
MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	19 DECEMBER 2012
PRESENT	COUNCILLORS FUNNELL (CHAIR), DOUGHTY (VICE-CHAIR), RICHES, HODGSON, FRASER, RICHARDSON AND CUTHBERTSON

47. DECLARATIONS OF INTEREST

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

Councillor Funnell declared a personal interest in Agenda Item 5 (Local HealthWatch York: Progress Update) as a Board Member of York CVS, who had been successful in obtaining the contract to establish Local HealthWatch York.

Councillor Fraser declared a personal interest in the business on the agenda as a retired member of UNISON and Unite (TGWU/ACTS sections).

Councillor Hodgson declared a personal interest in Agenda Item 8 (2012 Local Account for Adult Social Care) as Yorkcraft, which was mentioned in the Officer's report, was situated in his ward.

No other interests were declared.

48. PUBLIC PARTICIPATION

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

Graham Purdy, who was a Public Governor of Leeds and York Partnership NHS Foundation Trust spoke regarding Agenda Item 3 (Results of Consultation on Proposed Closure of Mill Lodge). He supported the proposal to close Mill Lodge Community Unit for the Elderly.

He stated that although the use of the building as a Community Unit for the Elderly (CUE) would cease, he felt that there was flexibility to provide other services in the building and that the service provided by the CUE would not be lost through the closure of the building. He added that the closure might also raise a question of how treatment of dementia could be addressed through the independent care sector, rather than within inpatient care.

David Smith from York Mind was in attendance at the meeting, he spoke following permission from the Chair. He stated that the organisation was in support of moving patients from hospital into community care, provided that a clear package for how this would be carried out was properly resourced.

49. RESULTS OF CONSULTATION ON PROPOSED CLOSURE OF MILL LODGE

Members received a paper which provided them with an update on Leeds and York Partnership NHS Foundation Trust's proposals to redesign the way that older people's mental health services are provided in York, Selby and Tadcaster.

The two authors of the paper, Melanie Hird (Associate Director of York and North Yorkshire Services) and Lynn Parkinson (Deputy Director of Leeds and York Partnership NHS Foundation Trust) were in attendance to present their report and to answer Members' questions.

In response to a question from a Member about when care would cease at Mill Lodge, it was reported that a definite date had not yet been fixed. In addition, for those still under care at Mill Lodge, the Trust would try to avoid disruption and not transfer current patients at Mill Lodge until a clear transition point had been reached.

Further questions from Members included;

- Where would the nursing staff needed for the Community Mental Health Teams come from?
- How will the care offered by the CUE's be replaced?
- How would the closure of one CUE (Mill Lodge) impact on wider social care services in the city?

- What the monthly discharge rate of patients from Mill Lodge, of 20.5%, as detailed in the report, related to. Did it relate to occupied or non occupied bed spaces?

Leeds and York Partnership NHS Foundation Trust felt that the closure would not have a major impact on current social care services that were provided within the city. They added that they felt that a community care setting would be better for those with dementia rather than an inpatient one, as transitions from different inpatient facilities to others were disruptive and confusing for dementia sufferers. It was also reported that the discharge percentage referred to in the report related to those who had been discharged from currently occupied beds.

Further discussion ensued and concerns and questions were raised such as;

- Whether there were enough resources to provide services to a growing older population in the city.
- How could it be ensured that a new service configuration would have sufficient resources for it to work
- That future use of the Mill Lodge building as a NHS used facility or whether it would be available to other service providers.

Chris Butler, the Chief Executive of Leeds and York Partnership NHS Foundation Trust explained that old NHS properties would either transfer to the new providers of the previously provided services or transfer to a new organisation called NHS Prop Co. For those NHS bodies who wished to continue to use old NHS facilities, they would then enter into a lease with the Prop Co. Further to this, current Government policy dictated that NHS bodies would not be able to pick and choose which buildings to use for their services. They would either have to take on leases for all of the buildings or none at all.

Members requested that a report be brought to the Committee at a later date on the progress of the transition from clinical to community care, what resources were currently being used and which ones would be used in the future. This report should also include information about partnership working.

Councillor Fraser asked if the work of Doctor Peter Kennedy, the former Chief Executive of York Health Trust be recorded in the minutes of the meeting in recognition of his contribution to the understanding of psychiatric needs of mental health patients in the city.

- RESOLVED:
- (i) That the update be noted.
 - (ii) That a progress report on the reconfiguration of services for older people's Mental Health be considered by the Committee at a later date.

REASON: To keep the Committee informed of the Leeds and York Partnership NHS Foundation Trust proposals to redesign the way that older people's mental health services are provided in York, Selby and Tadcaster.

