City of York Council	Committee Minutes
Meeting	Health and Adult Social Care Policy and Scrutiny Committee
Date	13 April 2021
Present	Councillors Doughty (Chair), Cullwick (Vice-Chair), Hook, Heaton, Waudby, K Taylor and Lomas (Substitute for Cllr Perrett)
Apologies	Councillor Perrett

13. Declarations of Interest

Members were asked to declare, at this point in the meeting any personal interest not included on the Register of Interests or any prejudicial or discloseable pecuniary interests that they might have in respect of the business of the agenda. None were declared.

14. Minutes

Resolved: That the minutes of the previous meeting held on 6 February 2021 be approved as a correct record and signed by the Chair at a later date.

15. Public Participation

It was reported that there had been two registrations to speak under the Council's Public Participation Scheme.

Gwen Vardigans spoke on Agenda Item 4, Transfer of A&E services to Vocare. She spoke on behalf of York and Scarborough defend our NHS, explaining a number of reasons why they opposed the plans for Vocare Ltd to take over the minor injuries section of York's A&E department. She stated that across the NHS there were several different models of Urgent Treatment Centres (UTC's) that had successfully adapted to changes without the involvement of a private company.

Dr Crane, a consultant at York Hospital, raised a number of concerns regarding the recent decision by York Hospital Trust to allow Vocare (a wholly private, for-profit organisation) to extend its role in the management of patients presenting with

urgent care needs to York Hospital's A&E department. He explained why front line staff working in the area of minor injuries were opposed and concerned to this plan. He stated that Nimbuscare represented local York NHS GPs and he hoped that they and other commissioners would work collaboratively to provide a fully compliant UTC and primary care out of hours service in York which was both NHS delivered and NHS provided.

The Chair thanked the speakers for their comments.

16. Transfer of A&E services to Vocare

Members considered a report that updated them on York's Teaching Hospital NHS Foundation Trust (YTHFT) Urgent Treatment Centre (UTC) and the suggestion that there was possibility of privatisation of York hospital's A&E minor injuries unit to Vocare.

The Accountable Officer, NHS Vale of York Clinical Commissioning Group (CCG) and the Director for Primary Care, NHS Vale of York Clinical Commissioning Group (CCG) were in attendance to provide an update and answer any questions.

The Director for Primary Care made reference to the comments raised by the public participants and she stated that the CCG had been working with a number of providers through a Clinical Reference Group to consider ways in which services could be improved and she confirmed that Vocare would be included in that range of provider services. She highlighted the background to Vocare being commissioned by the CCG to provide services, noting that they already worked alongside the Trust's emergency department team and that they provided General Practitioner (GP) out of hours service in York Hospital alongside the emergency department.

Members were informed that the minor injuries part of the service was currently provided by the Trust's emergency department and that York's UTC was not compliant as minor injuries and minor illness should, in line with the national specification, be delivered as a single service for direct booking by NHS111. YTHFT and Vocare had been working together to review and redesign the existing Emergency Department Front Door service model to optimise delivery and refine the service

model to meet national UTC criteria. Members noted that Emergency services were exclusively provided by YHFT, the urgent care element was streamed at the front door to avoid patients waiting in the Emergency department, if they did not need that level of care.

Members raised numerous concerns regarding private company involvement in the provision of public health care and the effect this could have on the workforce and patients. Following detailed discussions, officers answered questions relating to the interim arrangements, providers, clinicians, GPs and resident engagement. Some key points arising included:

- The CCG had extended York Trust and Vocare's existing UTC contracts until 2021/22 to allow stability in provision so that providers could work together, to address compliance in the short term, but also allow time for the emerging Provider Collaborative to engage in service design that would achieve the objectives of public/patient and local clinicians' feedback. The CCG very much hoped that the York Primary Care urgent care offer, as proposed by the Clinical Reference Group, would play a strong part in future provision.
- Vocare had been commissioned to deliver a service at York Hospital since 2015 and there was no intention to transfer staff or employment of staff into Vocare and YHFT had written to the CCG in response to the MP query to confirm this position.
- The provider to provider arrangement between the Trust and Vocare was viewed by the CCG as an interim solution to bring direct booking at the UTC up to national minimum standards by April 2021, whilst the CCG continued to engage with primary and urgent care providers to support a collaborative approach to delivering urgent care in a different way.
- The Clinical Reference Group was established to oversee the changes, address compliance and services over the long-term.
- The CCG would endorse and encourage the clinicians and GPs, who were part of Nimbuscare (a Primary Care services provider in York), to be involved in conversations about a future model, which would also respond to the requests and wishes of patients.

The Chair thanked the Accountable Officer and the Director for Primary Care for attending the meeting and providing a detailed update.

Resolved: That the update be noted.

Reason: To keep Members updated on York's Teaching Hospital's NHS Foundation Trust Urgent Treatment Centre.

17. Plans for the Future of Health and Care system in York

Members considered a report that highlighted how the health and care services in York had increasingly worked in a collaborative and effective manner during the Covid-19 pandemic, and the plans currently being prepared to extend and improve on this positive working for the benefit of local communities across York.

