
MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	12 SEPTEMBER 2012
PRESENT	COUNCILLORS FUNNELL (CHAIR), DOUGHTY (VICE-CHAIR), FRASER, HODGSON, RICHES AND RUNCIMAN (SUBSTITUTE)
IN ATTENDANCE	RACHEL BARBER (INDEPENDENT) JOHN BURGESS (YORK MENTAL HEALTH FORUM) KATHY CLARK (CITY OF YORK COUNCIL) ADAM GRAY (CITY OF YORK COUNCIL) RICHARD HARTLE (CITY OF YORK COUNCIL) MELANIE HIRD (LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST) ANDREW HOWARTH (LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST) PETER GARBERT (YORK MIND) DAVID LEWIS (YORK MIND) DAVID SMITH (YORK MIND) JIM KHAMBATTA (NHS NORTH YORKSHIRE AND YORK) VINCE LARVIN (YORKSHIRE AMBULANCE SERVICE) JASON LEE (YORK TEACHING HOSPITAL NHS FOUNDATION TRUST)

NEIL WILSON (YORK TEACHING
HOSPITAL NHS FOUNDATION TRUST).

GEORGE WOOD (YORK OLDER PEOPLES
ASSEMBLY)

JOHN YATES (YORK OLDER PEOPLES
ASSEMBLY)

JANE PERGER (YORK LINK)

APOLOGIES

COUNCILLORS RICHARDSON AND
CUTHBERTSON

22. **DECLARATIONS OF INTEREST**

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

Councillor Fraser declared a personal interest in the business on the agenda as a Council appointee to the York Hospital Board of Governors. He also declared a personal interest in the general remit of the Committee as a retired member of UNISON and Unite (TGWU/ACTS sections).

Councillor Doughty declared a personal interest as his partner had registered to speak at the meeting on behalf of York Mind.

23. **MINUTES**

RESOLVED: That the minutes of the meetings of Health Overview and Scrutiny Committee held on 23rd July 2012 and 6th August 2012 be approved and signed by the Chair as a correct record with the following amendment having been made to item 19 on 23rd July meeting: 'That the Association for Public Service Excellence (APSE) *has been*

commissioned *by* the Council to conduct a study into how to get people involved in Public Health.

24. PUBLIC PARTICIPATION

It was reported that there had been four registrations to speak under the Council's Public Participation Scheme. Details are included under the relevant minute items.

25. LOCAL HEALTHWATCH YORK: PROGRESS UPDATE

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

George Wood who had registered to speak on this item queried paragraph 9 of the report which appeared to suggest that there may be an alternative for the delivery of NHS Complaints Advocacy. Officers advised that this was not the intention.

Members queried paragraph 27 of the report which advised that there is a risk of challenge as to the validity of the Council's procurement and commissioning process if a HealthWatch contract is let without full and proper consultation. Officers advised that the appointment of a lay person will eliminate this risk.

Members noted a number of key dates as outlined at paragraph 7 of the report.

RESOLVED: That the report be noted.

REASON: To update the Committee on the latest progress towards establishing a HealthWatch.

26. INTRODUCTION FROM THE NEW DIRECTOR OF PUBLIC HEALTH (DPH) - CHALLENGES AND PRIORITIES FOR THE DPH

The Director of Public Health, Dr. Paul Edmondson Jones was in attendance at the meeting and gave a verbal report on the challenges and priorities in his role.

He advised that his key priorities for York are:

- Establishment of the Health and Wellbeing Board.
- The safe transition of Public Health to the Local Authority.
- Safe delivery of functions.
- Health improvements to the population of York and how this impacts on the Council.
- Health Protection issues such as the control of outbreaks of influenza.
- Supporting the NHS.

His challenges were highlighted as being as follows:

- Meeting and getting to know as many people as possible.
- The safe transition of Public Health to the Local Authority.
- Supporting the NHS – he acknowledged that the past few years had been financially challenging for the NHS in York and he will be looking at ways to redress the balance.

He also confirmed that he would be the lead person for the Health Overview and Scrutiny Committee.

