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MEETING	HEALTH OVERVIEW & SCRUTINY COMMITTEE
DATE	18 JANUARY 2012
PRESENT	COUNCILLORS FUNNELL (CHAIR), DOUGHTY (VICE-CHAIR), HODGSON, RICHARDSON, RICHES (SUBSTITUTE FOR COUNCILLOR FITZPATRICK) AND MCILVEEN (SUBSTITUTE FOR COUNCILLOR BOYCE)
APOLOGIES	COUNCILLORS BOYCE, CUTHBERTSON & FITZPATRICK
IN ATTENDANCE	COUNCILLOR JEFFRIES, JOHN YATES (YORK OLDER PEOPLE'S ASSEMBLY), GEORGE WOOD (YORK OLDER PEOPLE'S ASSEMBLY), DAVID SMITH (YORK MIND), JOHN BURGESS (YORK MENTAL HEALTH FORUM), CATHERINE MCGOVERN( COMMISSIONING MANAGER-CYC), ANNIE THOMPSON (YORK LINKS), JOHN BETTRIDGE (CHAIR OF YORK MENTAL HEALTH PARTNERSHIP), PHILIP CROWE (CARER'S GROUP, CLIFTON HOSPITAL), JIM KHAMBATTA (SENIOR COMMISSIONING MANAGER, NHS NORTH YORKSHIRE AND YORK), MICHELE MORAN (DEPUTY CHIEF EXECUTIVE, LEEDS PARTNERSHIP NHS FOUNDATION TRUST), PAUL MURPHY (ASSISTANT DIRECTOR, INTEGRATED COMMISSIONING-CYC), JOHN CLARE (ASSOCIATE DIRECTOR FOR MENTAL HEALTH, NORTH YORKSHIRE AND YORK NHS PRIMARY CARE TRUST), KATHY CLARK (INTERIM ASSISTANT DIRECTOR FOR ASSESSMENT AND SAFEGUARDING- CYC), ALAN ROSE (CHAIRMAN OF YORK HOSPITAL), ANGELA HARRISON (CHIEF EXECUTIVE, YORK COUNCIL FOR VOLUNTARY SERVICES) ,

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## 36. DECLARATIONS OF INTEREST

At this point in the meeting Members were asked to declare any personal or prejudicial interests they might have had in the business in addition to their standing declarations.

Councillor Doughty declared his standing personal and non prejudicial interest in Agenda Items 3 and 4 (Briefing from the Leeds Partnership Foundation Trust on Proposed Changes to Mental Health Services in York) and (Redesign of Acute Care Pathway in York (including closure of Ward 3 at Bootham Park Hospital)) due to his partner working for York and District MIND and his occasional volunteer work for them.

Councillor Funnell declared her personal and non prejudicial interest standing declaration as a lay member of the General Pharmaceutical Council.

Councillor Hodgson declared a personal and non prejudicial interest in the general remit of the Committee as a member of UNISON.

Councillor McIlveen declared a personal and non prejudicial interest in Agenda Item 5 (Briefing on the Major Trauma Network) due to his son's work on an acute trauma ward.

Councillor Richardson declared a number of personal and non prejudicial interests in the general remit of the Committee, which he wished to be added as standing declarations. These were; as a frequent user of Yorkshire Ambulance Service due to ongoing treatment at Leeds Pain Management Unit, as a member of Haxby Medical Centre and due to his niece's work as a staff district nurse for NHS North Yorkshire and York.

Councillor Riches declared several personal and prejudicial interests in the general remit of the Committee such as; as an appointee to the Governing Body of York Hospital, due to his membership and employment by UNISON and also membership of UNITE.

No other interests were declared.

### **37. PUBLIC PARTICIPATION**

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

A representative of York Older People's Assembly (OPA) spoke on Agenda Item 5 (Briefing on the Major Trauma Network). It was reported that he welcomed the proposed rationalisation and improvements to Major Trauma Centres in Leeds and Hull, but shared a number of concerns including;

- The successful function of the centres would be highly dependent on efficient and appropriate diagnosis along with transport from the accident scene.
- In relation to the proposal from The Yorkshire Ambulance Service for an Enhanced Care Team in the pre hospital transfer phase, it would be critical that training be carried out in order to match up to the level and expertise of the trained doctors who currently work with the Air Ambulance Team.

