HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE 28th August, 2012

PRESENT – Councillor Newall (in the Chair); Councillors Francis, Macnab, Nutt, E. A. Richmond, S. Richmond, H. Scott and J. Taylor. (9)

APOLOGIES – Councillor Donoghue. (1)

ABSENT – Councillors I. Haszeldine and Regan. (2)

ALSO IN ATTENDANCE – Councillor Copeland.

OFFICERS IN ATTENDANCE – Chris Sivers, Assistant Director of Development and Commissioning.

EXTERNAL REPRESENTATIVES – Miriam Davidson, Director of Public Health, Mary Bewley, Head of Communications and Involvement, Berenice Groves, Programme Director NHS 111 Service North East (Deputy Director Unplanned Care) NHS County Durham and Darlington; Joanne Johnston, Head of Unscheduled Care, Edmund Lovell, Associate Director of Marketing and Communications, County Durham and Darlington NHS Foundation Trust, Sarah Callaghan, Planning Manager, Tees, Esk and Wear Valleys NHS Foundation Trust and Andrea Goldie, Diane Lax and Michelle Thompson, Darlington LINK.

HP11. DECLARATION OF INTERESTS – Councillor Newall declared a personal interest in respect of HP22. below as a Darzi Practice patient.

HP12. MINUTES – Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee on 12th June 2012.

RESOLVED – That the Minutes be approved as a correct records.

HP13. NHS AND PARTNERS UPDATE – The Associate Director of Marketing and Communications, County Durham and Darlington NHS Foundation Trust, Edmund Lovell reported that the Trust Annual General Meeting was taking place on Wednesday, 12th September 2012 at 5.30pm in the Dolphin Centre. It was noted that Michael Wright has been appointed as the new Director of Nursing and it was hoped he would take up his position towards the end of the year. In the interim, Diane Murphy would continue to be Acting Director of Nursing before taking her place in a senior clinical role. The Trust are also intending to advertise for a new Medical Director and Director of Finance.

Mr Lovell also reminded Members about the Women and Children's workshop taking place on 18th and 19th September 2012 and invited Members to attend, advising that the Trust has been in discussions with NHS York and North Yorkshire about the maternity and children's services at the Friarage Hospital and would report more detail back to Members in due course. With regards to the overnight Urgent Care services being transferred from Dr Piper House to Darlington Memorial Hospital (DMH) Mr Lovell made reference the recent articles in the Northern Echo reassuring Members that the Trust

would continue to work with the media to avoid mixed message being sent out and confusion occurring.

The Head of Communications and Involvement, NHS County Durham and Darlington, Mary Bewley, reported that Patient and Public Involvement Engagement Group and considering a draft Strategy to be put in place to support communication and engagement for the future and offered to share the document with the Committee once agreed.

The Planning Manager, Tees, Esk and Wear Valleys NHS Foundation Trust, Sarah Callaghan, reported that the Trusts bid to the national programme Improving Access to Psychological Therapies children's services has been successful and staff were being upskilled through an accredited university programme to enable them to deliver an extended range of therapies. She also reported that the tender for inpatients services for the military had been submitted and that the decision would be made on 24th September 2012. In response to a question from a Member it was agreed that the Trust would report back the assessment process for looked after children being referred from Children and Adolescent Mental Health Services to Adult Services.

The Director of Public Health, Miriam Davidson updated the meeting following the Advisory Committee on Resource Allocation (ACRA) Formula Consultation and expressed concerns that have been shared across the North East based on the proposed formula and the adverse impact on the public health funds it would have. The proposed formula would see ten out of the twelve Local Authorities receiving a lower budget and Darlington potentially losing up to 26 per cent of its current funding. The Directors of Public Health across the North East have suggested an alternative formula which would see a maintenance of the current public health allocation and Dr Stephen Lorrimer was currently lobbying Central Government to reconsider the proposed formula. Members were advised that the health premium figure was still not clear and the Director was unsure when it would be.

Mrs Davidson reported that negations were underway with Officers from the Clinical Commissioning Group developing its 'core offer' and understanding the services that they will require from the public health team in the future.

The Assistant Director of Development and Commissioning, Chris Sivers provided an overview of the issues discussed at the last meeting of the Shadow Health and Well Being Board held on 17th July 2012. Items discussed included One Darlington: Perfectly Placed Delivery Strategy, Joint Communication and Engagement Strategy, Darlington Local Involvement Network (LINk) – The Value of Volunteers and 'Healthy Lives, Healthy People' Advisory Committee on Resource Allocation Public Health Funding. Ms Sivers highlighted a new piece of work being undertaken in respect of Long Terms Condition working along similar processes as the successful Dementia Collaborative with all respective NHS partners.

