

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

12th June, 2012

PRESENT – Councillor Newall (in the Chair); Councillors Donoghue, Francis, Macnab, E. A Richmond, S. Richmond, H. Scott and J. Taylor. (8)

APOLOGIES – Councillors Nutt and Regan. (2)

ABSENT – Councillor I Haszeldine (1)

OFFICERS IN ATTENDANCE –Chris Sivers, Assistant Director of Development and Commissioning, Sharon Raine, Head of Information and Insight and Janet Walke, Strategy and Performance Advisor.

EXTERNAL REPRESENTATIVES – Miriam Davidson, Director of Public Health, Mary Bewley Head of Communications and Involvement, NHS county Durham and Darlington; Sue Jacques, Chief Executive, Edmund Lovell , Associate Director of Marketing and Communications, County Durham and Darlington Foundation Trust, Sharon Pickering, Director of Planning and Performance, Tees, Esk and Wear Valleys NHS Foundation Trust Louise Graves and Wendy Stephens, Clinical and Effectiveness and Research Development Manager, North East Primary Care Services Agency and Diane Lax, Darlington LINK

HP1. DECLARATION OF INTERESTS – Councillor Newall declared a personal interest in respect of HP11 below as a Darzi Practice patient.

HP2. TIMES OF MEETINGS FOR MUNICIPAL YEAR 2012/13 – RESOLVED – That for the remainder of the Municipal Year 2012/13, meetings of this Scrutiny Committee will be held at 9.30am.

HP3. MINUTES – Submitted – The Minutes (previously circulated) of the meetings of this Scrutiny Committee on 17th April 2012 and the 18th May 2012.

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

HP4. NHS AND PARTNERS UPDATE –The Chief Executive, County Durham and Darlington NHS Foundation Trust (CDDFT) outlined the future direction and vision of the Foundation Trust. Ms Jacques reassured the meeting that there were no plans to move to one acute sight across County Durham and Darlington and that the Trust believe that they can sustain services, in both acute hospitals. Members were pleased to note that Trust are top performers across the North East and are nationally well respected.

Ms Jacques identified three areas the Trust would be focusing their attention on over the coming year, those being Integrated Care Health promotion and Wellbeing and Centres of Excellence. Ms Jacques then defined the four touchstones as; clinical outcomes, patient experience, staff, finance (reductions and efficiencies) members were reminded of the Trusts Strategic Direction and the key four themes being unscheduled care, women and children, integrated services and centres of excellence.

Reference was made to the Quality Legacy work being jointly undertaken by NHS County Durham and Darlington and NHS Tees together with the Clinical Commissioning Groups (CCGs).

Discussion ensued about the recent unscheduled care event hosted by the Trust and Members of the Scrutiny Committee had attended. The outcome from the event was mixed and a variety of opinions were expressed from those who attended. Members expressed an interest in what new centres of excellence might be developed while stating that communications and promotion would need to be greatly improved if this aspiration was to be successfully realised, which Ms Jacques acknowledged. She also highlighted the recent pre consultation being carried out in respect of women's and children services at the Friarage and how the outcome of this would impact on the Trust and its future plans.

The Director of Planning and Performance, Tees, Esk and Wear Valleys NHS Foundation Trust Sharon Pickering reported that an increased amount of funding had been agreed to enhance the level of mental health liaison services to be based at the hospital following the very positive work arising from the Dementia Collaborative. New arrangements have been agreed with how GPs access services for adults with mental health issues following the successful pilot based in Easington and will be rolled out across County Durham and Darlington.

Reference was made to the national procurement of Improving Access to Psychological Therapies children's services and agreed to report the outcome back to the Committee. Mrs Pickering also reported that the RIOTT service in Darlington would cease from July 2012 (due to the pilot funding no longer being available) and that transition arrangements will be in place to ensure that there would be a smooth transfer of patients into the generic Substance Misuse services. She also reported that the tender for inpatients services for the military was still being progressed. It was noted that work is also underway nationally, to develop for Mental Health Trusts (similar to those for Acute Trusts). Members asked for a comparison between this Trust and Northumberland Tyne and Wear, Leeds and York mental Health Trusts. .

The Assistant Director of Development and Commissioning, Chris Sivers provided the meeting with an update concerning the development of the Shadow Health and Well Being Board, whose membership will include all Members of Cabinet, four representatives from Darlington Shadow CCG, Health Watch, Director of Public Health and Senior Council Officials; there will also be three invitees from voluntary sector and the opposition parties and a representative from Teesside University Health and Social Faculty. Mr Lovell expressed the Trusts disappointment that the Trust had not been offered a place on the Shadow Board or indeed as an invitee, Mrs Pickering concurred. The Assistant Director noted that there will be arrangements for involving a wide range of provider organisations and that all meetings are open to the public.

RESOLVED – That the updates be noted.

HP5. 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 Public Health Transition and Performance Information and suggested Terms of Reference for those pieces of work where appended to the submitted report. Members were also requested to give consideration to establishing a Task and Finish Review Group to undertake work in relation to the NHS Choice Consultation, 'No decision about me without me'.

Discussion ensued on the development of the Armed Forces Community Covenant, which was being developed and Members were pleased to note that a report to be submitted to Cabinet at its meeting 10th July 2012, requesting formal approval of the covenant.

It was reported that CDDFT have successfully bid for £500,000 from the Department of Health for telehealth projects working with the Clinical Commissioning Group to agree how best to spend the money (as the money needs to be spent by March 2013). The idea is to run pilot projects to develop the infrastructure and focus on specific pathways of care (based on Darlington's need and a business plan is currently being developed therefore it has been suggested that Members defer the piece of work this Scrutiny Committee was undertaking in relation to Telehealthcare and that consideration of whether further scrutiny is necessary following an evaluation of the pilot projects.