He also raised comments on Agenda Item 8 (Work Plan) and the forthcoming attendance of NHS North Yorkshire and York in relation to Voluntary Sector Funding.

### **38. BRIEFING FROM THE LEEDS PARTNERSHIPS FOUNDATION TRUST ON PROPOSED CHANGES TO MENTAL HEALTH SERVICES IN YORK**

Members received a briefing on proposed changes to Mental Health services in York. The Chief Operating Officer and Deputy Chief Executive/Chief Nurse from Leeds Partnerships NHS Foundation Trust attended the meeting and introduced the new organisation. A brief summary of the proposed changes was included in the agenda papers. The briefing was also accompanied by slides from a PowerPoint presentation. These were subsequently attached to the agenda, which was republished after the meeting.

Members were informed about what a NHS Foundation Trust was, and subsequently the work of the Leeds Partnerships NHS Foundation Trust. It was noted that they had recently merged with NHS North Yorkshire and York, to become the Leeds Partnerships NHS Foundation Trust. The Partnerships

Foundation Trust was involved with providing Mental Health services for the NHS in York.

Some Members asked questions about the Partnerships Trust's role in talking therapy and counselling services, given both of these services had particularly long waiting lists, and what plans they had in the development of these services.

It was reported that the level of development of the provided services in the Trust would be dependent primarily on financial constraints. Additionally, national targets for Mental Health referrals were still being used to measure progress, and that local targets were yet to be set as the complete transfer of management of services had not been transferred to the Trust at present.

Additionally, it was noted that both child and adult Mental Health services in York would be provided by the Trust through York CAMHS (Child and Adolescent Mental Health Services).

RESOLVED: That the report be noted.

REASON: In order for the Committee to be updated on the proposed changes to the delivery of Mental Health Services in the City.

**39. REDESIGN OF ACUTE CARE PATHWAY IN YORK  
(INCLUDING CLOSURE OF WARD 3 AT BOOTHAM PARK  
HOSPITAL)**

Members had received a report in the agenda papers from the General Manager, Forensic, Adult & Specialist Mental Health Services, NHS North Yorkshire and York regarding the redesign of the acute care pathway in York and closure of Ward 3 at Bootham Park Hospital.

The Associate Director of Mental Health for North Yorkshire and York Primary Care Trust attended the meeting and gave some background to the reasons for the closure of Ward 3 and answered Members' questions.

It was reported that due to the merger of services with Leeds through the creation of the Leeds and York Partnerships Foundation Trust that patients would have the capacity to

access a psychiatric Intensive Care Unit in Leeds, which Ward 3 had never had the resources to offer. It was also noted that the closure had been proposed due to the increased tendency to support patients at home through a community based service.

Some Members raised concerns, that the reconfiguration of services along with long term budget constraints could negatively affect current stretched funding for Mental Health services in the city.

In response to a question about a negative effect that the changes could have on the resources provided for the care pathway, the Associate Director for Mental Health for NHS North Yorkshire and York stated that involvement in the Leeds and York Partnerships Trust would allow for services to be offered through a Mental Health and Learning Disabilities provider, rather than in a larger organisation with numerous other priorities such as a Primary Care Trust.

**RESOLVED:** That the report be noted.

**REASON:** To inform the Committee of the proposed redevelopments at Bootham Park Hospital and with Forensic, Adult & Specialist Mental Health Services in York.

#### **40. BRIEFING ON THE MAJOR TRAUMA NETWORK**

Members received a report which informed them of current service provision and proposed Major Trauma Networks (MTN) arrangements for Major Trauma events in York (and surrounding areas).

The Senior Commissioning Manager for NHS North Yorkshire and York explained to Members that as a Trauma Unit, York Hospital would stretch across two MTN's (and therefore different Emergency Departments). As a result of this there needed to be better co-ordination of current service rather than re-configuration.

One Member asked a question relating to the proposals focused on the provision of transportation for patients needing urgent care.

The Senior Commissioning Manager responded that a 45 minute response threshold existed, as to the location of the hospital which would admit the patient. He gave an example that if a major trauma event took place in York, but Leeds was 45 minutes away, that patient would travel to be treated at the Major Trauma Centre in Leeds.