RESOLVED: That Members noted the Director of Public Health's update.

REASON: To keep them informed on the Director for Public Health's key priorities and challenges.

27. PROGRESS BRIEFING ON THE MAJOR TRAUMA NETWORK

Members considered a briefing note which provided them with information on the Major Trauma Network arrangements for Major Trauma events in York and surrounding areas, the

implementation plan, progress to date and the next steps in the process.

The Senior Commissioning Manager for NHS North Yorkshire and York Cluster, a Consultant for the Emergency Department at York Hospital and a representative from the Yorkshire Ambulance Service presented the briefing note to the Committee.

They outlined the following key points:

- The service changes are the result of major trauma service improvements across England.
- It is about the better use of existing resources and better communication between the NHS Trust and the Ambulance Service.
- Due to York being situated between Leeds and Hull, traumas that occur in the east of York will go to Hull, those in the west to Leeds. Traumas to the North will continue to go to York Hospital in the first instance.
- Due to issues with the accuracy of trauma data there has been a delay in phases 2 and 3 which are expected to take place in 2013.

Members queried a number of points including:

- The use of Leeds Hospital for paediatric traumas and the impact the recent closure of the children's coronary unit may have on the hospitals capacity to treat trauma patients.
- Paragraph 5.3 which advised that the funding of major trauma will be solely via payment by results. It was confirmed that this is the standard practice.

RESOLVED: That Members noted the report.

REASON: To keep them informed on improvements in and management of major trauma across Yorkshire and the Humber.

28. PROPOSAL TO REDESIGN OLDER PEOPLE'S MENTAL HEALTH SERVICES AND ENHANCE PROVISION OF COMMUNITY CARE AND SUPPORT

Members considered a report which presented proposals by Leeds and York Partnership NHS Foundation Trust on proposals to redesign older people's mental health services and enhance the provision of community care and support. Their report was attached at Annex A and Members were asked to consider whether the proposed redesign was a substantial variation to service.

John Yates from York Older Peoples assembly spoke to enquire how the proposed transformation of services from 'hospital to home' would affect domiciliary community services when older people are able to be returned back to their own homes, not care homes or nursing homes as this was not made clear in the text.

David Smith from York Mind spoke to advise that he agrees with the proposal in principle but had concerns about the changes which could mean that elderly individuals would be transferred from health to social care and the associated impacts. He advised that as the impact upon Council resources and budgets was unknown, then there should be further consultation.

The Associate Director, York and North Yorkshire Services from Leeds and York Partnership NHS Foundation Trust was in attendance and presented the paper to the Committee.

The Committee were advised that the main change to the services would be the establishment of a nursing home team to help prevent admissions from care homes to hospital and transfer between care homes. The team would also help to improve the pathway out of NHS inpatient services into residential and nursing homes, helping to prevent delayed discharge and therefore freeing up beds for those who needed them.

Members raised concerns about the cost implications to the Council should problems arise from the changes and the proposals to close Mill Lodge. They also raised concerns that not enough discussion had taken place between the Trust and Council Officers as to the implications behind the proposals. Members requested that a longer consultation period be

undertaken to ensure that the public understands the changes and in order for further discussion to take place between the Council and the Trust.

In response to Members questions, it was advised that the changes were a reconfiguration of resources and that the service will continue, rather than it being a substantial change.

- RESOLVED:
- (i) That Members agreed with Leeds and York Partnership NHS Foundation Trust that the proposed changes do not constitute a substantial variation of service.
 - (ii) That Members requested a longer consultation period of 2 months be undertaken.
 - (iii) That a report be brought back to the December meeting of Health Overview and Scrutiny Committee detailing the outcomes of the consultation and further information on the partnership and engagement between the Trust and City of York Council.
 - (iv) That the Clinical Commissioning Group Primary Care Trust and City of York Council Officers be invited to join the debate at the December meeting.

REASON: To ensure that the most appropriate consultation period is set for the proposed redesign of service.

