

**HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE**

12<sup>th</sup> February, 2013

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

**ABSENT** – Councillor I. Haszeldine (1)

**OFFICERS IN ATTENDANCE** – Miriam Davidson, Director of Public Health and Chris Sivers, Assistant Director of Development and Commissioning.

**EXTERNAL REPRESENTATIVES** – Mary Bewley, Head of Communications, NHS County Durham and Darlington; Sue Jacques, Chief Executive and Edmond Lovell, Associate Director of Marketing Communications, County Durham and Darlington NHS Foundation and Jackie Kay, Deputy Director of Consortium Development; Darlington Clinical Commissioning Group.

**OTHER REPRESENTATIVES** – Diane Lax, Darlington LINK and Kath Wall from GOLD.

**HP54. DECLARATIONS OF INTEREST** – There were no declarations of interest reported at the meeting.

**HP55. MINUTES** – Submitted – The Minutes (previously circulated) of the meetings of this Scrutiny Committee on 18<sup>th</sup> December, 2012, 24<sup>th</sup> and 29<sup>th</sup> January, 2013.

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

**HP56. NHS AND PARTNERS UPDATE** – Diane Lax, Darlington LINK extended an invite to Members of this Scrutiny to the Health Watch Event, an all day event to be held on 13<sup>th</sup> March, 2013 in Central Hall at the Dolphin Centre.

Mary Bewley, NHS County Durham and Darlington reported on patient transport and advised Members that as from 1<sup>st</sup> March, 2013 Darlington residents will be using the service provided from Middlesbrough and gave her farewell to the Scrutiny Committee.

**RESOLVED** – That the updates be noted.

**HP57. 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.

It was proposed by the Chair that Members provide brief updates to the Scrutiny Committee of any external events that they attend. It was also suggested that a template be compiled to assist with the summary.

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

(b) That Members attending external events provide a brief summary to Scrutiny Members.

**HP58. UPDATE ON ACTIONS TO SUPPORT VETERANS** – The Director of People submitted a report (previously circulated) to advise Members on the current work for veterans at a regional and local level and to seek agreement performance reporting and delivery of the Darlington section of the North East Regional Joint Health Scrutiny Committee action plan ; Tees Valley activity and Darlington’s input into this group to support the regional reviews of the health needs of the ex-service community; and Darlington Armed Forces and Veterans Action Group.

The submitted report gave the background to the involvement of Scrutiny at a regional and local level in responding to the needs of Veterans and outlined progress made against the regional priorities and an updated copy of the action plan which Darlington agreed to undertake specific actions in was also circulated with the submitted report.

The submitted report also outlined the work of the Tees Valley Armed Services Forum, established to provide a forum for discussion between representatives of the Armed Forces Community and service providers.

As part of the developments agreed within the Darlington section of the North East Regional Joint Health Scrutiny Committee plan, an event was held on 28 November, 2012 and attended by over 30 organisations from Darlington and surrounding areas.

Chris Sivers advised that Councillor Veronica Copeland had been appointed as the Member Armed Forces Champion to drive improvements in services for veterans. A web-based directory has been produced of all services provided by the voluntary and community sector and statutory provision for those seeking helping and making referrals and training is being undertaken with Customer Services. It is also planned to hold a Workshop with veterans across the Tees Valley and Catterick Garrison and providers in March/April to launch the directory and to bring information and provide drop-in support at the session.

**RESOLVED** – (a) That the report be noted;

(b) That a further update report on the Action Plan be submitted to this Scrutiny Committee in 12 months’ time; and

(c) That consideration be given to the impact of redundancies in the armed forces, services and families.

**HP59. PUBLIC HEALTH TRANSITION ARRANGEMENTS 2013** – The Director of Public Health submitted a report (previously circulated) to give Members an update on the progress made to date to ensure a safe transition for public health into the local authority from 1 April 2013 in line with the requirements of the Health and Social Care Act 2012.

The submitted report detailed the number of work streams to ensure a smooth transition of public health responsibilities and the public health transfer order which is a vehicle through which the assets, liabilities and power to act on new public health responsibilities will be transferred to local authorities.

