
MEETING	HEALTH SCRUTINY COMMITTEE
DATE	7 JULY 2008
PRESENT	COUNCILLORS FRASER (CHAIR), ALEXANDER, AYRE (VICE-CHAIR), MOORE, WISEMAN AND SCOTT (SUB FOR CLLR DOUGLAS - JOINED THE MEETING AT 6.40PM)
APOLOGIES	COUNCILLORS DOUGLAS AND SUNDERLAND
IN ATTENDANCE	PATRICK CROWLEY – CHIEF EXECUTIVE OF THE YORK HOSPITALS NHS JAMES PLAYER – AGE CONCERN JOHN YATES – OLDER PEOPLE’S ASSEMBLY JACK ARCHER – OLDER PEOPLE’S ASSEMBLY ANNIE THOMPSON – EPILEPSY ACTION (NEWLY APPOINTED LINKS CO-ORDINATOR) AMANDA BROWN – NYYPCT GRAHAM PURDY - NYYPCT BILL HODSON – CYC

6. DECLARATIONS OF INTEREST

Members were invited to declare at this point in the meeting any personal or prejudicial interests they might have in the business on the agenda.

No interests were declared further to the standing personal, non-prejudicial interests declared at previous meetings and circulated with the agenda.

7. MINUTES

With reference to Minute 4 (Update on Establishing a LINK 2008/09) resolution (iii) the Chair confirmed that the North Bank Forum facilitated workshop was in the process of being organised by Nigel Burchell. In relation to resolution (iv) that he had received a helpful and informative briefing from the LGIU relating to overview and scrutiny and LINKs.

With reference to Minute 5 (Work Planning for Health Scrutiny 2008) the Scrutiny Officer reminded the Committee that Dr Lethem had made a presentation, at the informal training session on 27 June 2008, on work being carried out by the PCT on the prevention of falls (copy attached to the minutes). This had been included on the Committee’s work plan for September but as this had been covered by Dr Lethem it could now be removed.

RESOLVED: That the minutes of the last meeting of the Committee held on 16 June 2008 be approved and signed by the Chair as a correct record subject to the removal from

the Committee's work plan of receipt of a 'report from the PCT on falls prevention in September 2008'.

8. WELCOME

The Chair welcomed Patrick Crowley to the meeting, as the newly appointed Chief Executive of the York Hospitals NHS Trust based at York Hospital.

9. PUBLIC PARTICIPATION

It was reported that there had been one registrations to speak at the meeting under the Council's Public Participation Scheme from Mike Beckett, the newly appointed Director of York and District Mind.

He spoke on Agenda Item 5 the Dementia Review – Scoping Report and stated that he wished to support the review. He confirmed that he was delighted that it had been suggested that Mind should be chosen as one of the consultees for the proposed "evidence gathering day" on 1 September 2008. He circulated copies of a leaflet produced by York and District Mind concerning exercise and mood, which detailed the benefits of exercise to relieve anxiety and stress.

10. UPDATE ON DENTAL SERVICES

Consideration was given to an update report on the provision of NHS dental services in York. The report was part of ongoing consultation between Members and the various Health Trusts.

Members were reminded that at their meeting on 3 December 2007 they had requested the inclusion of the following information in future updates:

- Information from the Office of National Statistics on numbers of people who did not see a dentist at all.
- How long patients waited to be allocated an NHS dentist and how much additional capacity was being created as opposed to additional capacity being made available when patients moved on.
- A report back on progress with commissioning a Sunday morning emergency dental clinic.

Amanda Brown, Assistant Director of Commissioning and Service Development – PCT, attended the meeting and gave Members a short presentation on the provision of NHS Dental Services in York (copy attached to minutes).

The presentation related to the North Yorkshire and York commissioning plans. She reported that the Oral Health Commissioning Group had reviewed commissioning across North Yorkshire relative to population, density and deprivation. This information was then matched to numbers on the dental access database; the exercise had identified geographic areas where commissioned access was below average in England.

Points that she raised included:

- The maps detailed the existing contracted levels in North Yorkshire and these showed that the York area was generally well served;
- York had 4 units of dental activity per person commissioned;
- Provision was not as good west of the city and in the rural areas;
- People who worked in York but lived outside the city were taking up dental care in York;
- The PCT were looking to commission services in other areas to create capacity in York;
- Dental Access Database – over 2000 patients had been assigned to a dentist between September 2007 and May 2008, with a further 1200 being assigned since May;
- 65% of the population sought an NHS dentist with the remainder being split between private care and those using emergency services;
- Confirmed that the PCT had no records of how many patients were visiting private dentists;
- The out of hours dental service was not adequate in York, there was only a Saturday and Sunday morning service available but this was currently under review;
- Confirmed that the PCT hoped that patients would sign up with a dentist for preventative care rather than only using emergency services;
- A unit of dental activity was the contract currency with dentists (NHS treatment broken down into 3 bands 1 unit for examinations, x-rays, scale and polish, 2 units for fillings and 3 units for crowns and bridges);
- 2006/07 - 50% of contact work had not been completed. Some dentists had been asked to complete the work the following year and others had had the money clawed back;
- Patient's time on the waiting list had reduced; the original wait had been 6 months;
- Confirmed morale of dentists was pretty poor generally across the country.