The Chair requested that the Scrutiny Committee undertake a piece of work in respect of Chronic Obstructive Pulmonary Disease (COPD) and Members requested further scrutiny in respect of fluoridisation.

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

(b) That the Terms of Reference in relation to Public Health Transition and Performance Information work be approved;

(c) That a Task and Finish Review Group to be established to consider the NHS Choice Consultation 'No decision about me, without me'; and

(d) That Quads of Aims be developed in respect of COPD and fluoridisation and both issues are added to the Committee's Work Programme.

HP6. PUBLIC HEALTH TRANSITION – The Director of Public Health submitted a report (previously circulated), providing Members with an update on the transition of the public health functions migrating to new organisations.

The Director of Public Health, Miriam Davidson introduced a powerpoint presentation highlighting the changes to the public health system, new organisations, Public Health England and the NHS Commissioning Board, Public Health in Local Government and local progress. Mrs Davidson reported that Duncan Selbie had been appointed as Chief Executive Designate for Public Health England in April 2012 and would take up his post on 1st July 2012. Members are pleased that the transfer of public health leadership, responsibilities and functions from NHS County Durham and Darlington to the Local Authority is progressing and welcomed that there would be no anticipated job losses.

Members requested that this information to be made available to all Members, through a Members Training Session.

Concerns were expressed about the lack of information in relation to the ring fenced budget and it was suggested that a letter be written to the Government expressing the Councils concerns thereon.

RESOLVED –(a) The Report be noted.

(b) That the Chair and Vice Chair on behalf of this Committee write to the Government in relation to the lack of information about the ring fenced budget; and

(c) That a training session be arranged for all Members of Council explaining the transition arrangements for Public Health.

HP7. DARLINGTON STRATEGIC (SINGLE) NEEDS ASSESSMENT FOR DARLINGTON 2011/12 – KEY MESSAGES – The Director of Public Health submitted a report presenting to members a Summary of Single Needs Assessment (SNA) for Darlington 2011/12 Members were reminded that the Directors of Public Health, Children’s Services and Adult Services have a statutory duty to produce a Joint Strategic Needs Assessment to inform decision makers and stakeholders about the health and social care needs of the Darlington people.

The submitted report outlined the aim of the SNA which would bring together, relevant information available on the needs of the population of Darlington and would combine quantitative data with softer intelligence and feedback from the community and service users and would provide a powerful tool for defining priorities and shaping future services for Darlington. It also highlights the areas of improvements for health and wellbeing for the communities and the specific health and social care issues that require targets actions.

The Head of Information and Insight provided Members with information in respect of the electronic document available which brings together all of the information highlighted and they will soon be made publically available.

RESOLVED – That the report be received and the key messages from the Strategic Single Needs Assessment 2011/12 be noted.

HP8. OVERVIEW OF PERFORMANCE INFORMATION IN RESPECT OF THIS COMMITTEE REMIT– The Assistant Director of Development and Commissioning introduced a powerpoint presentation (previously circulated) informing Members of performance information within the remit of this Scrutiny Committee and outlined the future role of involvement of this Scrutiny Committee in the monitoring of this information. Ms Sivers tabled copies of the NHS Outcomes Framework 2012/13 and Public Health Outcomes Framework which provided an overview of outcomes and indicators. The presentation engaged Members and highlighted the Outcomes Framework and the impending changes. Members suggested there performance could be considered in its entirety including involving CCG and Public Health by way of a Special meeting.

RESOLVED – (a) That the presentation be noted;

(b) That a Special meeting of the Scrutiny Committee be arranged to thoroughly scrutinise performance. .

HP9. 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 Older People/End of Life Care 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 held a very positive meeting exploring utilising the facilities at the Dolphin Centre as a drop in centre to promote Long Term Conditions, while expressing some frustrations that individuals did not have delegated powers for their respective organisations to move forward with the proposal quickly.

Councillor J. Taylor Older People/End of Life Care Task and Finish Review Group had a very productive first meeting and have agreed to streamline their work focussing on the following issues; prevention and screening, improve integrated partnerships across all health and social care providers, Pilots – Surprise Question and Amber Care and training. Councillor Taylor also highlighted the Groups intention to make contact with St Teresa’s Hospice.

RESOLVED – That the updates be noted.

HP10. SUPPLEMENTARY ITEM – With prior approval of the Chair to the matter being treated as urgent to enable the Scrutiny Committee to consider the proposal at the earliest opportunity. The Head of Communications and Involvement, Mary Bewley, NHS County Durham and Darlington submitted a report which outlined a Service Review being carried out by the North East Primary Care Services Agency (NEPCSA) on behalf of NHS County Durham and Darlington in respect of the Darlington Darzi Practice. The submitted report also detailed a proposal to undertake a formal consultation for six week to seek feedback from the Darlington Darzi Service Practice Review and the local community about the health services. The report also appended a consultation plan and stakeholder map.

The Darlington Darzi Practice Service is managed by CDDFT and the contract is due to expire 31st March, 2013. The Practice is based at Dr Piper House in Darlington, which is also the location of Urgent Care Centre Members were extremely concerned that the Trust were only proposing a six week consultation period given the complexity of the issue and suggested that it was an inadequate period of time to carryout meaningful public engagement and consultation. Darlington LINK supported the opinion suggesting that members of the public do not differentiate from the services provided at Dr Piper House. .

RESOLVED – (a) That the report be noted;

(b) That a Task and Finish Review Group be established to scrutinise the development of the Darlington Darzi Practice and the Darlington LINK be invited to attend all meetings; and

(c) That Members agree a way forward and the Democratic Officer contact NHS County Durham and Darlington directly.