RESOLVED – That the updates be noted.

HP14. WORK PROGRAMME 2012/13 – The Director of Resources submitted a report (previously circulated) requesting that further consideration be given to the previously approved work programme of this Scrutiny Committee for the Municipal Year 2012/13.

In addition to the previously approved Work Programme, Members were requested to give consideration to undertaking work in relation to Overview of Partnerships, One Darlington Perfectly Placed: Delivery Strategy, North East Primary Care Services Agency and Urgent Care Integration and suggested Terms of Reference for those pieces of work where appended to the submitted report. Members were also requested to give consideration to the two previously established Task and Finish Review Groups in relation to Urgent Care Centre and Accident and Emergency/Urgent Care being disbanded and replaced by an Urgent Care Task and Finish Review Group.

The Chair made reference to the Quad of Aims that was submitted to Monitoring and Co-Ordination Group for consideration by Councillors Macnab and H. Scott and the recent briefing with Dr Landes which discussed all aspects of oral health care and hygiene. The Chair suggested that if the Members were not satisfied that the issues outlined in the Quad of Aims had been addressed that the matter ought to be referred to the Children and Young People Scrutiny Committee for further scrutiny of the barriers to children assessing dental treatment. The Chair also reported that Monitoring and Co-Ordination Group have given approval to the Committee undertaking a piece of work in respect of Chronic Obstructive Pulmonary Disease (COPD) and a meeting would be arranged in due course.

RESOLVED – (a) That the Work Programme be noted;

- (b) That the Terms of Reference in relation to Overview of Partnerships, One Darlington Perfectly Placed: Delivery Strategy, North East Primary Care Services Agency and Urgent Care Integration be approved;
- (c) That the two previously established Task and Finish Review Groups in relation to Urgent Care Centre and Accident and Emergency/Urgent Care be disbanded and be replaced by an Urgent Care Task and Finish Review Group; and
- (d) That the submitted Terms of Reference in relation to the Urgent Care Task and Finish Review Group be approved and Councillor Newall be appointed as Chair of that Task and Finish Review Group.
- (e) That the Quad of Aims in relation to Oral Health in respect of Children and Young people be forwarded to Children and Young People Scrutiny Committee for consideration.

HP15. NORTH EAST PRIMARY CARE SERVICES AGENCY – The Assistant Director of North East Primary Care Services (NEPCSA) submitted a presentation (slides previously circulated), providing Members with an overview of the NEPCSA explaining that it was established in December 2010 and identified the structure of the organisation.

The Chair expressed her extreme disappointment that at very short the Assistant Director was unable to attend the Committees meeting and that no representative was sent in her place.

RESOLVED – (a) That a letter be sent to NEPCSA expressing the Committee's disappointment that no representative was available to attend the meeting; and

(b) That a further invitation be extended to NEPCSA to send a representative to deliver an updated presentation at the Committee's next meeting scheduled to be held on 23rd October 2012.

HP16. PARTNERSHIPS IN DARLINGTON – The Assistant Director of Development and Commissioning introduced a powerpoint presentation (previously circulated) informing Members of Partnerships arrangements in Darlington and specifically focussed on Darlington Partnership. The Assistant Director reminded Members of the history of Darlington Partnership, the most recent review and explained the current status. Darlington Partnership has been revitalised and its focus is to champion and engender effective partnership working in Darlington, to ensure there is a sharp focus on a small number of critical priorities, to ensure there is a cross sector collective responsibility for addressing priorities, to promote efficiency and collaboration and to be the home of innovation. The role of the Board continues to ensure the Strategy for Darlington, One Darlington: Perfectly Placed is being addressed, to agree a framework which ensures any plans developed contribute to the vision and priorities of the Partnership, to support those responsible for delivering outcomes, to ensure sectors come together to plan and manage actions to address the One Darlington: Perfectly Placed priorities.

The Action Priorities for this year were outlined in respect of alcohol, youth employment opportunities and ageing. It was explained that there are be six operational groups and leads in relation to Community Safety, Children and Young People, Health and Well Being, Economic Growth, One Darlington and Creative Darlington. The operational leads would present annually to the Board how they will organise their work stream and address involving a wider group of individuals, co-ordination with other groups, transparency in decision making and resources.

Members were particularly interested in the Community Workstream given their recent involvement and opinions were presented following the first briefing that was held in July 2012.

Members agreed that there was genuine frustration about the community representatives on the Partnership Board and noted that a process was being developed to address those concerns.