Members made the following comments:

- There had been a downward trend in people accessing the NHS Information Centre since March 2007;
- Dentists income guarantee was to be lost in 2009 how would this be managed;
- Requested details of the Local Clinics network and the recommendation from the Select Committee that Consultation Committees should be established;
- Patient Charge Revenue questioned York's figures;
- Controls in place to prevent dental patients walking in off the street to register rather than adding their name to the waiting list. Felt that the figures of those patients added to the list and those assigned were not realistic;
- Concern at how the service could be expanded when there were no controls over dentists or incentives to retain them;

- There were insufficient dentists wanting to perform NHS work (75% of dentists under 25 years did not want to take on NHS work);
- Disappointment that the dental update information had been requested from the PCT some 7 months ago;
- Felt that dentists did not like the UDA system or the quality of work they had to perform;

- RESOLVED:
- (i) That the update and presentation from the PCT be noted;
 - (ii) That a further update on dental services in the York area be added to the work plan (date to be confirmed by the Chair);^{1.}
 - (iii) That written updates be provided by the PCT in advance of future meetings.^{2.}

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

Action Required

1. Further update on dental service be added to the Health Scrutiny Committee's work plan (date to be confirmed by the Chair). GR
2. Request PCT to provide written up date on dental service prior to the preparation of the agenda (see above). GR

11. DEMENTIA REVIEW - SCOPING REPORT

Members considered this scoping report which would look at the experience of older people with mental health problems, including their families and carers, who accessed general health services for secondary care in order to identify where improvements may be required.

It was agreed to defer further consideration as to whether to co-opt specialist members to the Committee for the duration of the review until the next meeting.

Consideration was given to inviting a representative of the North Bank Forum to the meeting. The Chair confirmed that Annie Thompson would not be taking up her post as the new LINK Co-ordinator until 28 July 2008 but that he would welcome her input in to the work of the Committee in the future. It was confirmed that, in the meantime, representatives of the disbanded Patients Involvement Forum would have input into this work.

- RESOLVED:
- (i) That approval be given to the proposed timescale and timetable for the dementia review;
 - (ii) That approval be given for the proposed consultation method as suggested in paragraphs 6-9 of the report;

- (iii) That further consideration be given to the appointment of 'specialist' members to be co-opted to the Committee for the duration of the review at the next meeting;¹.

REASON: To ensure compliance with scrutiny procedures, protocols and work plans.

Action Required

1.To consider who could be co-opted as a 'specialist' member on the Committee for the duration of the review. BH

S FRASER, Chair

[The meeting started at 6.00 pm and finished at 7.00 pm].

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Practice based Commissioning in York

Fri 27th June 2008

- PbC in a nutshell
- York Health Group
- Non-Elective Care
- Ebor Clinical Services
- Horizon Scanning

John Lethem Chair, York Health Group PbC Consortium

Practice based Commissioning

- “By devolving indicative budgets to practices that treat and refer patients, GPs and other primary care professionals are being encouraged to manage referrals and to commission and redesign services in a way that is more cost-effective and convenient for patients.”