50. VERBAL REPORT FROM LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST (MENTAL HEALTH SERVICES)

The Chief Executive from Leeds and York Partnership NHS Foundation Trust (Mental Health Services), Chris Butler, attended the meeting and gave a short verbal update on the current work of the Trust.

He explained to Members how the Trust provided Mental Health Services at a large number of sites across the North Yorkshire and York area, and currently had 3,000 people using their services, which were mostly provided in or around communities. It was noted that approximately £180 million pounds per annum was spent by the Trust in providing these services.

He reported that the Trust also had a number of objectives for improving meaningful patient engagement. These included;

- The need to campaign on further social inclusion.
- To move services away from a focus on treatment to that of recovery.
- To provide efficient and good value for money services for the community.

Members asked questions about efficiency savings that the Trust needed to make. They asked if the necessary savings could be achieved and if further cuts would be examined in the future.

In response, the Committee were informed that the Trust anticipated a 45%-50% saving could be made in clinical services. This had been as a result of being more assertive in examining management infrastructure within the Trust's services. It was also noted, that any future savings would be as part of a balanced programme and would not concentrate costs on one specific service area.

RESOLVED: That the verbal update be noted and a further report be provided to the Committee on an annual basis

REASON: In order to keep the Committee updated on the work of the Leeds and York Partnership NHS Foundation Trust in relation to Mental Health Services in the city.

51. LOCAL HEALTHWATCH YORK: PROGRESS UPDATE

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

Members requested that Local HealthWatch might wish to share their work plan with the Committee once it had been produced in order to avoid duplication of work and so that the work of the Committee could also complement it. It was also noted that the start up costs for Local HealthWatch, as detailed in the Officer's report, would be for the current financial year.

The Chair suggested that the regular progress update reports on Local HealthWatch be removed from the Committee's work plan.

RESOLVED: (i) That the report and latest progress towards the establishment of Health Watch be noted.

(ii) That future progress reports be removed from the Committee's work plan.

REASON: To oversee the transition from LINKs to HealthWatch is identified as a priority in the Health Overview and Scrutiny Work Plan.

52. 2012/13 SECOND QUARTER FINANCIAL & PERFORMANCE MONITORING REPORT- ADULT SOCIAL SERVICES

Members considered a report which analysed the latest performance for 2012/13 and forecasted 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;

- Why had there been an overspend in patient transport and vacancies in small day services?
- What were the reasons for targets not being reached in regards to adults with learning disabilities in settled accommodation and timeliness of social care assessments (i.e. Commencement of Assessment within 2 weeks and completion of Assessment in 6 weeks)?

Officers responded that targets had not been achieved in patient transport and vacancies in small day services due to demographic pressures of young people using the system with complex issues. It was reported that work was ongoing to reduce the number of patient escorts and ways of reducing the cost of patient transport vehicles. Members were also informed that a review was underway to look at small day services.

In response to a Member's question about timeliness of social care assessments, Officers responded that social care reviews were profiled across the year and that due to a change in criteria, the Council now had to review those with moderate care needs.

RESOLVED: That the report be noted.

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

53. UPDATE REPORT: RE PROVISION OF THE TRAVELLERS AND HOMELESS MEDICAL SERVICE IN THE CITY OF YORK

Members received an update report regarding the recommissioning of the Primary Medical Services (PMS) Homeless Service in York. John Keith from NHS North Yorkshire and York was in attendance to present the report and answer Members' questions.

Members raised a number of questions about the report which included;

- What were the shortfalls in the robustness of current service that were referred to?
- How would homeless people and travellers find out about a change in the provision of services, would it be signposted clearly and who would carry out this signposting?
- How would the new service provider ensure that potential homeless or traveller patients did not miss the opportunity to register with a GP?
- How would the new service deal with capacity issues such as an increase in patients who had sudden lifestyle changes, and ensure that those who needed to access the service would do so?

In response to the question about the shortfalls in the robust nature of the existing service, Members were informed that this referred to the current situation. If a member of the PMS team, such as a Practice Nurse was unavailable, then a replacement could often not be found. This would then mean that tasks such as dealing with patients' dressings would not be carried out.

Regarding the question about information provided to patients about the commissioning changes it was reported that the GP service would now provide information to homeless people and travellers, through directing them to their nearest GP practice. It was reiterated that existing services would not be taken away, but that the proposals were to change the method of delivery for these services.

It was highlighted however, that many GP surgeries would not take on new patients without a fixed registered address, which meant that homeless and traveller patients had difficulties registering with a practice.

In relation to a question about capacity to take on new patients, Members were informed that there would be a greater amount of capacity as under the new proposals, the specific services for homeless people and travellers would not be located in solely in one GP practice.

