
Health Scrutiny Committee

07 January 2008

Report of the Head of Civic, Democratic and Legal Services

**North Yorkshire and York Primary Care Trust's
Referral Policies and work of the Individual Case
Panel**

Summary

1. This report is to introduce Dr Peter Brambleby, Director of Public Health, and Dr David Geddes, Medical Director at North Yorkshire and York Primary Care Trust. They will update members on clinical pathways and guidance for referral to secondary care.

Background

2. In September 2007 members agreed that they would scrutinise alternatives to hospital treatment with particular reference to the management of long-term conditions.
3. In October 2007 members held a community engagement day in which they listened to the views of community organisations as to which long-term condition(s) they should focus on.
4. In November 2007 members felt that they should clarify the work of the PCT's Exceptions Panel before they could focus on one or more alternative care pathways. There was concern about the need to seek prior approval for many treatments and information was needed as to whether temporary measures put in place as a result of the financial recovery plan had now been removed.
5. The Exceptions Panel was in place from January to March 2007 in order to reduce costs because of the financial position at the time. This arrangement changed in April when the PCT started commissioning treatments in line with the clinically approved "Clinical Pathways and Referral Guide". A new version of this is expected in January 2008, a copy of the latest edition is enclosed at Annex A. Exceptional cases are now referred to an

Individual Case Panel and the colleagues from the PCT will provide details to members at this meeting. An outline of their comments can be found at Annex B.

Consultation

6. Close consultation has been ongoing with colleagues at the PCT and will be essential during any future scrutiny review.

Options

7. Members are asked listen to the updates from the representatives of the PCT and to decide if they are in a position to agree the detail of their future scrutiny review.

Analysis

8. Members must be aware that there are now three scheduled formal meetings of this Committee before the end of the municipal year. They may need to change one or more of these to informal sessions, and arrange other visits, discussions etc if they are to make any viable recommendations to the PCT before summer 2008. There is also the possibility that the membership of this Committee might change before current members' input has been completed.
9. The remit and scope of any new review will need to be formally agreed at the February meeting of this Committee.

Corporate Priorities

10. Relevant to Corporate Priority 6 – Improve the health and lifestyles of the people who live in York, in particular among groups whose levels of health are the poorest.

Implications

11. There are no known Financial, HR, Equalities, Legal, Crime and Disorder, IT or other implications at this stage.

Risk Management

12. In compliance with the Councils risk management strategy. There are no risks associated with the recommendations of this report.

Recommendations

13. Members are asked to receive with thanks the contributions from David Geddes and Peter Brambleby.

14. Members are also asked to decide how this information can inform their forthcoming scrutiny review on alternative care pathways and agree the detail of this review. The Chairman to work with the Scrutiny Officer to produce a remit and scope to be approved at the next meeting of this Committee.

Reason: In order to carry out their duty to promote the health needs of the people they represent.

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Report Approved



Date 21/12/07

Specialist Implications Officer(s) *None*

Wards Affected:

All

For further information please contact the author of the report

Annexes

Annex A – Clinical Pathways and Referral Guide

Annex B – Briefing on North Yorkshire and York PCT's Individual Case Panel

Background Papers

None