**Outcome
For
Patient**

**Required
Mechanisms**

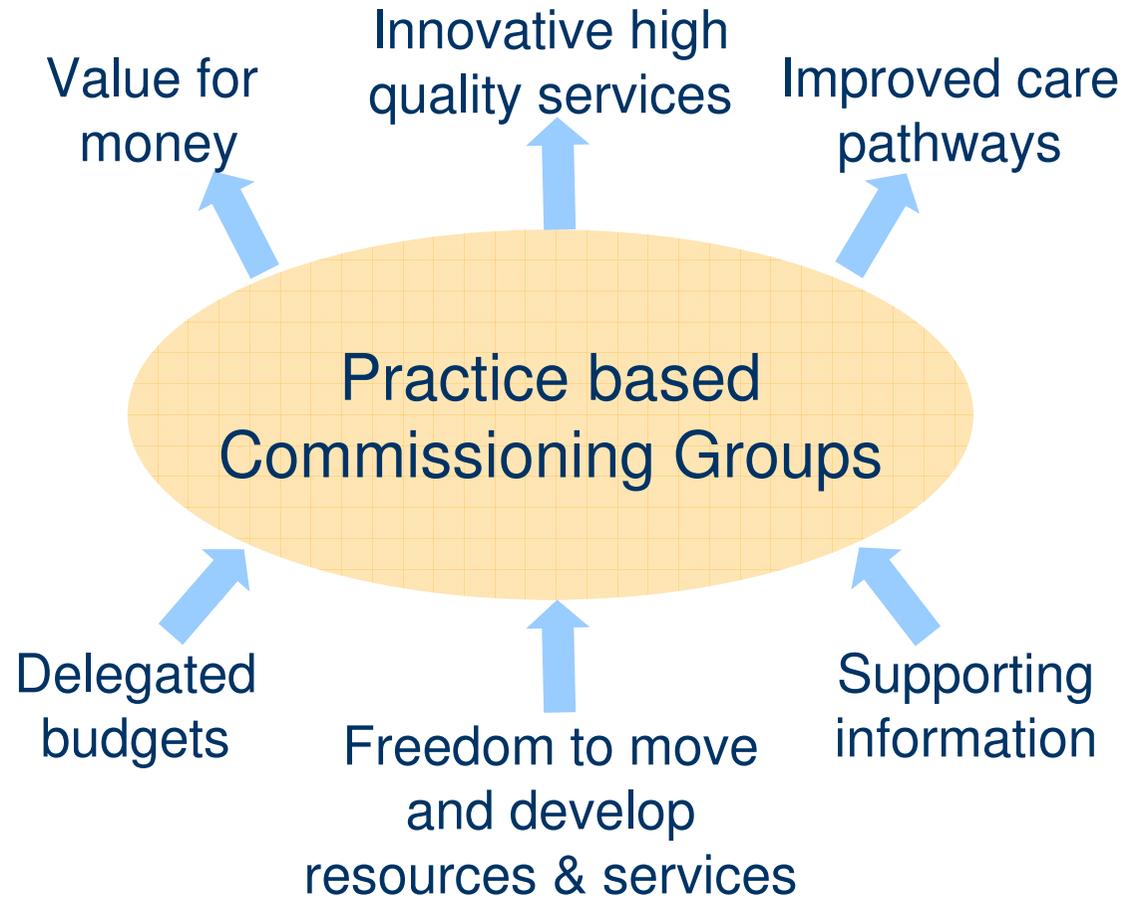
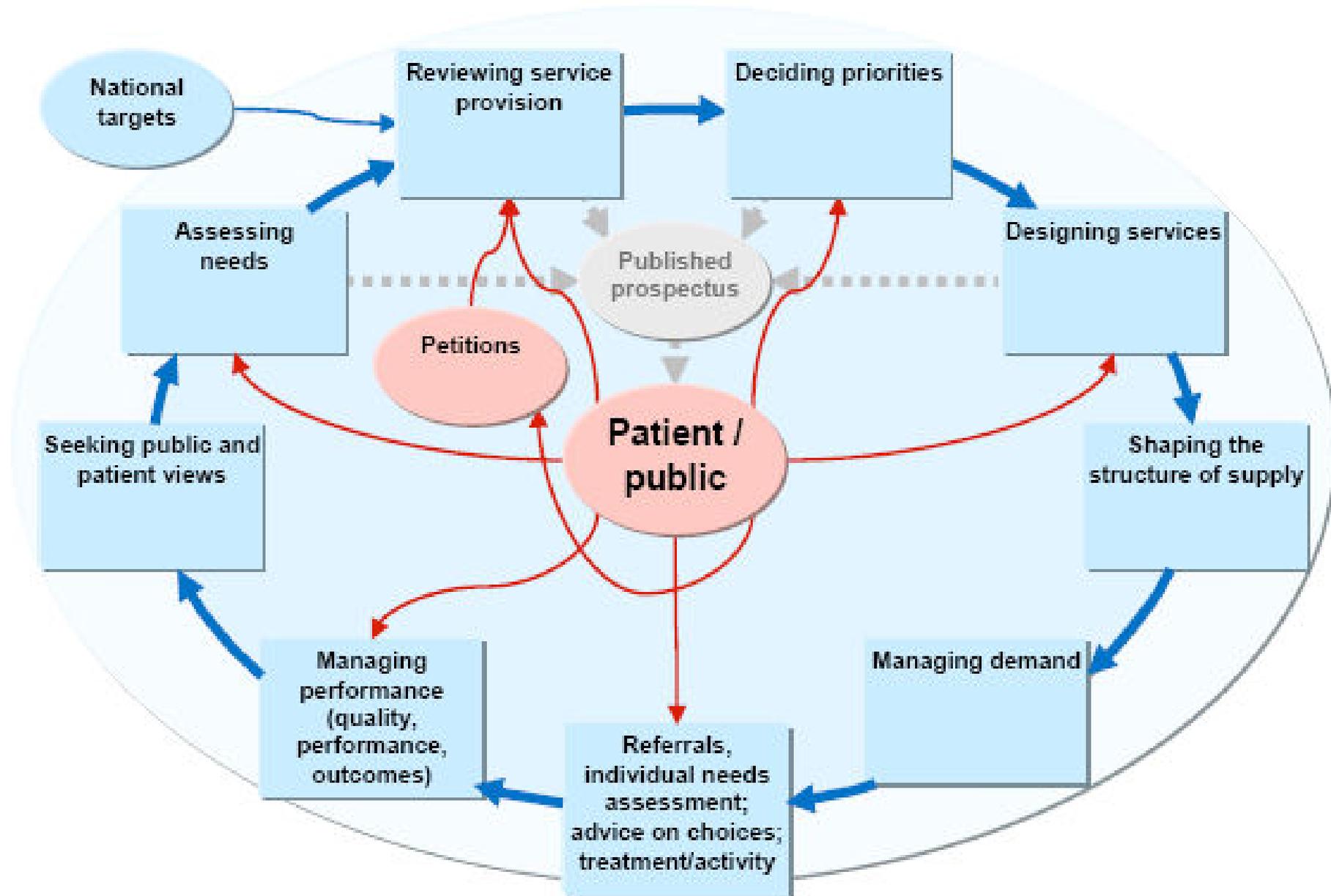


Figure 1: The commissioning cycle for health services



York Health Group

- 24 Practices
- 100+ GPs
- 220,000 Patients
- Management Board
- Consortium Agreement
- Cooperative, pooled resources, shared risk