Reference was made to a recommendation arising from a previous scrutiny review into the PMS service, in that it should continue and be strengthened. It was felt that the provision of medical services to travellers and the homeless population continued to raise concerns, and that further monitoring should take place.

Other Members agreed and suggested that a report be brought to the Committee by the Director of Public Health, which looked at how medical services had been provided in the past, identified what issues had arisen and were still existing. They added that the report should contain a plan to monitor progress and issues around provision of the Travellers and Homeless Medical Service. The Chair suggested that this report be brought to the Committee in either March or April 2013.

RESOLVED: (i) That the report be noted.

(ii) That a report from the Director of Public Health evaluating and monitoring the provision of travellers and homeless medical services be considered by Members at a future meeting in March or April 2013.

REASON: In order to keep the Committee informed of the provision of medical services for the traveller and homeless communities in York.

54. THE LOCAL ACCOUNT FOR ADULT SOCIAL CARE

Members received a report which introduced them to the contents of the Local Account for Adult Social Care 2012.

Officers reported that a number of the areas of improvement highlighted by the Local Account would not be solved by spending more money on them, but by working more efficiently.

Questions from Members to Officers related to;

- The reduction in waiting lists for carers assessments
- Supporting those in the sheltered employment service at Yorkcraft to get jobs in the wider economy.
- Methods of increasing independent living for adults in contact with Learning Disabilities and those receiving secondary mental health services.

Members were informed that Officers had talked with carer's groups regarding the reduction of Self Directed Support and it was noted that an additional body would carry out assessments.

Officers also felt that it needed to be recognised that some elderly residents would be reluctant to take on direct payments, but that the Personalisation Scrutiny Review could help examine this.

Members were also informed that a report on Yorkcraft would be considered at a future meeting of the Economic and City Development Overview and Scrutiny Committee.

RESOLVED: That the report be noted.

REASON: To update the Committee on the Local Account for Social Care.

55. REMIT - SCRUTINY REVIEW INTO PERSONALISATION

Members considered a report which presented them with work undertaken by the Task Group appointed to the Personalisation Review. The report included a draft remit for the Task Group's work for the Committee to agree.

The Scrutiny Officer updated Members in relation to Paragraph 12, which referred to a proposed planning meeting with the Task Group and various invited organisations that would take place on 17 January 2013. It was reported that an independent facilitator had been sourced to assist with this review.

RESOLVED: (i) That the report be noted.

- (ii) That Option 1, to agree to the remit and key objectives for the review as outlined in the report at Paragraph 10 be approved.

REASON: To enable the Task Group to commence the review.

56. UPDATE REPORT ON PROPOSED CHANGES TO CHILDREN'S CARDIAC SERVICES AND FORMATION OF A JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE TO RESPOND TO A NATIONAL CONSULTATION ON ADULT CARDIOLOGY SERVICES

Members received a report which updated them on the outcomes of the Review of the Children's Congenital Heart Services, the proposed changes and the work undertaken by the regionally formed Joint Health Overview and Scrutiny Committee (Joint HOSC) around this. It also updated them on the continuing work of the Joint HOSC around the implementation phase of the review.

Further to this, Members were also informed about a proposed national consultation on services for adults living with congenital heart disease and were asked to approve the formation of a further Joint HOSC to consider the proposals and implications for Yorkshire and the Humber patients arising from this proposed review.

The Committee were informed that the proposed review into adults living with congenital heart disease was currently scheduled to take place in 2013-14 and that it was unclear as to whether the current Joint HOSC would continue in its present form, or reform with new terms of reference to reflect a new review.

- RESOLVED:
- (i) That report and update be noted.
 - (ii) That the Chair (with the Vice Chair acting as substitute) be nominated to any further Joint HOSC established to consider the proposed review into Adults with Congenital Heart Disease.

REASON: To keep the Committee informed of the work of the Joint HOSC.

57. WORK PLAN

Members considered the Committee's updated work plan for the municipal year 2013.

RESOLVED: That the updated work plan be noted and the following items be added and amended to the workplan¹;

- A progress report on the reconfiguration of services for Older People's Mental Health Services, including information on partnership working (June 2013).
- A report from the Director of Public Health evaluating and monitoring the provision of travellers and homeless medical services (March 2013).
- To slip the update report from Leeds & York Partnership Foundation Trust (Access to Talking Therapies/Improving Access to Psychological Therapy (IAPT)) from the January 2013 meeting to the February 2013 meeting.
- The removal of further Local Health Watch update reports from the Committee's workplan.

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

Action Required

1. To update the Committee's work plan

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CLLR C FUNNELL, Chair

[The meeting started at 5.00 pm and finished at 7.20 pm].