Discussion ensued as to Darlington Partnership membership does not include Schools/Academy's; how Darlington Partnership is taking into account Neighbourhood Planning under the Localism Act and whether Members could raise agenda items for consideration at Board meetings. Members queried the successes of the Darlington Partnership and how valuable the Partnership was and asked for examples of positive outcomes.

Councillor H. Scott spoke as a member of the Board acknowledging that the meetings of the Board were 'business like' and that the agendas were long and time limited but reported that the Private Sector relationships have improved in the recent years which was exceptionally positive.

RESOLVED – (a) That the presentation be noted; and

(b) That a report be brought to Committee's next meeting scheduled to be held on 23rd October 2012 describing to tangible positive examples of how Darlington Partnership has worked and made a difference to Darlington residents.

HP17. ONE DARLINGTON: PERFECTLY PLACE – A STRATEGY FOR IMPROVED WELL BEING – The Assistant Director of Development and Commissioning submitted a report (previously circulated) asking Members to consider the draft One Darlington: Perfectly Placed Delivery Strategy for Improved Well Being.

The Assistant Director explained that Health and Social Care Act 2012 requires Local Authorities through Health and Well Being Boards to prepare a Health and Well Being Strategy based on the Joint Strategic Needs Assessment. It also provides the power for Health and Well Being Boards to look more broadly than health and social care provision and to consider the wider determinants of health including housing, employment, education, skills, leisure and the environment. In Darlington, there has been a focus on the wider interpretation of health in the development of the Strategy which continues the vision and approach adopted within the previous Sustainable Community Strategy (SCS). The Strategy, which is tailored to adhere to draft guidance issued by the Department of Health, continues the branding of the SCS and its two priorities.

Members were interested to note that the development of the One Darlington: Perfectly Placed Delivery Strategy involved four Partnership Assemblies which were hosted in April/May 2012. They were attended by over one hundred individuals representing the following sectors/organisations: Public Health, Borough Council officers and Members, Primary Care Trust, Clinical Commissioning Group, NHS Foundation Trusts, Police Constabulary and Police Authority, Third Sector organisations, Schools and Colleges, Fire and Rescue and housing providers.

RESOLVED – That a separate meeting be arranged to enable Members of the Scrutiny Committee to consider the One Darlington: Perfectly Placed Delivery Strategy in more detail.

HP18. EMERGENCY DEPARTMENT/URGENT CARE INTERGRATION AND OVERNIGHT CLOSURE OF DOCTORE PIPER HOUSE URGENT CARE CENTRE UPDATE – The Programme Director NHS 111 Service North East (Deputy Director Unplanned Care) NHS County Durham and Darlington submitted a report (previously circulated) advising that she was disappointed that a joint paper couldn't be produced as the matter hadn't progressed as quickly as anticipated. The report outlined the proposed Emergency Department/Urgent Care Integration and Closure of Doctor Piper House Urgent Care Centre overnight provision.

Ms Groves reminded Members of the Strategy for Urgent Care Services which was produced in 2008 and clearly demonstrated the need to commission an urgent care service that was truly seamless and reflects the needs of patients and carers; with the ambition to reduce confusion and duplication and integrate Urgent Care Centres within existing Emergency Departments. As a result a number of discussions have taken place between NHS County Durham and Darlington and County Durham and Darlington NHS Foundation Trust to determine a suitable Business Case. The Business Case required clinical input from the Clinical Commissioning Group (CCG) and as a result a stakeholder event was held on 13th June 2012, to which Members of the

Scrutiny Committee also attended. Following this event, the Foundation Trust updated its Business Case and produced a final draft for CCG sign off. A timetable of key dates was included and decisions would be shared with the Scrutiny Committee in due course.

With regards to the closure of Dr Piper House Urgent Care Centre overnight services, Ms Groves reported that this was an interim arrangement to ensure that the resource provided for unscheduled care was well utilised in the overnight period. A full risk assessment was carried out and all actions implemented prior to the change and it was felt there that would be little impact on patients as walk in activity is very low. Ms Groves was pleased to announce that there has been no incidents reported regarding to the service provision.

Members were pleased to note that the service appeared to be working and suggested that by slowly changing the service provision people would get used to it more easily. The Head of Unscheduled Care, County Durham and Darlington NHS Foundation Trust reported that there had not been a dip in performance and people with minor injuries were actually getting seen more quickly. Mr Lovell reiterated earlier comments that the Communications with regard to the integration of Urgent Care Centre needed to be right and welcomed the support of the Scrutiny Committee in spreading the message in a timely manner.

RESOLVED – That the update report be noted.