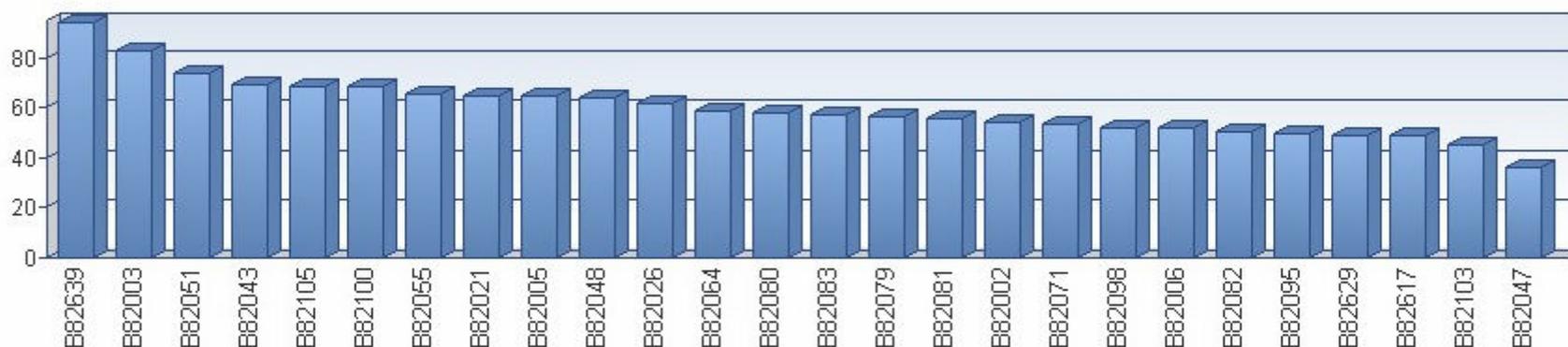
Incentive scheme / Commissioning plan

- Links with PCT financial recovery plan
- Care Pathway redesign, prioritise clin. Areas
- Working with secondary care colleagues
- Threshold document
- Combined cooperative work, pooling effort, resources & savings

Outpatient Attendances Activity by Practice

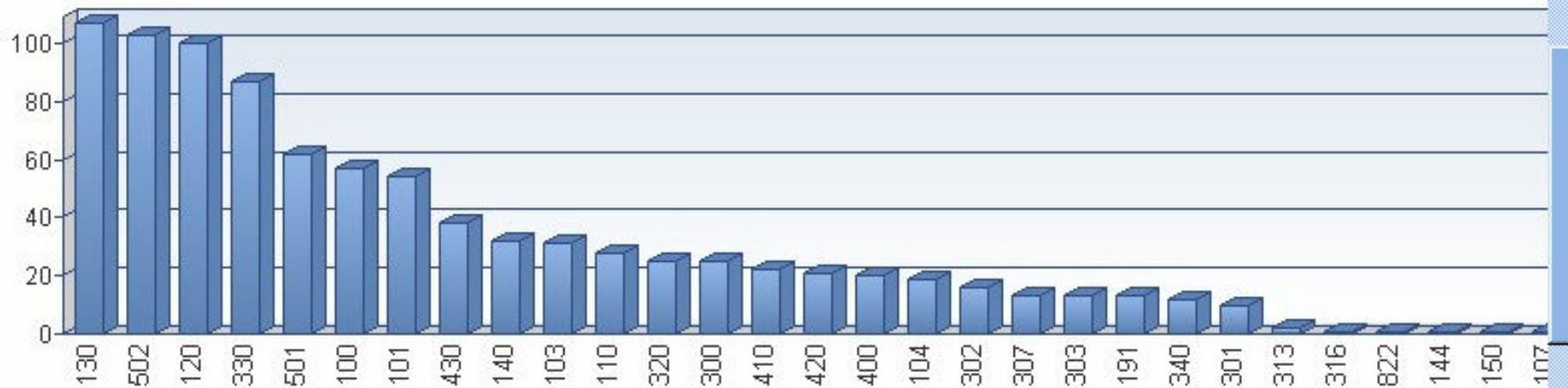
Location: Selby and York PCT (5E2)
 Locality: City of York (1)
 OPSClss: New Seen (OPSSEENN)

Year: 2007/08
 Drilldown to: GP
 Show by: Month
 Switch to: Activity



Code	Practice	Description	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total	List Size	Rate
B82639	Dr JA Boffa		3	7	1	-	-	-	-	-	-	-	-	-	11	117	94.01
B82003	Petergate Surgery		120	166	155	-	-	-	-	-	-	-	-	-	441	5310	83.05
B82051	Abbey Medical Group		223	274	268	-	-	-	-	-	-	-	-	-	765	10303	74.25
B82043	Minster Health		123	149	150	-	-	-	-	-	-	-	-	-	422	6054	69.70
B82105	Tadcaster Medical Centre		142	214	197	-	-	-	-	-	-	-	-	-	553	8048	68.71
B82100	Front Street Surgery		100	94	91	-	-	-	-	-	-	-	-	-	285	4171	68.32
B82055	Gale Farm Surgery		281	267	300	-	-	-	-	-	-	-	-	-	848	12887	65.80

