

Meeting	Health, Housing and Adult Social Care Policy and Scrutiny Committee
Date	20 June 2018
Present	Councillors Doughty (Chair), Cullwick (Vice-Chair), Flinders, Richardson, K Taylor, Warters and Hunter (as a substitute for Cllr Cuthbertson)
Apologies	Councillor Cuthbertson

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## 1. **Declarations of Interest**

Members were asked to declare, at this point in the meeting, any personal interests not included on the Register of Interests, or any prejudicial or disclosable pecuniary interests they may have in respect of the business on the agenda.

Councillor Cullwick declared a personal non prejudicial interest in agenda item 4 (Attendance of Executive Member for Housing and Safer Neighbourhoods) as he managed a small number of Houses in Multiple Occupation (HMOs) and HMOs were mentioned in the report.

Councillor Kallum Taylor declared a personal non prejudicial interest in agenda item 7 (Unity Health Report on Patient Communication Problems) as he was registered as a patient with Unity Health himself.

Councillor Richardson declared a personal non prejudicial interest in agenda item 6 (CCG Report on Patient Transport Services for York) as the council's appointed representative on York Wheels.

## 2. **Minutes**

Resolved: That the minutes of the last meeting of the Health, Housing and Adult Social Care Policy and Scrutiny Committee held on 23 May 2018 be approved and then signed by the Chair as a correct record.

### **3. Public Participation**

It was reported that there had been three registrations to speak at the meeting under the Council's Public Participation Scheme, two in relation to item 7 (Unity Health Report on Patient Communication Problems) and one on in relation to item 9 (Scoping Report on Commissioned Substance Misuse). The Chair advised that he had agreed with speakers that they would be heard under the relevant items on the agenda.

### **4. Attendance of Executive Member for Housing and Safer Neighbourhoods**

The Executive Member for Housing and Safer Neighbourhoods was in attendance to discuss priorities and challenges for the forthcoming year, along with the Assistant Director for Housing and Community Safety. They responded to particular issues raised by Members during discussion and provided additional information as requested on specific issues including:

- Regeneration plans were currently focused around council estates but acknowledged potential for future opportunities for this to kick start regeneration in areas around council estates.
- A report on the creation of a housing development company would be considered by the Executive in July which would explore different models and affordability of delivery with an emphasis on social value rather than profit.
- The council was looking to increase money from HRA funding to invest in new housing
- Building maintenance – there had been large improvements in energy efficiency of buildings
- HMO licensing – rolling programme of inspections to take place from October – two additional members of staff employed
- Homelessness – additional resources had provided specialist support in hospitals to support those with mental health issues.

Officers acknowledged a request for the following:

- For representatives from neighbourhood policing teams to attend a future meeting to provide an update on how neighbourhood policing was working in York
- Further information in relation to performance figures to enable Members to be able to compare figures to previous years and against other providers, which is not currently easy to do from a table of figures.

- further information on energy efficiency measures in building maintenance, in order that Members can determine how much this is saving the council

Resolved: That the update by the Executive Member for Housing & Safer Neighbourhoods be noted.

Reason: To update the committee on the Executive Member's priorities and challenges for the forthcoming year.

## **5. Business Case for New Mental Health Hospital for York**

Members considered a report which provided them with an update on progress made and key milestones in respect of developing the new mental health hospital for York and Selby.

The Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust's Strategic Project Manager, Director of Operations for York and Selby and Deputy Medical Director for York and Selby, were in attendance at the meeting to present the report.

Members acknowledged that the business case had been delayed as assurances had been needed with regard to the quality of design and cost and to ensure it was fit for purpose. This had been a rigorous process which had taken time and this had impacted on timescales and the revised operational date was now April 2020.

The Chair thanked NHS representatives for keeping Members informed on progress and commended them on providing the opportunity for the public, service users and carers to provide feedback on the build and in relation to the work with Ward Councillors in the process. They noted that the site was cleared and although there was no definite date for commencement of work on site, there was a possibility that it would start at the end of July.

Resolved: That the update briefing be noted.