29. 2012-13 FIRST QUARTER FINANCIAL & PERFORMANCE MONITORING REPORT FOR ADULT SOCIAL SERVICES

Members considered a report which analysed the latest performance for 2012/13 and forecasts the financial outturn position by reference to the service plan and budgets for all the relevant services falling under responsibility of the Director of Adults, Children and Education.

In relation to the report, Members had the following queries:

- Page 53 paragraph 13 – the overspend in Adult Transport. Officers confirmed that it is intended that there will be a review undertaken of how Adult Transport is provided.
- Page 58 paragraph 17 which referred to adults with learning disabilities in settled accommodation, and the figures on page 54 which showed that the target for quarter one had been missed. Officers advised that by the end of the quarter they would expect the target to be on track following the re-timetabling of reviews.
- Page 59 – the fall off in performance of the Occupational Therapy team. Officers advised that there had been some staffing issues due to the expectation that vacancies are not automatically filled.
- Members queried who decides which areas are monitored. Officers confirmed that it was a mixture of service plans and performance indicators set by the Department of Health which decided which areas are monitored.
- Members asked if there are better ways of forecasting performance in areas where there are big overspends. Members suggested the use of demographics. Officers advised that they are always looking at ways to improve projections and that overspends from previous years are still affecting the current figures, but they are confident of improvement.

RESOLVED: That Members noted the report.

REASON: To update the committee on the latest financial and performance position for 2012/13.

30. CONSULTATION ON LOCAL AUTHORITY HEALTH SCRUTINY

Members considered a report which presented to them a consultation document on Local Authority Health Scrutiny.

The document attached at Annex A contained the Government's proposed changes to health scrutiny in local authorities. These

changes are further to changes already consulted on under the Health and Social Care Act 2012. The Scrutiny Officer outlined the consultation response attached at Annex B.

Members queried the response to question 7 which stated that many Councils have full council meetings every 2 months as it was thought that County Councils hold theirs every 3 months. The Scrutiny Officer agreed to look into this and amend if necessary.

RESOLVED: That Members agreed the draft response with the amendments highlighted above.

REASON: To respond to the national consultation on Local Authority Health Scrutiny.

31. CONSULTATION ON THE MANDATE TO THE NHS COMMISSIONING BOARD

Members considered a report which asked them to comment upon a consultation document on the Draft Mandate to the NHS Commissioning Board.

The Director of Public Health and Wellbeing introduced the report and advised that the proposals were part of NHS reforms which have resulted in the setting up of the NHS Commissioning Board (NHSCB).

The mandate to the NHSCB will be updated manually and is the means by which the Secretary of State for Health will retain ultimate responsibility for securing the provision of health services by setting clear objectives for the NHSCB.

The Consultation sought a response around six issues:

- The overall approach to the Mandate.
- The best way of assessing progress against the Mandate.
- The use of objectives based on the NHS Outcomes Framework.
- The principle of 'putting patients first'.
- The principle of 'broader contribution from the NHS'.

- The principle of 'effective commissioning'.

The Director for Public Health advised that the key aspect of the consultation response was the request for a statutory review of the Mandate in one years time.

RESOLVED: That Members considered and approved the response at Annex B.

REASON: To respond to the national consultation on the draft Mandate for the NHS Commissioning Board.

32. WORK PLAN FOR 2012-13

Members considered the Committee's updated work plan for the municipal year 2012/13.

The Scrutiny Officer advised that the workloads for the October and December meetings had been altered slightly to ensure an even distribution of work.

Members attention was drawn to the fact that an extra meeting may need to be scheduled for November and Democratic Services would advise accordingly.

RESOLVED: That following the changes be made to the Committee's work plan:

- (i) That the progress update on Local HealthWatch York be moved to the December meeting of the Committee.
- (ii) Report on the outcomes of the consultation into the closure of Mill Lodge (minute 28 refers).
- (iii) Addition of a November meeting and the redistribution of items to allow time for the debate at the October meeting with NHS North Yorkshire and York and the Clinical Commissioning Group.

REASON: In order to keep the Committee's work plan up to date.

Action Required

1. To Update the Committee's Work Plan. TW

CLLR C FUNNELL, Chair

[The meeting started at 5.00 pm and finished at 7.30 pm].