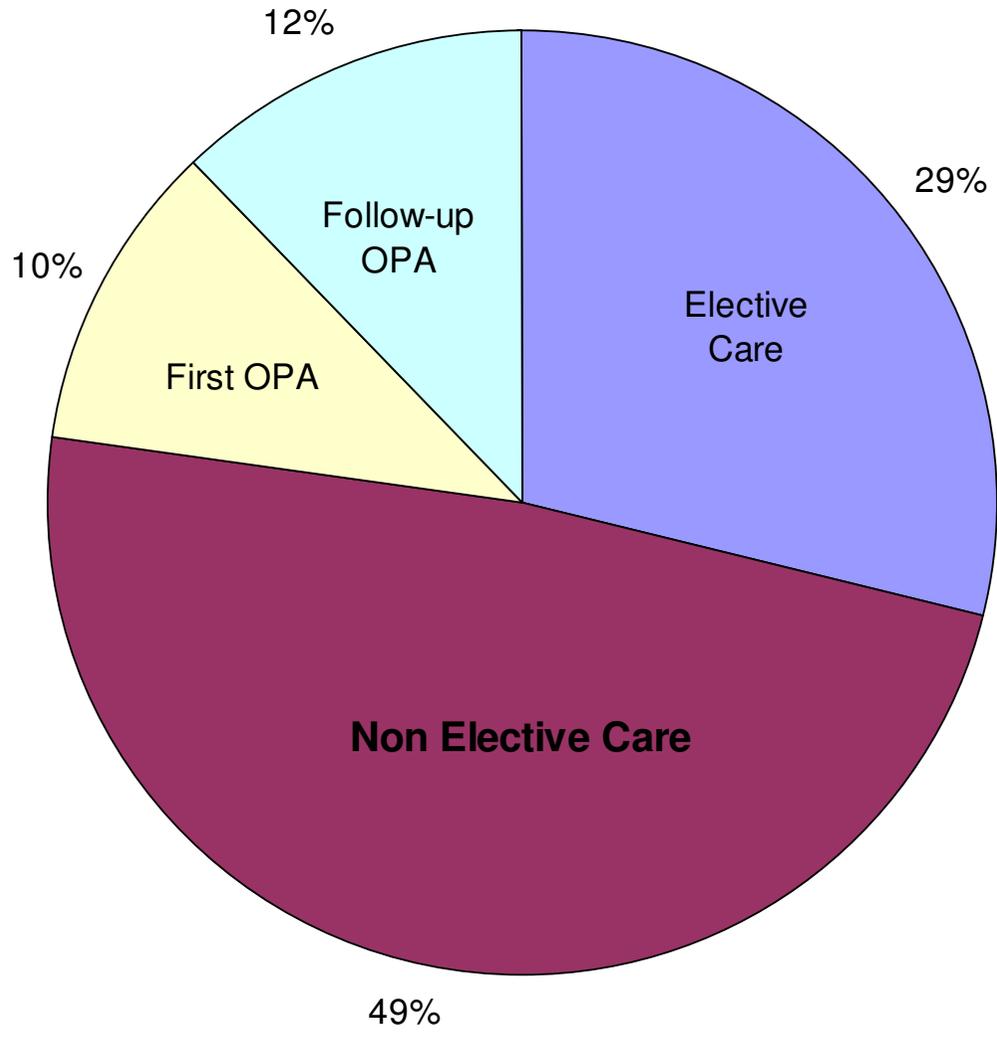
RetSource: Referral from a GP (U3)



Code	Specialty	Description	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
130	Ophthalmology		13	7	15	12	11	9	3	6	6	9	9	7
502	Gynaecology		5	11	13	8	4	11	8	8	6	11	10	8
120	Ear Nose & Throat		6	7	9	10	11	8	13	7	6	11	5	7
330	Dermatology		10	4	9	6	6	5	6	8	10	13	3	7
501	Obstetrics		5	3	3	9	6	5	4	4	5	11	3	4
100	General Surgery		9	1	5	1	4	3	4	1	4	10	7	8
101	Urology		3	6	5	5	4	5	5	5	6	6	3	1

Non- Elective Care

YHG Hospital Budget



Non Elective Care

- Emergency admissions
- OOH / A&E
- Long term conditions management
- Community Matrons & “case management”
- COPD
- Falls

Ebor Clinical Services

- Provider Group Developed by YHG
- Becoming Independent
- Company Limited by shares
- GP shareholders
- Providing services so far as commissioning "Pilots"
- Mutual cooperation with YHFT & consultants
- Likely to tender for future services

The Future ?

- PbC Better communication, coordination
- Improved Local Services & Health Economy
- Patient & Public involvement

- Plurality of Provider / APMS
- Tendering e.g MSK Services
- APMS "Health Service" in York (Darzi Polyclinic)
- Private companies Virgin Health, Assura
etc

Practice based Commissioning in York

Fri 27th June 2008

Questions ?

FALLS PREVENTION

FALLS PREVENTION

- COSTS
- Financial
- Mortality
- Carers
- Working days

FALLS PREVENTION

- What works ?
- Targeting those most at risk
- Bone Health
- Encouragement, enabling, enriching
- Integrated working
- Communication!, communication!, communication!
- Falls Practitioners

