

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

25th October, 2011

PRESENT – Councillor Newall (in the Chair); Donoghue, Francis, I. Haszeldine, Macnab, Regan, E. A Richmond, S. Richmond, H. Scott and J. Taylor. (10)

APOLOGIES – Councillor Nutt. (1)

ALSO IN ATTENDANCE – Councillor A Scott.

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

EXTERNAL REPRESENTATIVES – Miriam Davidson, Director of Public Health; Berenice Groves, Programme Director NHS 111 Service North East (Deputy Director Unplanned Care); Dr David Landes, Deputy Director of Public Health and Martin Phillips, Director of Consortium Development (Darlington); NHS County Durham and Darlington and Diane Murphy, Associate Chief Operating Officer, County Durham and Darlington NHS Foundation Trust.

HP1. CHAIR – RESOLVED – That Councillor Newall be appointed Chair of this Scrutiny Committee for the remainder of the Municipal Year 2011/12.

HP2. VICE-CHAIR – RESOLVED – That Councillor J. Taylor be appointed Vice-Chair of this Scrutiny Committee for the remainder of the Municipal Year 2011/12.

HP3. DECLARATION OF INTERESTS – There were no declarations of interest reported at the meeting.

HP4. MINUTES – Submitted – The Minutes (previously circulated) of the meetings of the former Health and Well Being Scrutiny Committee held on 30th August and 6th September 2011

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

HP5. WORK PROGRAMME 2011/12 – The Director of Resources submitted a report (previously circulated) requesting that consideration be given to the work programme items scheduled to be considered by this Scrutiny Committee during the current Municipal Year and to the development of terms of reference and quad of aims (also previously circulated) for those topics.

The submitted report outlined those areas where this Scrutiny Committee had previously identified it would like to focus its work over the next Municipal Year namely care closer to home, Clinical Strategy, Single Needs Assessment, stroke after care and Veterans Scrutiny Review and draft terms of reference which identified how, when and why the work would be undertaken were appended to the submitted report. A quad of aims was also appended to the submitted report in relation to winter pressures and preparedness.

The Chair suggested that a quad of aims be completed for the Committee to consider the Health Task and Finish Group that the Association of North East Councils (ANEC) has established.

RESOLVED – (a) That the draft terms of reference and quad of aims for all of the topics identified be approved.

(b) That a quad of aims be drafted in respect of the Health Task and Finish Group established by ANEC.

HP6. NHS TRUST UPDATE – Miriam Davidson, Director of Public Health, NHS County Durham and Darlington reported that there had been more changes within the Strategic Health Authority. Mrs Davidson also reported about the progress being made promoting flu vaccinations in County Durham and Darlington and specific reference was made to staff take up and encouraging front line staff to be vaccinated against flu.

Martin Phillips, Director of Consortium Development (Darlington); NHS County Durham and Darlington reported that Darlington has established its own shadow Clinical Commissioning Group (CCG), based on the Local Authority boundary. It is the ambition for the CCG is go for early authorisation and Mr Phillips and his team will assist them with this process. In response to a question, Mr Phillips explained that people will still have a right to express a choice of where they receive their services and patient choice is very evident in respect of planned admissions and secondary care and this will not change under the new arrangements. The CCG will endeavour to commission and provide high quality services as locally as possible to encourage people to choose to receive care in Darlington.

Diane Murphy, Associate Chief Operating Officer, County Durham and Darlington NHS Foundation Trust reported that the Trust has a robust winter plan in place, through joint working with NHS County Durham and Darlington. This enables the Foundation Trust to align their resources in the critical areas of need during the winter months; this will includes some elective surgery being reduced to accommodate the influx of patients expected due to adverse weather conditions and establishment of designated flu wards if required. Contingencies for 4x4 vehicles are also in place to allow staff to get to work and patients to gain entry to the hospitals. Part of the winter plans includes encouraging staff to be vaccinated against flu, similar to NHS County Durham and Darlington. The vaccination programme is already up and running and progress is steady. The Trust has set a target of 60% uptake which will be a challenge as last year between 46-47% of all staff was vaccinated. This year's campaign is being lead from the top and the Chief Executive has already received his vaccination. In response to a question, it was explained that there seemed to be reluctance in nursing staff with non-nursing staff happy to receive their vaccination.

