been followed correctly, in that appeals from organisations affected had taken place before and after Christmas 2011.
- That due to the strength of feeling, that YBPSS was given an extended notice period until June 2012.
- That the control of budgets for the commissioning of services would transfer from NHS North Yorkshire and York into the Vale of York GP Clinical Commissioning Group, and so YBPSS could submit a revised business case for this group to review
- That £3 million extra funding had been provided to supply Lucentis to treat blind and partially sighted patients

The Chief Executive of York Council for Voluntary Service (CVS) spoke about the withdrawal of funding from the York Women's Counselling Service. She felt that the appeal process to re-examine the cut in funding for the organisation was not clear and highlighted that the cost to run the service was inexpensive. She also said that the service was regularly used by GPs to refer patients.

The Chairman of York Teaching Hospital NHS Foundation Trust admitted that the process used in identifying services had not been the most suitable, and that services had not been looked at holistically, in terms of Ophthalmology.

Questions from Members to the Deputy Chief Executive and Head of Commissioning (Adult and Community Services) included;

- If savings more than 4% were achieved through the review of voluntary organisation funding were re-invested, which organisations would have priority for additional funds?
- The reasons for withdrawal of funding from YBPSS and York Women's Counselling Service.

- What would happen if the Vale of York Clinical Commissioning Group (VOYCCG) reinstated funding for YBPSS

Members were informed that if savings above 4% were achieved, that dementia and carer services would most likely receive increased funding as it was felt that these services had been under resourced to date.

In response to a question about the possible reinstatement of funding to voluntary organisations, such as YBPSS, when budgetary control was handed over to VOYCCG; it was reported that the VOYCCG would revisit the organisation's business case, but would be expecting broader levels of partnership working.

Some Members felt that consultation between NHS North Yorkshire and York and the voluntary organisations that had been identified for funding cuts had not been transparent. They also asked if the findings of the review would be transferred over to the new Vale of York Clinical Commissioning Group.

The Deputy Chief Executive responded that NHS North Yorkshire and York Board Reports were made available to the public, and members of the public had often attended these meetings.

Some Members stated that there was a growing demand for the use of services provided by voluntary organisations, but that they understood that public money needed to be used in an efficient manner. They felt that this could only be done by NHS North Yorkshire and York and voluntary organisations working in partnership.

#### **49. YORKSHIRE AMBULANCE SERVICE PRIORITY INDICATORS FOR QUALITY ACCOUNTS**

Members considered a report which asked them to rate the indicators that they believed should appear in Yorkshire Ambulance Service's (YAS) Quality Accounts for 2012/13.

Representatives from YAS attended the meeting and they thanked Members of the Committee for their feedback.

Some Members raised a number of concerns about the Patient Transport Service such as;

- The standard of the vehicles.
- That a checking system for equipment on the vehicles did not appear to be taking place.
- That on occasions drivers were not provided with patient notes before they transported them.

Members were informed that patient transport drivers were trained explicitly in road and patient safety, but that if vehicles were unroadworthy, patients must not hesitate to report this.

Some Members felt that there were things that needed to be included in the YAS's Quality Accounts, which could not necessarily be quantified. It was also felt that it would be useful for the Committee to look at the Quality Accounts for the City of York area, as the YAS covered a wide area.

The representatives from the YAS, stated that if the Committee wished to receive an update, that they would bring along their colleagues in the Patient Transport Service to a future meeting.

RESOLVED:       (i)   That the report be noted.

                         (ii)   That the ratings and comments set out in Annex 1 of the report be agreed.

REASON:               To make the Yorkshire Ambulance Service aware of the Committee's views.

## **50.   WORK PLAN**

Members considered a report which presented them with the Committee's work plan for 2012.

The Chair expressed her wish for an update report on HealthWatch to be a standing item on the work plan.

Some Members also suggested that an item be added on ways of mitigating possible risks that could happen in the transfer of services from the Primary Care Trust to Clinical Commissioning Groups.

- RESOLVED:
- (i) That the report be noted.
  - (ii) That the following items be received by the Committee at their May meeting;
    - A briefing and presentation on NHS 111 Service.
    - A further Health Watch Procurement Monitoring Report.
    - A report on the Joint Strategic Needs Assessment (JSNA).
    - A report on Public Health Provision
    - A report on the Committee's End of Life Care Review (Use of DNACPR forms).

REASON: To keep the Committee's work plan up to date.<sup>1</sup>

Action Required

1. To update the Committee's Work Plan.

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Councillor C Funnell, Chair

[The meeting started at 4.30 pm and finished at 6.35 pm].