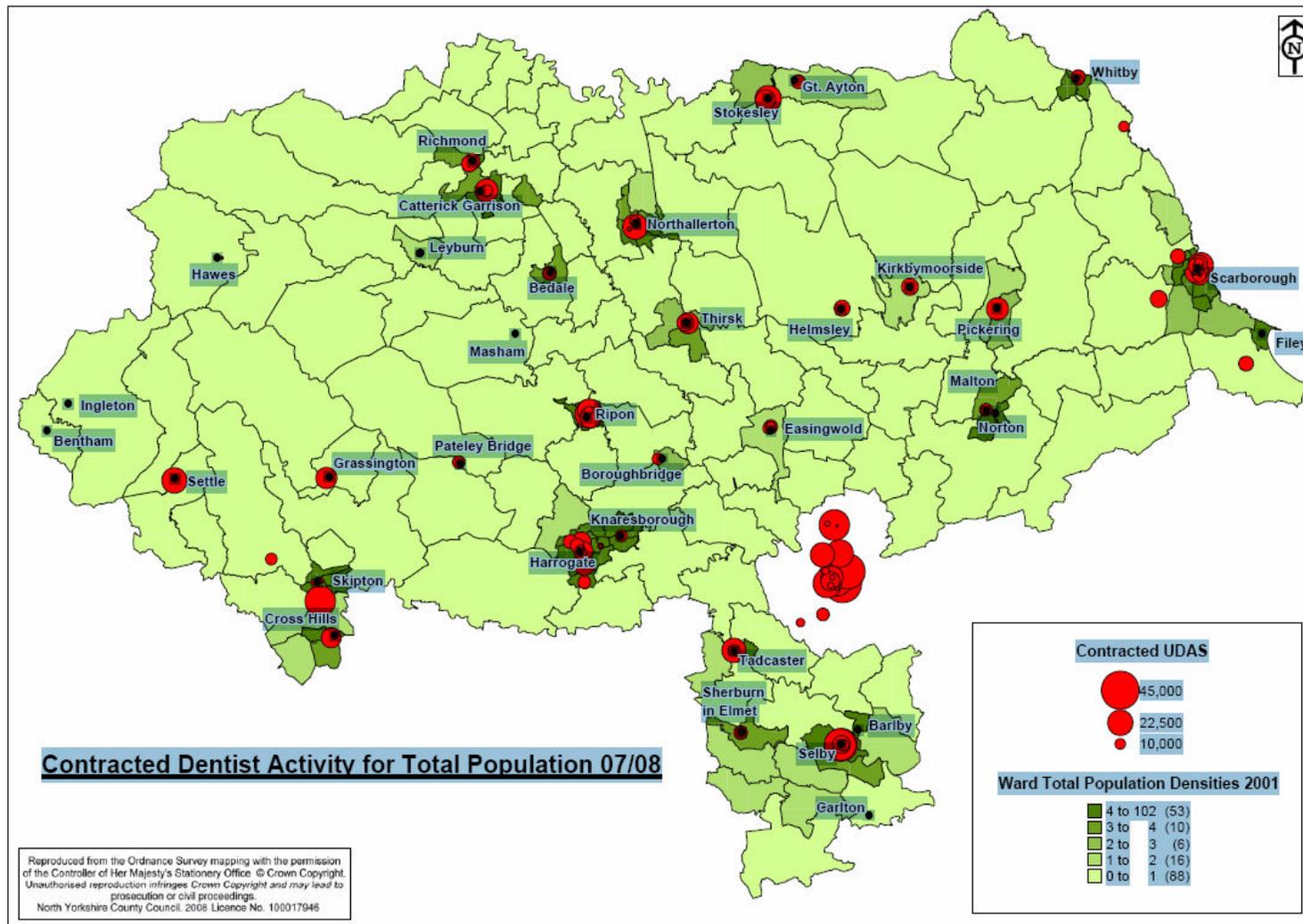
NYYYPCT Dental Update

Amanda Brown Assistant Director
of Commissioning and Service
Development

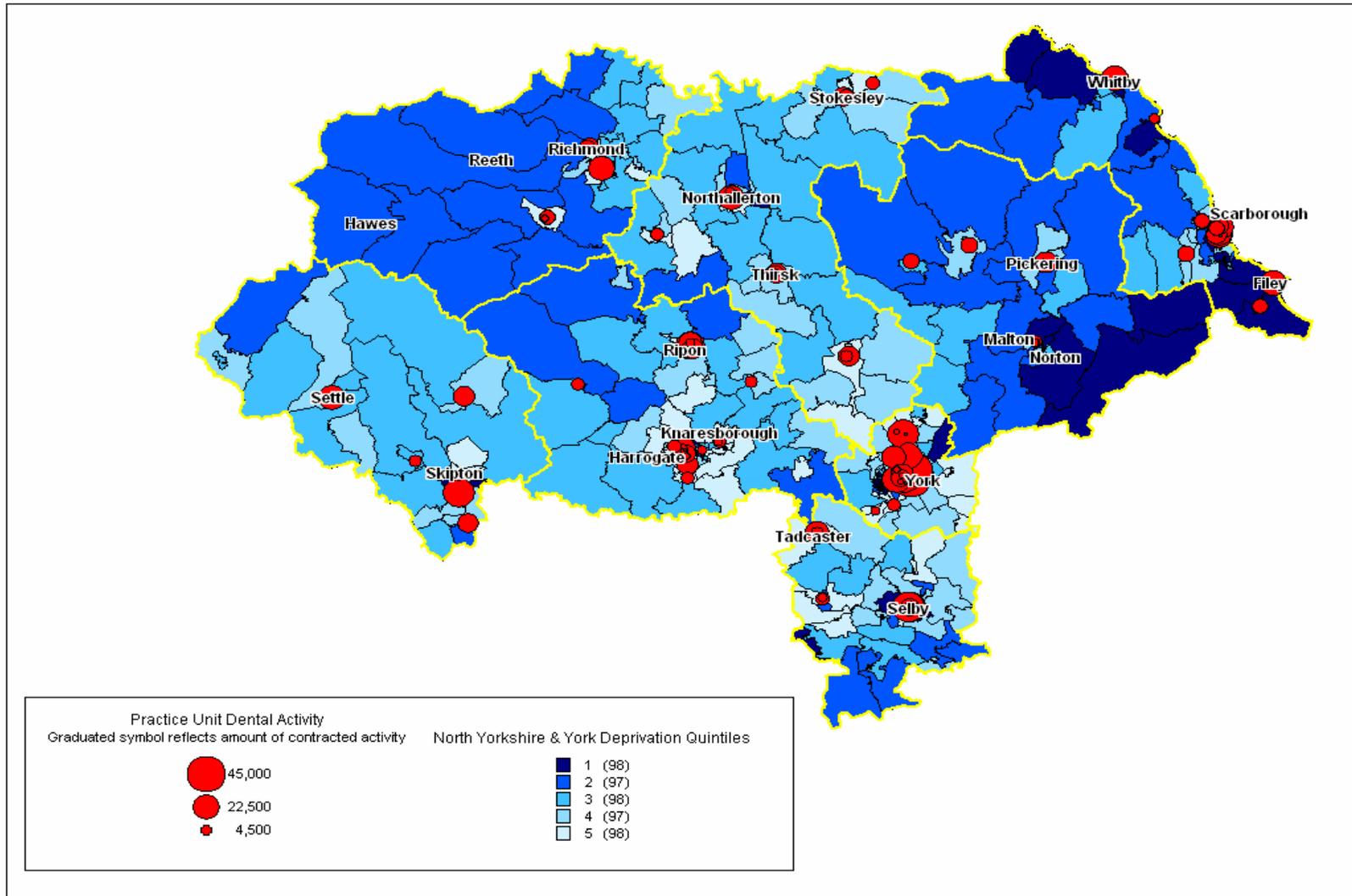
Commissioning Plans

- The Oral Health Commissioning Group has reviewed Commissioning across North Yorkshire relative to population density and deprivation.