Mrs Murphy also highlighted that orthodontic services provided by South Tees NHS Foundation Trust and the proposals to remove the clinical at Darlington Memorial Hospital (DMH) and Bishop Auckland General Hospital. The Foundation Trust understand the case South Tees make for a specialist orthodontic centre and have asked for further work to be undertaken as to why Darlington Memorial Hospital couldn't be the centralised location. Dr Landes, Deputy Director of Public Health, commented that reasons could possibly include the number of patients in County Durham and Darlington having to travel further, there are local orthodontic specialists and care provision could be available in local dental practices. The Chair reported that the Tees Valley Health Scrutiny Joint Committee was considering this issue and that she would represent the Committees views and report back as necessary.

RESOLVED – That the updates ben noted.

HP7. OVERVIEW OF PARTNERSHIP REMIT OF THE COMMITTEE – Chris Sivers, Assistant Director – Development and Commissioning introduced a presentation which outlined

the change to the Scrutiny Committees remit. Members were reminded about their role in respect of National Health Service and the impact for the Local Authority and their new responsibility of the partnership element which includes Local Strategic Partnership (LSP) and theme groups, Voluntary Sector and Community Safety Partnership. Ms Siviers suggested two items for inclusion to the Committees Work Programme, those being Police and Crime Commissioner developments update and the LSP Review and Member involvement. Members welcomed the inclusion of partnerships within their remit but acknowledged that it would still be the intention to focus attention around the changes to the Health agenda and consider elements of partnerships in due course.

Councillor Andy Scott, Cabinet Member for Health and Partnerships portfolio outlined his role and the work that he has undertaken in relation to the partnerships element of his portfolio and welcomed Members involvement in this aspect.

RESOLVED – (a) That the presentation be noted.

(b) That the Assistant Director – Development and Commissioning draft a quad of aims for the items following items Review of the LSP and developments in Police and Crime Commissioner to be added to the Committees Work Programme.

HP8. 111/ACCIDENT & EMERGENCY DATA – Members received presentations from both NHS County Durham and Darlington and County Durham and Darlington NHS Foundation Trust in respect of differing information they received in respect of the introduction of the 111 Services and its impact on Accident and Emergency departments (A&E).

Berenice Groves, Programme Director NHS 111 Service North East (Deputy Director Unplanned Care) NHS County Durham and Darlington introduced a presentation outlining the 111 service, the pilot of scheme and the reported outcome by NHS County Durham and Darlington. Diane Murphy, Associate Chief Operating Officer, County Durham and Darlington NHS Foundation Trust introduced a presentation concerning the local unscheduled care service including provision at A&E at DMH, Urgent Care Centre at Dr Piper House and Darzi Centre at Doctor Piper.

Members were interested to comprehend why the results of the pilot has seen a reduction in the number of people presenting to A&E across the patch. While the County Durham and Darlington NHS Foundation Trust has seen an increase of 2-3% attendances at A&E. Members challenged the figures and understood the reasoning behind the difference, there was a feeling that this needed to be better communicated to the general public. Specific information about the impact 111 has had on Darlington has not yet been produced and Members requested sight of this in due course.

The Committee were encouraged by the proposed integration of the Urgent Care Centre (Dr Piper House) and Accident and Emergency to be located at Darlington Memorial Hospital. Members expressed positive comments about having a single point of access and assessment being of great benefit for residents and reduce waiting times. Members requested to be kept informed about the proposals.

RESOLVED – (a) That the presentations be noted.

(b) That the Officers be thanked for their attendance at the meeting.

(c) That Committee continue to be kept informed about detailed Darlington information in respect of the 111 service and the implementation of combining the A&E and Urgent Care Centre.

