
Meeting	Health Overview & Scrutiny Committee
Date	18 February 2015
Present	Councillors Doughty (Chair), Funnell (Vice-Chair), Burton, Runciman, Hodgson, Watson and Richardson (Substitute for Councillor Douglas)
Apologies	Councillor Douglas

60. **Declarations of Interest**

At this point in the meeting, Members were asked to declare any personal, prejudicial or disclosable pecuniary interests that they might have had in the business on the agenda.

Councillor Richardson declared standing personal interests in the remit of the committee as his niece was a district nurse, he was undergoing treatment at Leeds Pain Management Unit and at York Sleep Clinic. In regards to Agenda Item 7(Update Report on merger of Haxby and Gale Farm practices) he declared a personal interest as a patient of the Haxby practice.

Councillor Runciman also declared a personal interest in the same item as a patient at the Haxby practice.

61. **Minutes**

Resolved: That the minutes of the Health Overview and Scrutiny Committee held on 14 January 2015 be signed and approved by the Chair as a correct record.

In relation to Minute Item 53 and feedback sought from GP's on health checks for people with Learning Disabilities. It was reported that data had been requested from a third of all practices in the Vale of York area.

The Chair also announced that he had submitted a Freedom of Information request in regards to an overspend in the Elderly People's Homes budget.

62. Public Participation

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

Chris Edmondson spoke about the wheelchair service as contracted out by the Vale of York Clinical Commissioning Group (VOYCCG). He raised concerns about waiting lists to receive appropriate seating and how there had been very little consultation with service users at the wheelchair centre about how the breakdown cover had been moved from a York based company to a Leeds based one. In addition, incorrect personal information was passed on which meant that mechanics did not have the correct parts when servicing the wheelchairs.

Councillor Doughty suggested that if Members were minded to agree, that a review into the wheelchair service could be considered for the new municipal year. Councillor Funnell added that Healthwatch were currently gathering data on the issues raised and that it was recognised to be an ongoing problem.

63. Chair's Report- Health and Wellbeing Board

Members received a report an update report from the Chair of the Health and Wellbeing Board which focused on the areas of work that the Board were doing that were the most relevant to the Committee's work plan.

The Chair reported that at the next meeting, the Board would focus on the retention of staff working in health care and if funding was located correctly.

In response to a question about what changes had come about as a result of the establishment of the Health and Wellbeing Board, the Chair stated that one of its standout achievements was in providing a Place of Safety within the city. In addition, as a strategic board it allowed for partners across health and social care in the city to act in a systematic manner.

Resolved: That the report be noted.

Reason: To keep members of the Health Overview and Scrutiny Committee up to date with the work of the Health and Wellbeing Board.

64. 3rd Quarter Finance, Performance and Monitoring Report

Members received a report which analysed the latest performance for 2014/15 and forecasted the financial outturn position, by reference to the service plans and budgets for all of the services falling under the responsibility of the Director of Adult Social Care, and the Public Health services falling under the responsibility of the Director of Public Health.

Officers highlighted that the Council had met reduction targets on Delayed Transferred of Care and that on the percentage for GP Health Checks for the 40-74 age group, Yorkshire and Humber had a better figure than the national average.

Clarification was sought as to why take up of the flu vaccination still remained an issue in the city. It was felt that contributing factors included; availability, fitting appointments around working hours, and people with existing chronic illnesses feeling that they did not need it.

In regards to the contract for providing mental health services across the city and whether residents would be able to review the contracts, it was explained that as it was a retendering exercise undertaken by the Clinical Commissioning Group (CCG) that residents would have been involved in the design of the contract but that further information would need to be sought from the CCG.

Resolved: That the report be noted.

Reason: To update the committee on the latest financial and performance position for 2014/15.

65. Personal Medical Services (PMS) Review-NHS England

Members received a briefing report on the Personal Medical Services (PMS) review that was being undertaken by NHS England in conjunction with the local Clinical Commissioning Groups. A representative from NHS England, Chris Clarke, was in attendance to present the report and answer any questions that Members might have had.

In response to a question about the direct effect of the review on patients, Members were told that there would be a negligible impact.

The Chair, on behalf of the Committee, thanked Chris Clarke for his attendance.

Resolved: That the report be noted.

Reason: To ensure that Members are kept informed of the PMS review.

66. Update Report on merger of Haxby and Gale Farm practices

Members received a report which informed them of a proposal to merge Gale Farm with Haxby Group. General Practitioners from both surgeries were in attendance at the meeting to answer any questions from Members.

The benefits they felt collaboration between the practices might bring were that the back office staff would be able to gather and share data as to who the GPs would be seeing and also it would allow more time for the GPs to see patients. As there were also specialists in both surgeries, a merger would provide a better service for patients.

It was also reported that there were no current plans to change the access at Gale Farm and the current doctors would remain in place in their current surgeries.

The Chair thanked the General Practitioners for attending the meeting to answer Members questions.

Resolved: That the report be noted.

Reason: In order that the Committee is kept informed of the merger.

67. Presentation by Health Education Yorkshire and the Humber on nurse training and workforce planning

Members received a report and Powerpoint presentation by Health Education Yorkshire & the Humber on their skills and

development strategy relating to nurse training and workforce planning. Mike Curtis and Amanda Fisher from Health Education Yorkshire & the Humber were in attendance to present the report and answer any questions that Members might have had.

The Powerpoint presentation was subsequently republished with the agenda following the meeting.

Mike Curtis and Amanda Fisher gave an overview of the work of Health Education Yorkshire & Humber to Members and explained the role that the body played in training nurses.