Members expressed the need for data to be collected and presented to them about where major trauma events tended to occur, so that perhaps more trained staff could be based around the hotspots.

A representative from York Older People's Assembly stated that it was important that the level of care skills that ground staff had in comparison to those Air Ambulances must be the same.

Members noted all the comments raised and stated that they wished to receive a further progress report at a future meeting of the Committee. The Senior Commissioning Manager added that a member of the Yorkshire Ambulance Service would attend alongside him when this report would be considered. It was reported that the Scrutiny Officer would liaise with the Senior Commissioning Manager in order to arrange a date for consideration of an update report.

- RESOLVED:
- (i) That the report be noted.
  - (ii) That a further report on the progress of the implementation of Major Trauma Networks be received and considered by the Committee at a later date.

#### **41. DEMENTIA STRATEGY AND ACTION PLAN**

Members considered a report which appraised them of progress towards the National Dementia Strategy and the local plan and activities to deliver the Strategy in York.

The Chair of the York Mental Health Partnership and Modernisation Board's Dementia Working Group was in attendance at the meeting and he talked about progress and the role that other partnerships had played to deliver services to dementia sufferers in York.

He informed the Committee that an additional report would be produced by the Dementia Working Group to coincide with National Dementia Week in April or May of this year. It was also reported that the Joseph Rowntree Foundation would fund a study by a series of consultants to look at how York can be made a more Dementia friendly city. He highlighted that progress should not always be measured around the number of services commissioned for dementia sufferers, but also smaller improvements such as additional training and motivation of staff who deal with dementia sufferers.

Members expressed concerns that some patients who had been admitted into hospital for a variety of reasons, but also had slight dementia were not being identified. They added that they felt it was important for nurses to be trained in sensitivity and to listen to carers.

- RESOLVED:
- (i) That the report be noted.
  - (ii) That the North Yorkshire and York Dementia Strategy be noted.
  - (iii) That the Executive Summary of the York Dementia Working Group report be noted.
  - (iv) That York as a signatory to the National Dementia Declaration be noted.
  - (v) That the priorities identified in the local action plan be noted.

REASON: To update the Committee on progress towards the delivery of the National Dementia Strategy in York.

#### **42. UPDATE ON THE SHADOW HEALTH AND WELLBEING BOARD**

Members received a report which updated them on progress towards the establishment of York's Health and Wellbeing Board (H&WB), since the last report to the Committee in September 2011.

It was reported that the Cabinet had accepted a recommendation from the Committee for three elected Members to join the Health and Wellbeing Board and that following two meetings in Shadow form, the Health and Wellbeing Board would become a committee of the Council with meetings in public from May 2012.

The Committee was informed that the primary remit of the Health and Wellbeing Board was to address the health needs of York's population and to write a Health and Wellbeing Strategy for York. Members of the Health Overview and Scrutiny Committee would then scrutinise how services which delivered the strategy functioned.

Some Members made comments about the membership of the Health and Wellbeing Board and expressed concerns that certain groups, such as hospices, did not appear.

In response, Officers informed the Committee that there had been a set number of statutory appointees to the Board and that this was due to legislation surrounding the establishment of a Health and Wellbeing Board being created at a national level.

Further concerns were made about the make up of the Board including;

- That there was limited representation for members of the public, as there was only one public appointee.
- That there appeared to be more of a slant towards Health rather than Wellbeing through the majority of appointees being from the Health Care sector.
- That the Board Members would have their own budgets to balance and so might not represent all the concerns of York's population.

RESOLVED: That the report be noted.

REASON: To update the Committee on the establishment of the Health and Wellbeing Board.



**43. WORK PLAN**

Members considered a report which presented them with the Committee's work plan for the forthcoming year.

- RESOLVED:
- (i) That the work plan be noted.
  - (ii) That a progress report on the Major Trauma Network arrangements for Major Trauma events in York and the surrounding area be received by the Committee at a future meeting.<sup>1</sup>
  - (iii) That a further report on the Health and Wellbeing Board be brought back to the Committee in approximately 6 months time.

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

Action Required

1. To update the Committee's Work Plan

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Councillor C Funnell, Chair

[The meeting started at 5.05 pm and finished at 6.45 pm].