

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

3rd September, 2013

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

APOLOGIES – Councillor Donoghue, Francis and I Haszeldine. (3)

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

EXTERNAL REPRESENTATIVES – Jackie Kay, Assistant Chief Officer, Darlington Clinical Commissioning Group (CCG); Diane Lax, Healthwatch Darlington and Sarah Callaghan, Tees, Esk and Wear Valleys NHS Foundation Trust.

HP11. DECLARATION OF INTERESTS – There were no declarations of interest reported at the meeting.

HP12. MINUTES – Submitted – The Minutes (previously circulated) of the meetings of this Scrutiny Committee on 11th June 2013.

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

HP13. WORK PROGRAMME 2013/14 – 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 2013/14. In addition to the previously approved Work Programme, Members were requested to consider and approve Appendix 1 to the submitted report, which detailed that status of each item.

The Chair reported that the consultation on the Children's and Maternity Services at The Friarage Hospital has commenced and runs until 25th November 2013 and sought view from Members about whether a response should be submitted. It was noted that the Chair was meeting with representatives from Richmondshire District Council and North Yorkshire County Council to discuss the issue and suggested that the matter would also be considered by the Tees Valley Health Scrutiny Joint Committee.

It was noted that further discussions between the Chair and Vice-Chair of the Committee was required regarding how to progress the next element of the Scrutiny Committee's review of Partnerships.

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

(b) That further consideration be given to how the Scrutiny Committee responds to the Children's and Maternity Services at The Friarage Hospital consultation after the Chair has met with representatives from Richmondshire District Council and North Yorkshire County Council and the matter has be discussed at the Tees Valley Health Scrutiny Joint Committee.

HP14. SIX MONTHS IN – OVERVIEW FROM HEALTH WATCH, PUBLIC HEALTH, DARLINGTON CLINICAL COMMISSIONING GROUP AND HEALTH AND WELL BEING BOARD – The Director of Resources submitted a report (previously circulated) providing a briefing on the progress made since the transitional arrangements were reported to the Scrutiny Committee at its meeting in February 2013.

The submitted report detailed updates from Healthwatch, Public Health, Darlington Clinical Commissioning Group and the Health and Well Being Board regarding whether the transition arrangements in place were sufficient and assisted with the process, an overview of the work carried out in the last six months and details of future ambition and work.

Diane Lax, Healthwatch reported that Healthwatch was still developing its governance model and was currently operating a Board of five members and at the next meeting would consider and approve the Work Programme for 2013/14, at that point the Work Programme would be shared with Members of the Scrutiny Committee. It was noted that there was a recent press article in the Northern Echo, seeking volunteers to join Healthwatch to assist with signposting, marketing and communications, enter and view, etc. Members were pleased that outreach activity has commenced but expressed disappointment that there was no planned outreach activity in the West End of the Borough. Mrs Lax welcomed any feedback from Members about community venues, where outreach could be provided.

The Director of Public Health, Miriam Davidson reminded Members of the three key domains of public health that the Local Authority now has responsibility for those being Health Improvement, Health Protection and Health Care Public Health. Members welcomed public health being integrated into the Council and the Chair of General Licensing Committee was delighted that the Director of Public Health is developing a health input into Licensing activities. Members agreed that issues relating to alcohol and safeguarding children were health protection issues that Members of the General Licensing Committee needed to be aware of. The Director reported that she was working with colleagues to offer a short training session with GPs to remind them of the responsibilities in respect of health protection when carrying out medicals with Taxi Drivers.

Particular reference was made to flu and the responsibility for delivering the flu vaccination programme for 2013. The Director clarified that the Area Team has the responsibility for delivering the programme but were regularly seeking local expertise and knowledge from local public health specialists. It was noted that as Director of Public Health, she has the responsibility of ensuring that adequate and appropriate plans are in place, promote flu protection and the take up of vaccinations for front line staff.

The Assistant Chief Officer, Jackie Kay reported that since becoming a new statutory organisation from 1st April 2013, the Darlington Clinical Commissioning Group (CCG) has been developing relationships and ways of working with other new organisations in the system. The closest relationship being with the commissioning support service North East Commissioning Support (NECS), who deliver commissioning support to a varying level to all the CCGs across the North East and Cumbria and the Area Team from NHS England. The CCG has developed good relationships with the NHS England Area Team and this relationship is very important particularly due to the overlap in

responsibilities of Primary Care Quality and provision of services over and above standard contractual requirements. The Area Team have the responsibility for the Assurance process with CCGs and regular Assurance meetings have been scheduled. The Assistant Chief Officer advised that there are good GP Clinical Leads who are heading up areas of key work and report regularly to the CCG Board, as part of the Delivery Plan 2013/14 monitoring processes.

The submitted report highlighted other areas of work that the CCG are currently involved in including Nursing Home Pilot; Your Town, Your Health, Your Say; Caring beyond Tomorrow – A Primary Care Strategy for Darlington; County Durham and Darlington Clinical Programme and NHS England – Call to Action.