Questions from Members related to;

- The drop out rate for courses and those who did not go into nursing once they had completed the course.
- Return to Practice courses, particularly those that offered bursaries and fees and those that did not
- Agency staff recruitment

It was reported that the drop out rate from the nurse training courses was 12%. It was reported that a piece of work was currently being undertaken on attrition. Figures for those that did not go on into nursing posts once they had finished the course were unknown, but this could be investigated within the work on attrition.

It was reported that there had originally been two Education Providers commissioned by Health Education Yorkshire & the Humber for Return to Practice Courses who offered bursaries but once graduate numbers had been reached these were not offered. However, due to an undersupply of nurses Health Education Yorkshire & the Humber paid fees for Return to Practice courses at more Education Providers.

In regards to Agency staff nursing, it was reported that a national project was underway to look at how to retain nurses within the NHS.

Lucy Botting, a Chief Nurse at the Vale of York Clinical Commissioning Group, pointed out that there was a wider issue in workforce analysis, regarding recruitment. For example there was an aging GP population, difficulties in recruiting consultants and there had been problems obtaining theatre nurses over the

past winter. In regards to roles such as elective consultants, practice nurses and community nurses these took several years to be trained.

The Chair thanked Mike Curtis and Amanda Fisher for their report and presentation to the Committee.

Resolved: That the report and presentation be noted.

Reason: To ensure compliance with scrutiny procedures and protocols.

68. Report on outcome of the Leeds and York Partnership NHS Foundation Trust Care Quality Commission Inspection Report

Members considered a report which outlined findings from a recent Care Quality Commission Inspection into services offered by Leeds and York Partnership NHS Foundation Trust.

Chris Butler, the Chief Executive of Leeds and York Partnership NHS Foundation Trust and Anthony Deery, the Interim Director of Nursing were in attendance to present the report.

It was reported that Leeds and York had been the first Mental Health Trust to be inspected using the new Care Quality Commission inspection model and that some issues raised were Trust-wide, such as training. Helpful comments were also received from the inspection on the Trust's complaints handling procedure.

Questions from Members included;

- What measures had been put into place to address the 'must do actions' as identified by the report and what was the timetable for this?
- How was safety being addressed given that the Trust's services were spread across seventeen sites?
- What was the Trust's approach to whistleblowing in regards to patient safety?
- Why were there lower staff morale levels in York than in Leeds?

In regards to Bootham Park an interim plan was in place as Ward 6 patients would transfer temporarily to an upgraded ward at Cherry Tree House in July to allow for the upgrade of Ward 6 at Bootham Park to take place. Patients from Ward 1 at Bootham Park would move to Ward 6 and those on Ward 2 would go to an upgraded Ward 1.

Accommodation at Meadowfields was now female only, there was a plan in place to address the environment at Acomb Gables which would be updated this year. Worsley Court was now a male only facility and all staff would receive mandatory mental health and capacity act training. The closure of Worsley Court had been temporary in order to allow the upskilling of the staff.

In response to how safety was addressed, Members were told that the Trust felt that they had the duty of following the Mental Health Act in providing care in the least restrictive environment by eliminating risks, but that safety was not an absolute term.

In regards to a concern raised by a Member about whistleblowing, it was reported that the Trust had signed up to a national initiative, to provide a culture where staff could feel safe to speak out and raise concerns.

There was felt to be lower morale in York as attracting new recruits was harder, and what was needed was more personal development. There was also the acknowledgment that the roles performed by Trust staff were uncomfortable for many.

The Chief Executive suggested that if Members wished that the Trust could feed back to them progress on their action plan to a future meeting.

The Chair, on behalf of the Committee, thanked the Chief Executive and Interim Director of Nursing for attending the meeting and answering Members questions.

Resolved: (i) That the report be noted.

- (ii) That a report on the Leeds and York Partnership NHS Foundation Trust Action Plan be received by the Committee.

Reason: In order that the Committee are kept informed of the findings of the Care Quality Commission's Inspection Report into Leeds and York Partnership NHS Foundation Trust.

69. Safeguarding Vulnerable Adults Update on Assurance

Members received a report which outlined the actions that had been taken to improve the arrangements in place to ensure that the Council was able to discharge its responsibilities to keep vulnerable adults within the city protected from violence and abuse, whilst maintaining their independence and wellbeing.

The Chair felt it was important to receive further updates and Officers suggested that the Adult Safeguarding Board's Annual Report be received by Members in the future.

- Resolved: (i) That the report and improvements made set out in Annex A be noted.
- (ii) That the Committee feel assured of the preparations made for the implementation of the Care Act.
- (iii) That the Committee receive further update reports.
- (iv) That the Adult Safeguarding Board's Annual Report be received by the Committee at a future meeting.

Reason: To keep the Committee assured of the arrangements for Adult Safeguarding within the city.

70. Work Plan

Members considered the Committee's work plan.

The Scrutiny Officer reported that he had received an offer from the Care Quality Commission to talk to the Committee about the upcoming CQC inspection of York Hospital. The CQC representative said that they could speak before and after the meeting, and it was suggested that they be invited to both the

March and June meetings. Members felt this would be an excellent idea and asked the Scrutiny Officer to invite the CQC representative.

Resolved: That the work plan include the following;

- A report from Leeds and York Partnership NHS Foundation Trust on progress on their Action Plan in relation to their CQC Inspection.
- The Adult Safeguarding Board's Annual Report when it is produced.
- An invitation to the CQC to attend the March and June meeting ahead and after the York Hospital inspection.
- The Interim Report on the Older People's Scrutiny Review.

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

Councillor P Doughty, Chair

[The meeting started at 5.32 pm and finished at 8.26 pm].