HP9. DARLINGTON HEALTH PROFILE 2011 – ORAL HEALTH – Following receipt of this year's health profile for Darlington the Committee has agreed to scrutinise one specific element of the profile at every meeting, this will enable Members to gain an understanding of reasoning behind the data presented and enable consideration to be given of how the health of residents' impacts on the services this Council provides. At this Committee meeting Members scrutinised Oral Health Services in Darlington. Dr Landes, Deputy Director of Public Health, NHS County Durham and Darlington introduced a presentation outlining local and national data in respect of oral health performance over recent years. Dr Landes highlighted children's oral health and regular surveys undertaken, national protocols and the change in consent.

Members considered figures from 2008/09 which showed that the number of children under the age of 12 with decayed teeth was more than 40% and that Darlington was the second worse in the Region, however, the figures were comparable to areas with natural fluoridisation. Dr Landes suggested that when the Local Authority takes over the responsibility for public health fluoridated water maybe something that the Council wish to consider in more detail.

Dr Landes also presented figures from 2010/11 which showed that the percentage of people visiting a dentist has reduced by more than 10% in some age brackets and this could partly be due to the economic times we are facing. Members requested information about the number of dental practices in Darlington and a breakdown of those which are NHS and private practices.

Members of the Committee are keen to raise the profile of oral health and encourage Darlington residents to visit the dentist on a regular basis.

RESOLVED – (a) That the presentation be noted.

(b) That Dr Landes be thanked for attending the Committee meeting.

(c) That Members promote oral health within their Wards.

HP10. ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH FOR DARLINGTON 2010/2011 – The Director of Public Health for Darlington submitted a report (previously circulated) reporting the Joint Annual Report of the Director of Public Health, Darlington and the Director of Public Health, County Durham reflecting the shared arrangements across Darlington and County Durham. The report provided a brief update on major programmes of work in 2010/11.

Mrs Davidson explained the Annual Report is presented in the context of major change in the wider NHS and the current public health system and highlighted some of the key public health programmes across County Durham and Darlington and referenced a range of additional reports available on public health priorities. The report also defines the role of the public health team and signposted readers to additional resources including the Darlington Single Needs Assessment (due to be considered at the next Scrutiny Committee).

Particular reference was made to cancer awareness and early diagnosis and the work being undertaken to increase early diagnosis by raising awareness, working with GPs and making service improvements. Work has also been undertaken in relation to working with partners to

tackle alcohol misuse and tobacco control (with Councillor Andy Scott being appointed as Chair of the Tobacco Alliance). It was also reported that teenage pregnancy rates are steadily decreasing in Darlington but still hasn't reached the national target and the overall sexual health of young people living in Darlington is poor compared with the national picture. Members challenged the public health programmes and the impact they having on assisting in the reduction the health inequalities in Darlington.

RESOLVED – That the report be noted.

HP11. POLICY REVIEW – (A) (i) DECOMMISSIONING TASK AND FINISH REVIEW GROUP – INTERIM REPORT – The Director of Resources submitted a report (previously circulated) reporting the work undertaken by the Decommissioning Task and Finish Review Group. This Committee agreed to establish a Task and Finish Review Group to consider the Decommissioning Policy of NHS County Durham and Darlington.

RESOLVED – That the work of the Review Group to date be noted.

(ii) HEALTHWATCH TASK AND FINISH REVIEW GROUP – INTERIM REPORT – The Director of Resources submitted a report (previously circulated) reporting the Healthwatch Task and Finish Review Group response to the recent consultation launched by the Department of Health in respect of Allocation Options for distribution of additional funding to Local Authorities for Local Health Watch, NHS Complaints Advocacy, PCT Deprivation of Liberty Safeguards.

RESOLVED – (a) That the response be approved and forwarded to the Department of Health ahead of the Consultation deadline.

(b) That the Task and Finish Review Group remain in place to continue to receive further updates and scrutinise elements of the transformation of Darlington LINKs into HealthWatch.

(B) SUICIDE PREVENTION TASK AND FINISH REVIEW GROUP – FINAL REPORT – The Director of Resources submitted a report (previously circulated) reporting the Suicide Prevention Task and Finish Review Group response to the recent Department of Health consultation on preventing suicide in England.

RESOLVED – That the Committee retrospectively approve the response to the consultation on preventing suicide in England.