Reason: To inform Members on the progress made with regard to developing the new mental health hospital.

## **6. CCG report on Patient Transport Services for York**

Members received a report which provided information on the mobilisation and implementation of a new specification for patient transport services, now known as Medical Non-Emergency Transport

(MNET), across NHS Vale of York and NHS Scarborough & Ryedale Clinical Commissioning Groups (CCGs).

The Head of Transformation and Delivery at Vale of York Clinical Commissioning Group (CCG) provided a verbal update to Members and responded to questions raised in relation to

- the eligibility criteria for patient transport services under the new specification, including how appeal process would work
- informing users of changes to system – all regular users of the current service had been made aware of changes and work was underway with staff of specialist units so they could inform patients as well.
- the process for booking transport – training was being provided to staff in preparation for changes
- support offered by Healthwatch in the design of patient information leaflets
- monitoring of the new service – this would be monitored by and the Trust and Yorkshire Ambulance Service who would meet regularly to ensure quality of service for patients

Resolved: That the report, and Members comments in relation to the new specification for patient transport services, be noted.

Reason: To inform Members of the new specification for patient transport services.

## **7. Unity Health Report on patient communication problems**

Members considered a report from Unity Health which provided a response in relation to the difficulties which had been experienced by patients in contacting Unity Health. As previously agreed by the chair, the two speakers, registered under the Council's Public Participation Scheme, addressed the committee at this point in the meeting.

Michael Urquhart, a patient of Unity Health, spoke to explain the problems he had encountered in trying to make appointments at the practice since the new surgery had opened. He expressed the view that a 4-5 page online appointment form was too onerous, especially for older people and then meant a delay in getting an appointment confirmed. He also spoke about the problems with the telephone line which had kept callers in a queue for a long period of time and then disconnected them without speaking to anybody. He advised that

having failed to make an appointment by phone, he had visited the surgery but had been told her could not do this in person and would be contacted by email.

Councillor Mark Warters spoke to advise the committee that he had been contacted by a resident who was a patient of Unity Health and had been asked to read out a statement on her behalf which provided an account of her experiences with Unity Health in relation to medical treatment received by her late husband. The scrutiny officer clarified that officers had offered him procedural advice that, in line with the council's procedure rules on public participation, the statement should not be read out at the meeting as it disclosed confidential or exempt information including personal information, and that he and the resident had been offered advice on the best route for getting her complaint dealt with.

Representatives from Unity Health and the CCG were in attendance at the meeting. They summarised the problems which the practice had experienced and how Unity Health had responded to them.

During discussion Members considered the following issues

- How the ongoing problems had been communicated to patients
- How the problems with the new system had been handled
- Whether sufficient resources had been in place to deal with new system and sufficient staff to take calls
- The online booking system and whether this was potentially discriminatory to certain groups of the population including older people
- Whether there had been unprecedented levels of demand at the practice

Representatives from Unity Health and the CCG acknowledged that:

- there was recognition that there had not been enough staff to take calls - 2 full time call handlers had now been employed to work alongside practice staff to answer phones.
- they had been slow to communicate problems to patients – they advised that all patients had now been contacted to advise them of the situation – as some members of the audience expressed concern that this was not the case, they agreed to check that all patients had been contacted
- the triage system was a part of NHS policy – this may be reinstated but only alongside fit for purpose telephone system.

- the online booking method would not be primary method for getting in contact with surgery
- The surgery was open until 8pm on Mondays to Thursdays and also open on Saturday mornings to deal with demand from patients.
- with new university students due to arrive soon to start the new academic year in September, they would partner up with Gillygate practice who would take new registrations.

The representatives from Unity Health expressed their sincere apologies to those patients who had suffered as a result of the problems experienced at the practice and assured them that the issues were now being dealt with. They assured Members that they intended to learn from the problems to put them in a better position to serve patients from now on. They offered to provide an update on progress to the committee in a few months time. Representatives of the CCG agreed to take away what they had learnt from the failure of the telephone system and share this with other practices to ensure it didn't happen elsewhere.