HP19. CONSULTATION TASK AND FINISH REVIEW GROUP – The Director of Resources submitted a report (previously circulated) advising Members of the recent consultations that the Consultation Task and Finish Review Group have responded to on behalf of the Committee.

Following the establishment of the Task and Finish Review Group, that Group has met on two occasions to respond to the Department for Health's proposals Liberating the NHS: No Decision about me, without me and the NHS Tees and NHS County Durham and Darlington's consultation on Dental Anxiety Management and Sedation Service for NHS Tees and County Durham and Darlington. The submitted report included details of the consultations that the Group has responded to on behalf of the Scrutiny Committee.

The Chair and Vice-Chair of this Committee have also supported the response submitted by Darlington Borough Council in respect of the recent Department of Health publication of a consultation Healthy Lives, Healthy People: Update on Public Health Funding on 14th June 2012. The consultation describes the interim recommendations of the Advisory Committee on Resource Allocation (ACRA) and sought feedback to work to inform their continuing work. The issue was discussed at the Regional North East Joint Health Scrutiny Committee, which agreed to formulate and submit a response.

RESOLVED – (a) That the Scrutiny Committee retrospectively approve the responses submitted by the Task and Finish Review Group, as detailed in (Appendix 1 and 2) of the submitted report; and

(b) That the Scrutiny Committee support the response submitted by Darlington Borough Council and North East Regional Joint Health Scrutiny Committee in respect of the Healthy Lives, Healthy People: Update on Public Health Funding Consultation.

HP20. QUALITY ACCOUNTS – PROGRESS REPORT – The Director of Resources submitted a report (previously circulated) advising Members of the recent Stakeholder event and meeting in respect of the local Foundation Trust Quality Accounts. The submitted report reminded Members that it had been agreed that this year the Scrutiny Committee would be more involved, at an early stage, with local Foundation Trusts Quality Accounts to enable them to have a better understanding and knowledge of performance when asked to submit a commentary on the Quality Accounts at the end of the Municipal Year 2012/13.

As a result, Members have committed to attending the Stakeholder events hosted by Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) and have established a Working Group with members of Darlington Link to receive quarterly performance reports from County Durham and Darlington NHS Foundation Trust. The report asked the Committee to consider the information gathered and note the detailed information in preparation for its response to the Quality Accounts in April/May 2013.

RESOLVED – (a) That the briefing note from the Stakeholder event hosted by Tees Esk and Wear Valleys NHS Foundation Trust be noted; and

(b) That the notes of the meeting held on 19th July 2012 in respect of County Durham and Darlington NHS Foundation Trust be noted.

HP21. REVIEW OF PROGRESS ON POLICY REVIEW ITEMS – Clinical Strategy Task and Finish Review Groups – Members of the Long Term Condition Task and Finish Review Group and the Women and Children's Task and Finish Review Group provided a verbal update of the work undertaken so far.

Councillor E. A Richmond reported that the Long Term Conditions Task and Finish Review Group had continued to hold positive meetings exploring utilising the facilities at the Dolphin Centre as a drop in centre to promote Long Term Conditions, but expressed some frustration that respective organisations were not moving forward as quickly with the proposal as the Group would have liked.

Councillor Newall reported that Women and Children's Task and Finish Review Group had held a second interesting meeting and were looking to set up a visit to the Maternity and Children's Wards at Darlington Memorial Hospital. She added that the Group would also be keeping a watching brief on the Friarage proposals in respect of its maternity and paediatrics service.

RESOLVED – That the updates be noted.

HP22. DARLINGTON DARZI PRACTICE TASK AND FINISH REVIEW GROUP – FINAL REPORT – The report of the Director of Resources submitted a report (previously circulated) presenting the outcome and findings of the Task and Finish Review Group established by this Scrutiny Committee to consider and respond to the Review of Darlington Darzi Practice.

The submitted reported outlined that NHS County Durham and Darlington brought to Members attention a Review being undertaken by North East Primary Care Services Agency (NEPCSA) in respect of the Darlington Darzi Practice. As a result Monitoring

and Co-Ordination Group gave approval for this work to be undertaken and a Task and Finish Review Group was established.

Members of the Scrutiny Committee agreed to invite members of Darlington LINk to all meetings of the Task and Finish Review Group and to assist with the evidence gathering given the limited consultation period. The consultation period was for six weeks from 25th June until 3rd August 2012 as it was proposed to be an appropriate length of time to seek feedback from GP Practices patients and the local community. The Task and Finish Review Group met on three occasions, carried out a visit to Dr Piper House, gathered public opinion with the use of a questionnaire at the GOLD Tea Dance and presented its final report to the Committee for approval.

RESOLVED – That the Final report be retrospectively approved.

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