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MEETING	HEALTH SCRUTINY COMMITTEE
DATE	4 SEPTEMBER 2006
PRESENT	Councillors Cuthbertson (Chair), Kind Lancelott (substituting for Cllr Greenwood), Looker, Moore, Nimmo (substituting for Cllr M Waudby) and Wilde (substituting for Cllr Fraser)
APOLOGIES	Councillors Fraser, Greenwood and M Waudby
IN ATTENDANCE	DAVID GEDDES (Medical Director, Selby and York PCT) PENNY GOFF (Head of Patient Experience, York Hospitals Trust) HELEN MACKMAN (Carers' Foundation) RICHARD SMITH (Chair, Local Patients' Forum)

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### 13. DECLARATIONS OF INTEREST

The Chair invited Members to declare at this point any interests they might have in the business on the agenda. The following interests were declared:

- Cllr Moore - a personal, non prejudicial interest in agenda item 5 (Scrutinising SYPCT's Measures to Restore Financial Balance), as a patient of the medical practice in which Dr Geddes was a partner, and also on account of his wife's employment as a practice manager.
- Cllr Kind – a personal, non-prejudicial interest in item 5, as her partner had designed some of the health status measures discussed by Dr Geddes during his presentation.

### 14. MINUTES

RESOLVED: That the minutes of the last meeting of the Health Scrutiny Committee, held on 31 July 2006 and adjourned and reconvened on 2 August 2006, be approved and signed by the Chair as a correct record, subject to the following amendments:

- a) Cllr Waudby's name to be removed from the list of those present at the meeting on 2 August;
- b) Resolution (ii) of Minute 12 to be amended to read as follows:  
"That the Committee give further consideration to the final version of the clinical thresholds guidance 'Commissioning Effective, Efficient and Necessary Pathways of Care' (paragraph 4.2 of the Recovery Plan refers), and how it addresses the relationship between RACAS and practice based commissioning. This may

lead to scrutiny of other issues, including those aspects of the Recovery Plan that relate to Mental Health Services, and their potential impact on these services.”

## **15. PUBLIC PARTICIPATION**

The Chair reported that John Yates, representing the York Older People’s Assembly, had registered to speak at the meeting under the Council’s Public Participation Scheme, in relation to agenda item 4 (Proposals for the Replacement of Patient and Public Involvement Forums). Mr Yates expressed concern about the proposals outlined in the report, the lack of public consultation on the proposals and the problems generally of ensuring adequate public involvement in health issues. In particular, it would be difficult to ensure that the membership of the new LINKs bodies was both well informed and representative of the local population. He suggested that the non-executive members of the NHS Trust Board, including the Trust’s Older People’s Champions, could play a stronger role in the process.

## **16. “A STRONGER LOCAL VOICE” – PROPOSALS FOR THE REPLACEMENT OF PATIENT AND PUBLIC INVOLVEMENT FORUMS**

Members considered a report which invited them to agree a response to the Department of Health (DoH) proposals to replace the Commission for Patient and Public Involvement Forums (PPIFs) with Local Involvement Networks (LINKs). The deadline for responses was 7 September 2006.

The proposals were set out in the DoH document “A Stronger Local Voice”, issued in July 2006, which had been made available via a link to the report on the Council’s website. An extract from this document, outlining those matters on which the DoH were specifically seeking comments from local authorities, was attached as Annex A to the report, together with questions from the DoH. The extract explained the purpose and role of the LINKs and how they would be established and funded. It also provided information on the role of overview and scrutiny committees (OSCs) in the new process. It was noted that LINKs would have the power to refer matters to OSCs and that OSCs would be encouraged in future to focus their attention on the work of commissioners, to ensure that services met the health needs of the local population.

In discussing and agreeing their response, Members received input from the Chair of the York Hospitals Patients’ Forum, the Head of Patient Experience at York Hospitals Trust and the Patients’ Forums Coordinator, who is employed by the Carers’ Federation.

RESOLVED: (i) That the following comments be agreed for incorporation in the response to the proposals in “A Stronger Local Voice”:

- The proposed loss of the statutory power of entry held by the PPIFs is regretted, and it is asked that this be retained by the LINKs.
- The strengthening of the links between patients’ bodies and OSCs is appreciated, but restrictions on

how the OSCs choose to handle their scrutiny reviews would not be acceptable.

- Adequate funding and support must be provided for the establishment and development of LINKs.
- There are concerns about the nature and definition of the “host organisations” intended to develop and run the LINKs and questions as to what the composition, size and control of these bodies will be.
- Further information about the “model contract” for hosting arrangements will be needed before this can be commented on.

(ii) That the Chair prepare a response to the DoH based upon the above comments and circulate it to Committee Members before despatch.

REASON: To ensure that a proper response to the proposals is submitted before the 7 September deadline.

## **17. SCRUTINISING SELBY AND YORK PRIMARY CARE TRUST'S MEASURES TO RESTORE FINANCIAL BALANCE**

Members considered a report which asked them to decide how they wished to gather evidence on those aspects of the Primary Care Trust's (PCT) financial recovery plan which the Committee had agreed to subject to further scrutiny. These included the clinical thresholds guidance “Commissioning Effective and Efficient Pathways of Care” and how it addressed the relationship between the Referral and Clinical Advice Service (RACAS) and practice-based commissioning (PBC).

Dr David Geddes, Medical Director of the Selby and York PCT, was in attendance to provide information on the functioning of RACAS and the move towards PBC. He explained that the system had been developed as a regional response to the challenge of managing service demand in those areas where PCTs were in financial deficit. Its aim was to ensure that treatment was provided at the correct level and equitably across the region. To this end, the threshold document identified “lower tier” procedures, namely treatments for minor conditions the benefits of which were questionable and which would not be provided unless specified exception criteria were met. This prioritisation would ensure that funds remained available for high priority procedures, such as new treatments for heart failure and cancer. Allied to RACAS was a “Choose and Book” system which enabled GPs to refer patients to secondary care, or seek advice from consultants, electronically.

In response to Members' questions, Dr Geddes confirmed that RACAS would continue even after financial balance had been restored, though not in an identical format. The revised version of the clinical thresholds guidance would be considered by the North Yorkshire Clinical Leaders Group on 7 September and was expected to be with GPs in 2 to 3 weeks' time. However, the guidance was not a static document and would continue to be subject to ongoing review. Members welcomed the focus of

the guidance on patients' needs, but stressed the importance of ensuring that less articulate or assertive patients were not disadvantaged.

The Chair thanked Dr Geddes for his presentation, which had helped to allay Members' concerns about RACAS. In view of the fact that Selby and York PCT would shortly be replaced by the North Yorkshire and York PCT, Members agreed that it would not be feasible to proceed any further with the scrutiny process until after the appointment of the new directors in October.

**RESOLVED:** That the Chair hold preliminary discussions with the directors of the North Yorkshire and York PCT and feed the results back to Committee Members.

**REASON:** To initiate a dialogue with the new PCT and clarify their approach before deciding how to proceed further with the scrutiny of their measures to restore financial balance.

## **18. FORWARD PLAN**

Members considered a draft Forward Plan setting out business proposed for consideration at future meetings of the Committee.

**RESOLVED:** That the draft Forward Plan be noted and the items for the next meeting, on 9 October 2006, be agreed as follows:

- Presentation from the Yorkshire Ambulance Service on Community Responders, together with an update on 999 Category C call handling.
- Continued work on the response to the PCT recovery plan.

I Cuthbertson, Chair

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