- This was matched to the numbers on dental access database.
- The exercise identified geographic areas where commissioned access was below average with England.

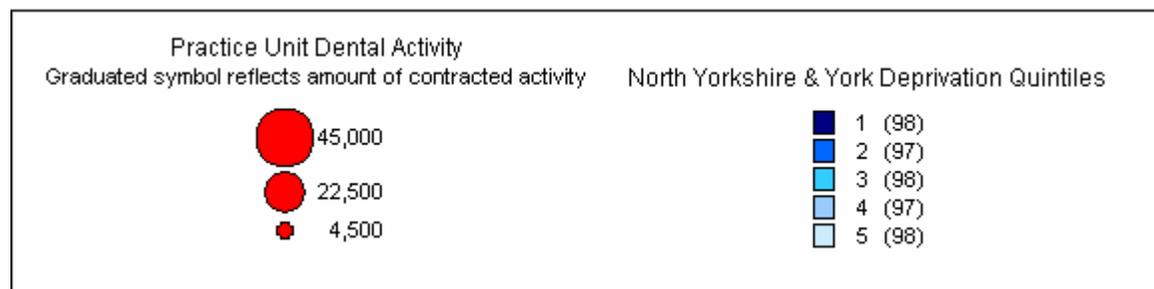
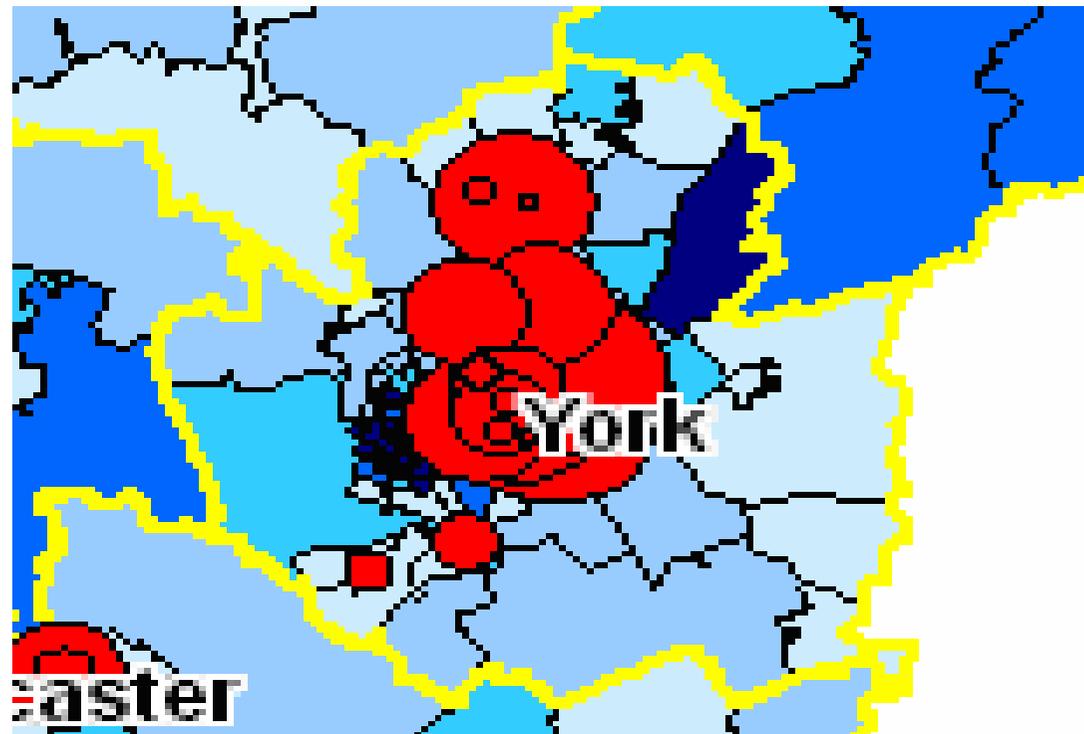
Overview of Current NHS Dental Allocation in North Yorkshire