Members noted that these plans were being led by a number of health and social care partners in York (including the Council, NHS commissioners and providers and voluntary sector organisations) and included the establishment of a new 'York Health and Care Alliance' for the city.

The Director of Public Health, the Accountable Officer (Vale of York Clinical Commissioning Group (CCG)), the Director for Primary Care (NHS Vale of York CCG), the Executive Member for Health and Adult Social Care and the Consultant in Public Health (City of York Council/Vale of York CCG) were all in attendance to provide an update and answer any questions.

The Consultant in Public Health provided a presentation to Members on the future of the health and care system in York. He highlighted the work partners had undertaken locally to prepare the system and to respond to forthcoming government legislation set out in the February 2021 white paper 'Integration and Innovation: working together to improve health and social care for all'.

Members were informed that:

 42 Integrated care systems (ICSs) were to be established on a statutory footing in England through both an 'NHS ICS board' (this would also include representatives from local authorities) and an ICS health and care partnership.

- ICSs would take on the statutory and allocative duties of Clinical Commissioning Groups (CCGs) in April 2022, and from that point the Vale of York CCG would cease to exist.
- A duty to collaborate would be created to promote collaboration across the healthcare, public health and social care system.
- Locally, it had been agreed that York would be designated a 'place' within Humber Coast and Vale area and be invited to send a representative to the ICS board.
- Governance arrangements for the Alliance during its 2021/22 shadow year would be proposed to the Board at its first meeting in April and during this year, neither the Alliance nor the Alliance Board would be a legal body itself, and would not be able to make decisions in their own right.
- During the shadow year, decision-making and accountability would remain the purview of each organisation involved, and any decisions affecting the Council would be taken back through existing governance routes as appropriate.
- It would be recommended that the Alliance was adopted as a subgroup of the Health and Wellbeing Board during the shadow year.

Members noted that partners had set three areas of first focus and seven other key priorities for the Alliance in 2021/22, as highlighted in the report.

Members raised some concerns regarding accountability, data sharing and partnership structures and in answer to some questions raised, officers confirmed:

- Processes were in place to ensure GDPR and data protection legislation would be followed appropriately.
- Representatives on the Alliance had already collaborated on emerging plans and had shown a strong commitment to working together more closely.

Further discussions took place regarding the accountability of the Alliance and its relationship with the Health and Wellbeing Board. Officers and the Executive Member confirmed the shadow year would build on and further develop relationships, the partnership structure and accountability, with reports and recommendations being presented to the Health and Wellbeing Board, this Committee, Executive and ultimately Full Council for consideration and approval. Members also noted that the Accountability Officer for the CCG had been identified as the key link between York Place, the Alliance and ICS.

The Chair thanked officers and the Executive Member for attending the meeting and the Democracy Officer was requested to liaise with the Director of Public Health regarding this Committee scrutinising reports ahead of Executive.

[Between 19:03 and 19:05 the Chair lost connection, during which time Cllr Orrell (Vice-Chair) Chaired the meeting]

Resolved:

- (i) That the collaboration and joint working between health and social care, both prior to and during the Covid-19 pandemic, and the opportunities this work presents in improving health services for citizens in York in the long term, be noted.
- (ii) That national policy direction and reforms, which encompass both health and social care, have implications for local authorities in terms of integration and collaboration with NHS partners, be noted.
- (iii) That the following decisions by Executive on the 18th March 2021, ratified by Full Council on the 22nd March 2022, be noted, to:
 - Endorse the plans being proposed in York to respond to the national legislative changes, including current plans to establish the 'York Health and Care Alliance'.
 - Agree the Council's participation in this new Alliance, including the interim governance arrangements in 2021/22 in its 'shadow' year.
 - Recommend the adoption of this Alliance as a subgroup of the Health and Wellbeing Board, subject to approval at Full Council.
 - Support the proposed priorities and areas the Alliance will focus on in its first year aims for the Alliance, and the aims of the Alliance to be people centred, integrate services and deliver timely and appropriate care.
 - Agree that future reports will be considered by the Health Scrutiny Committee, the Health and Wellbeing Board and the Executive on progress

and future arrangements for the York Health and Care Alliance.

Reason: To keep the Board updated on the future of the health and care system in York.

18. Work Plan

The Committee considered its draft work plan.

Members noted that officers were awaiting the outcome of a judicial review that had been lodged in relation to the government's intention not to legislate the continuation of remote meetings from 7 May 2021.

The Chair confirmed he had been in contact with the Director of Operations for York and North Yorkshire for Tees, Esk and Wear Valleys NHS Foundation Trust and he suggested the Committee consider an update on the Care Quality Commission (CQC) Inspections that took place in Middlesbrough, Darlington and Scarborough and an update on Foss Park.

Following discussion it was

Resolved: That the work plan be approved, subject to including an update at a future meeting on the CQC Inspections and Foss Park.

Reason: To keep the Committee's work plan updated.

Cllr Doughty, Chair [The meeting started at 5.32pm and finished at 7.34pm].