Members thanked representatives from Unity Health and the CCG for attending the meeting and being open and honest. They expressed confidence that the measures being put in place at Unity Health would enable them to turn the situation around in a short period of time and agreed that a further update to the committee in 3 months time would be appropriate.

The Director of Public Health acknowledged that the focus of discussion at the meeting had been around Unity Health but noted that the problems they were experiencing had exposed some wider issues and shown that, with two universities and colleges and around 30,000 students in York, there was increasing pressure on the wider health system. She explained that this was an opportunity to look at the bigger picture and the broader impact this was having on the city.

Resolved:

- (i) That the update from Unity Health and the CCG be noted.
- (ii) That a further update be provided to the committee in 3 months time.
- (iii) That officers investigate options for examining pressures on wider health system in York and report back to the committee.

Reason: To ensure the needs of patients in York are being fully met

## **8. Report on Sexual Health Re-Procurement**

Members were asked to consider a report and provide their comments on recommendations which would be presented to the Executive who would be asked to give their authorisation to approach the market for the tendering of sexual health and contraception services, and to receive approval that the decision to award the contract be delegated to the Director of Public Health.

CYC's Public Health Specialist Practitioner Advanced presented the report to Members and the Director of Public Health was also in attendance. They responded to questions from Members in relation to the following issues:

- The risk attached to procurement due to the budget being quite small – the council was working with partners to acknowledge shared responsibility. Need to be aware of financial challenges over time of contract and respond if needed
- Preference was to have a local service, but fall-back position of North Yorkshire approach if needed. Every possible measure would be put in place to ensure a high quality service is provided.
- With regard to safe practices, unlicensed establishments were where greatest risk lied as the same safeguards were not in place – outreach work would target those under the radar to ensure safe practices.

Members acknowledged the risks which had been highlighted by officers in connection with the procurement of the service but expressed their support for option 2, to support the recommendations to Executive to approach the market to re-procure sexual health services for York through competitive tender.

Resolved: That the report be noted and that Scrutiny Members' comments on the Executive recommendations on sexual health procurement, and their support for option 2, be taken into consideration.

Reason: In order that Scrutiny Members have the opportunity to comment in advance of the decision being taken by Executive.

## **9. Scoping report on Commissioned Substance Misuse**

Members considered a report which provided information on commissioned substance misuse services in York to help support and inform their discussion on the subject to enable them to decide whether it was a suitable topic for a scrutiny task group investigation.

CYC's Public Health Specialist Practitioner Advanced and the Director of Public Health were in attendance to answer any questions.

Councillor Pavlovic, who had submitted the topic request for review, spoke and thanked officers for the preparation of the report and stressed the need to understand the reasons behind some of the worrying statistics and expressed the view that it was suitable topic for in-depth analysis.

Members expressed their support for the topic but noted the need to be specific with regard to the terms of reference for a review. It was agreed that a task group of 3-4 members be established to undertake a review and that Councillor Pavlovic be included as a co-opted member of the task group. It was agreed that Councillor Richardson be another member of the task group and that other groups would nominate a suitable member for the task group by email.

Resolved (i) That a review of Commissioned Substance Misuse Services in York be agreed as a suitable topic for scrutiny review.

(ii) That a task group comprising 3-4 members be established to conduct the review, to include councillor Richardson, and Councillor Pavlovic as a co-opted Member of the task group, with other Members to be confirmed.

Reason: To support the scrutiny review into Commissioned Substance Misuse Services.



## **10. Work Plan 2018-19**

Members considered the committee's work plan for the 2018-19 municipal year.

It was agreed that a further update from Unity Health should be scheduled for the 11 September 2018 meeting.

With regard to the request for an update on neighbourhood policing in York, it was confirmed that community safety did fall within the remit of this committee following the decision to align scrutiny committee with directorates and it was agreed that the Police and Crime Commissioner, or an appropriate member of neighbourhood policing team, be invited to a future meeting of the committee.

Resolved: That the work plan be approved subject to the amendments above.

Reason: To ensure that the committee has a planned programme of work in place.

Councillor P Doughty, Chair

[The meeting started at 5.30 pm and finished at 8.40 pm].

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