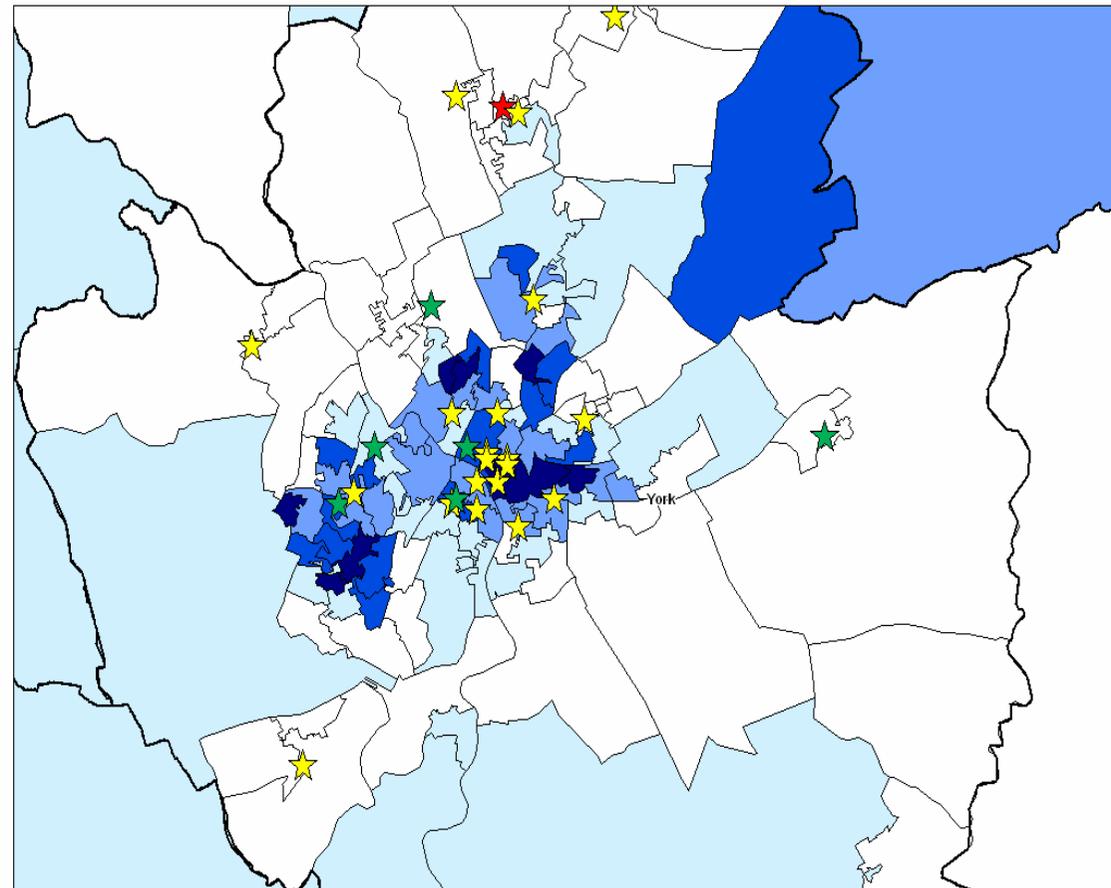
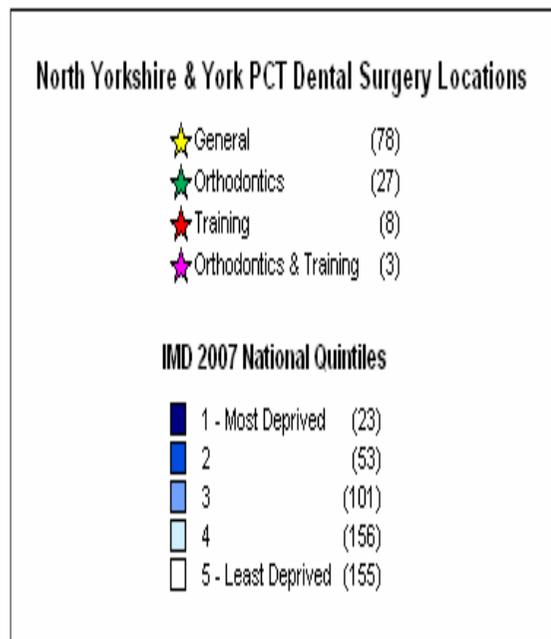
Contracted UDAs by Deprivation Quintiles



Detail of York UDAs



Dental Practices in York by Type Against IMD



- The target areas for Access are:
 - Whitby
 - Pickering, Malton and Norton
 - Selby and Tadcaster
 - Rural Harrogate
 - Rural areas adjacent to Catterick.
- Additional activity in areas of greatest deprivation includes areas in & around York
- The additional UDAs will be offered through a procurement process.

NHS Dental Access

York area From Sept 2007 to May 2008:

Area	Total number of patients added to data base	Assigned to dentist	Unassigned and remaining on access data base
York	6,417	2,038	4,379

Out of Hours Provision in North Yorkshire

- Provided by practices in the following locations:
 - Saturday AM: Scarborough, York and Skipton
 - Sunday AM: York, Ripon and Catterick.
- Although we have increased the weekend provision, demand is still high and we are currently reviewing the service offered.

Accessing the NHS Dental Waiting List

- Patients requiring NHS treatment can
 - Phone NYY Dental line on 01904 724107
 - Web site: www.nyypct.nhs.uk (register on line)
 - For Urgent or emergency care:
 - **NHS Direct 0845 46 47**