Particular reference was made to the Gold Standards Framework of Care Homes in relation to the withdrawal of funding. It was explained that this work had been decommissioned by the CCG and then the Council as it was not providing value for money and the progress being made by the Care Homes towards accreditation was very slow. Discussion ensued about whether a GP appraisal scheme still existed; experiences of the CCG working with County Durham and the Tees Valley and whether that was positive or negative position to be in; provision of GPs from the Area Team prospective and the breadth of work being undertaken.

The Chair requested that this Committee be involved in the Stakeholder element of the Primary Care Strategy discussions and that the Committee continue to be regularly updated on the work streams of the CCG. It was noted that the Chair of the CCG regularly updated the Health and Well Being Board, therefore that report could be shared with this Scrutiny Committee.

Members of the Health and Well Being Board reported that Darlington has a large membership to enable a more inclusive approach to discussing health matters. It was noted that other Local Authorities have very different memberships but it was locally determined and tailored to meet their needs. Discussion ensued about the relationship between the Board and the Scrutiny Committee and it was suggested that a further discussion should be held outside the meeting.

RESOLVED – (a) That the updates be noted;

(b) that Members are satisfied with the progress reported and that no further reports are required to be submitted to the Scrutiny Committee, by way of updates;

(c) that a meeting be arranged to discuss how the Committee wishes to scrutinise elements of the Health and Well Being Board.

HP15. HEALTH AND SOCIAL CARE DELIVERY PLAN – The Director of People submitted a report (previously circulated) updating Members of the Scrutiny Committee on the progress made to date with the Health and Social Care Delivery Plan 2013 - 2016.

The Health and Social Care Delivery Plan outlines the shared priorities for healthcare, social care and public health for 2013- 2016. The plan sits underneath Darlington's Health and Wellbeing Strategy and its purpose focuses on collective action on improvements in health and social care outcomes and narrowing the gap in outcomes

within Darlington, and between Darlington and the rest of England. The Health and Social Care Delivery Plan Priority Actions are Action 1 - to focus resources in areas of highest need, Action 2 - to create a sustainable health and social care economy and Action 3 - to improve the management of Long Term Conditions

The Director of Public Health and Assistant Director of Development and Commissioning provided a brief overview of their respective Priority Actions and took questions thereon. Members welcomed the updates and particularly the overview in relation to Action Priority 1 and consideration was given to the Committee receiving regular progress reports. Members agreed that the Health and Social Care Delivery Plan should also be discussed at the meeting to be arranged to discuss the Health and Well Being Board (Minute HP14 (c) refers).

RESOLVED – (a) That the updates against the Priority Actions be welcomed; and

(b) that Members meet to consider whether they wish to undertake any further work in relation to any of the Priority Actions within the Development Plan.

HP16. 2011 AND 2012 HEALTH PROFILES – The Director of Public Health submitted a report (previously circulated) appraising Members of the headline messages on the Health Profile for 2012, in comparison with the Health Profile for 2011. The publication of the Health Profile for 2013 has been delayed and when available would be shared with Members.

The Director of Public Health reported that the health of people in Darlington was mixed compared with the England average; while rates of road injuries and deaths and statutory homelessness are lower than average, most of the 32 indicators which make up the Health Profiles show a below national average experience and higher burden of ill-health. Members were pleased to note that life expectancy for both men and women in Darlington has improved but remains lower than the England average.

It was explained that the Health Profiles cluster 32 indicators across five domains; our communities, children's and young people's health, adults' health and lifestyle, disease and poor health and life expectancy and causes of death. The profile shows how the health of people in Darlington compares with the rest of England.

Discussion ensued about the rise of children living in poverty and the differentiating definitions of 'poverty'; the health status of smoking in pregnancy and breastfeeding not improving; the impact of the Welfare Reforms; life expectancy and the different health need now than in the past; healthy lifestyles and community rehabilitation programmes and older people in respect of obesity, healthy eating and loneliness.

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

(b) that the Health Profile for 2013 be brought to the Committee once published.

HP17. ACCESS TO GP APPOINTMENTS TASK AND FINISH REVIEW GROUP – Members of the Access to GP Appointments Task and Finish Review Group provided a note of the meeting held on 22nd August, 2013 (previously circulated) and Members gave a verbal update on the current position with the review.

Discussion ensued about the public perception about accessible GP appointments; the use of 111 and Urgent Care Centre and the information provided; Do Not Attends appointments being an issue for all GP Practices and Pharmacies.

The Assistant Chief Officer CCG welcomed the Committees work and looked forward to receiving the outcome and conclusion of the work. It was acknowledged that the CCG were beginning to think about winter preparedness and pressures and this work could feed into that. It was agreed that a clear and consistent message needed to be publicised to educate the public about use of GP appointments and Minor Aliments Schemes that most GP Practices and Pharmacies offer. The Chair proposed further work being undertaken in respect of Pharmacies in relation to the services they offer.

RESOLVED – (a) That the notes be approved and the work of the Group be noted; and

(b) that further consideration be given to Members undertaking an initial piece of work in relation to Pharmacies.