The Local Authority Circular dated 10 January 2013 set out the funding that will be available to upper tier, London boroughs and unitary local authorities in England to discharge their new public health responsibilities and the conditions that will govern the use of the grant. The ring-fenced allocation for Darlington Borough Council is £6,989,000 for 2013/14 and £7,184,000 for 2014/15. A report was submitted to Council on 31 January 2013 to give consideration to the contractual arrangements and proposals for how to manage the allocation.

The submitted report outlined the mandatory responsibilities that Local Authorities will have to provide in respect of public health advice to NHS commissioners. Locally this will largely be with Darlington Clinical Commissioning Group (CCG) but will also include liaison with the local Area Team of the NHS Commissioning Board. A development session was held on 30 January 2013 with local Clinicians and CCG Governing Body members to develop the Memorandum of Understanding into a local Work Programme which will form the basis of a formal Service Level Agreement between the Local Authority and the CCG.

The submitted report also advised Members that an appraisal has been undertaken to assess the best way to ensure Darlington has access to the range of specialist skills to deliver the full range of public health responsibilities and a public health collaboration has been developed across the Tees Valley Local Authorities to provide an integrated approach.

Members were also advised that an induction programme has been developed to enable Council Members and Officers to understand the new responsibilities and opportunities that public health brings to the Local Authority and that transferring staff are able to fully integrate into the Council. It was acknowledged by Members of this Scrutiny Committee that all Members should be reminded to attend the mandatory training and that it was important they understood their responsibilities and that the Group Leaders should be approached to remind Members who had not attended the training to do so.

**RESOLVED** – (a) That the report be noted; and

(b) That a further report be considered in six months' time outlining progress and challenges with implementation.

**HP60. HEALTHWATCH UPDATE AND TRANSITION** – The Director of People submitted a report (previously circulated) to update Members on Healthwatch and to set out steps already taken to commission Healthwatch services and the transition plan.

Chris Sivers advised Members that the contract had been awarded to the Carers Federation and the Healthwatch function relating to NHS Complaints Advocacy has

been awarded to Carers Federation. Work is on-going with Darlington LINK legacy and also the transition from LINK to local Healthwatch. Members were pleased that the contract had been awarded to Carers Federation and that the continuity and experience of staff would not be lost and would to continue to work successfully with Healthwatch as the Scrutiny Committee has previously done with the LINK.

**RESOLVED** – (a) That the report be noted; and

(b) That a further report be considered in six months' time outlining progress and challenges with implementation.

**HP61. DARLINGTON'S SHADOW HEALTH AND WELL-BEING BOARD** – The Director of People submitted a report (previously circulated) to update Members of the work of the Shadow Health and Well-Being Board which has been in place since June 2012 and the review process that has been carried out of the Board's arrangements.

The submitted report outlined the statutory functions of the Health and Well-Being Boards and the provisions in the 2007 Health Act for a Local Authority to delegate any Local Authority functions that 'are exercisable by the Authority' and also the statutory membership which has been outlined for a Health and Well-Being Board. The submitted report also outlined the current model of Darlington's Shadow Health and Well-Being Board and its membership.

The Board has met in public for six board meetings since it commenced and has development a Health and Well-being Strategy and a Health and Social Care Delivery Plan and the submitted report outlined the priorities collectively of the partners of the Board and the key areas the Board will progress between 2013-2016. These areas included to focus resources in areas of highest need; to create a sustainable health and social care economy; and to improve the management of long term conditions. The key actions that the Board are progressing are aligned to the domains outlined in the NHS Outcomes Framework.

The Shadow Health and Well-being Board are currently reviewing the Board's model and this review will be completed by the end of February 2013 and considered at the Board meeting scheduled for March 2013.

**RESOLVED** – (a) That the report be received; and

(b) That Members receive a further update at the Scrutiny Committee meeting in June 2013.

**HP62. DARLINGTON CLINICAL COMMISSIONING GROUP – TRANSITION ARRANGEMENTS** – The Chief Officer Designate, Darlington Clinical Commissioning Group submitted a report (previously circulated) to advise Members on the progress to date for developing Darlington Clinical Commissioning Group (DCCG) and the required authorisation process for legally establishing DCCG as the local NHS Commissioning organisation from 1<sup>st</sup> April, 2012.

It was reported that the application process required submission of quality evidence against 119 criteria for authorisation across the recognised six domains and the evidence submission included 22 key mandatory documents such as the Clear and Credible Plan, the CCG Constitution and the Communications and Engagement Plan.

It was also reported that a number of key partners and stakeholder had taken part in a 360 degree survey which also formed part of the evidence bundle for authorisation. Jackie Kay advised that the appointment of a Chief Nurse had recently taken place.

Discussion ensued on the relocation of urgent care and concerns were expressed that the review of urgent care had been postponed. Jackie Kay reassured Members that this was a high priority for the CCG's and it will be moved forward.

**RESOLVED** – (a) That the report be noted; and

(b) That a further report be considered in six months' time outlining progress and challenges with implementation.

**HP63. TRUST STRATEGIC DIRECTION – UPDATE** – The Chief Executive, County Durham and Darlington NHS Foundation Trust submitted a report (previously circulated) outlining the Trusts Strategic Direction and provided an update on the 'have your say' events. Sue Jacques also gave a presentation on the Trusts areas of focus for 2012/13 which has been discussed through a series of 'Have your Say' events that had been organised as part of a programme of work to develop detailed actions to progress the strategic direction of the Trust for 2012 to 2015.

The presentation outlined the four "touchstones" for the CDDFT to deliver best outcomes; best experience; best efficiency; and best employer and also the four areas of focus for 2012/13 being unscheduled care; integration and care closer to home; sustaining and developing women's and children's services; and developing specialist services and centres of excellence.

The presentation also advised Members of the investment for 2009-2012 and planned investment from 2013 which included a clinical portal trust wide and a new operating theatre block.

Members also discussed the findings of the Francis Report which was published on 6<sup>th</sup> February, 2013 and Sue Jacques advised Members that she would provide a further report and update on the Francis Report in April.

**RESOLVED** – That the thanks of this Scrutiny Committee be extended to Sue Jacques for her presentation and that the Council be encouraged to fully support this work programme.

**HP64. LONG TERM CONDITIONS TASK AND FINISH REVIEW GROUP** – Members of the Long Term Conditions Task and Finish Review Group provided a note of the meetings held on 13<sup>th</sup> December, 2012 and 22<sup>nd</sup> January, 2013 (previously circulated) and gave a verbal update on the current position with the review.

**RESOLVED** – (a) That the work of this Group be concluded in April, 2013.

(b) That the final report of the Group be presented to the Health and Partnerships Scrutiny Committee scheduled for 16<sup>th</sup> April, 2013 together with a draft report for submission to the Health and Well Being Board containing recommendations from this Groups work.

**HP65. OBESITY TASK AND FINISH REVIEW GROUP** – Members of the Obesity Task and Finish Review Group provided a note of the meetings held on 17<sup>th</sup> December, 2012 and 24<sup>th</sup> January, 2013 (previously circulated) and gave a verbal update on the current position with the review.

**RESOLVED** – That the work of the Group be noted.

**HP66. CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) TASK AND FINISH REVIEW GROUP** – Members of the Chronic Obstructive Pulmonary Disease Task and Finish Review Group provided a note of the meetings held on 10<sup>th</sup> and 16<sup>th</sup> January, 2013 (previously circulated) and gave a verbal update on the current position with the review.

**RESOLVED** – That the work of the Group be noted.

**HP67. OLDER PEOPLE AND END OF LIFE CARE TASK AND FINISH REVIEW GROUP** – Members of the Older People and End of Life Care Task and Finish Review Group provided a note of the meeting held on 18<sup>th</sup> January, 2013 (previously circulated) and gave a verbal update on the current position with the review. Members were advised that a visit to St. Teresa's Hospice had been arranged for Tuesday, 5<sup>th</sup> March, 2013 but that there were only 3 places left so attendance would be on a first come first served basis.

**RESOLVED** – (a) That the work of the Group be noted.

(b) That the final report of the Group be presented to the Scrutiny Committee scheduled for 16<sup>th</sup> April, 2013.