

**HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE**

17th April, 2012

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

**APOLOGIES** – Councillor Donoghue. (1)

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

**ALSO IN ATTENDANCE** – Councillors Copeland, C. Hughes and Lister.

**OFFICERS IN ATTENDANCE** – Ada Burns, Chief Executive, Murray Rose, Director of People and Chris Sivers, Assistant Director – Development and Commissioning.

**EXTERNAL REPRESENTATIVES** – Jackie Kay, Interim Deputy Chief Operating Officer, Darlington Shadow Clinical Commissioning Group; Diane Woodall, Public Health Portfolio Lead Tobacco, Public Health Team, NHS County Durham and Darlington; Edmund Lovell, Associate Director of Marketing and Communications and Joanne Todd, Associate Director of Patient Safety and Governance, County Durham and Darlington NHS Foundation Trust; Sarah Callaghan, Planning Manager, Tees, Esk and Wear Valleys NHS Foundation Trust and Terry Taylor, GOLD.

Children and staff from Darlington School of Mathematics and Science and Mount Pleasant Primary School were also present during discussion of Minute Number HP38 (B) (i).

**HP31. DECLARATION OF INTERESTS** – There were no declarations of interest reported at the meeting.

**HP32. MINUTES** – Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee on 14<sup>th</sup> February 2012.

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

**HP33. MINUTES** – Submitted – The Minutes (previously circulated) of the meeting of the Special Joint Scrutiny Committees on 21st February 2012.

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

**HP34. NHS TRUST UPDATE** – The Associate Director of Marketing and Communications, County Durham and Darlington NHS Foundation Trust (CDDFT), Edmund Lovell reported Diane Murphy was continuing to act as Acting Director of Nursing, while the Trust do extra work to attract more candidates for the position. Tom Hunt, Commercial Director was also Acting Director of Finance for the time being.

In response to a question for the Chair, Mr Lovell acknowledged the recent press coverage concerning the NHS Medical Director writing to the Strategic Health Authority (SHA) stating it was unacceptable to send people home when they may have no family support and patients discharged between 11.00pm and 6.00am. He stated that nationally around 3.5% of patients are discharged during the night and advised from a Trust perspective discharges are agreed with the

patient and clinicians. Members are aware that the Trust plan discharge at an early stage and Mr Lovell explained that further work would be carried out in respect of this and consideration of the delays experienced by patients such as waiting for prescriptions and/or transport would be explored. He said that it was not an issue for Bishop Auckland General Hospital more so the acute sites in Darlington and Durham. He undertook to provide the Committee with more detailed information. Mr Lovell also reported that the Trust are intending on running a series of workshops in respect of the Clinical Strategy workstreams with staff, Governors and Stakeholders and Members of the Committee would be invited to attend.

The Planning Manager, Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), Sarah Callaghan reported that the Trust has received funding from the SHA to enable them to provide a Veterans Well Being Assessment Liaison Service which would commence in May 2012. This would be a regional service provided with Newcastle Tyne and Wear NHS Foundation Trust, Combat Stress and the Royal British Legion. The service would be an outreach service and signpost clients to other organisations for support as necessary, this will complement the Trust community veteran service that the Trust currently provide for those needing specialist intervention and treatment. The funding has been granted for three years.

TEWV currently holds a contract with Ministry of Defence providing an inpatient service for military personal and the contract is currently being renewed and the Trust will be tendering to continue to provide the service. Members welcomed the service and were not aware that it was available. Ms Callaghan advised that the Trust work closely with Catterick Garrison and provide a high quality inpatient service to a small number of individuals for a short duration

Interim Deputy Chief Operating Officer, Darlington Shadow Clinical Commissioning Group (SCCG), Jackie Kay, reported that the SCCG has finalised its Clear and Credible Plan and it has been sent to NHS County Durham and Darlington as part of the assessment process for authorisation. A Delivery Plan for Year 1 has also been developed which sets out the strategic priorities and areas for delivery in the coming year.

Ms Kay advised that work was also underway on the Governing Body arrangements and Sub-Committees for the SCCG to ensure that all GP Practices are engaged. Ms Kay reported that the following appointments have also been made: Dr Harry Byrne has been appointed as the Interim Chair of the SCCG, Dr Andrea Jones has been appointed as Vice-Chair of the SCCG and Dr Richard Harker has been appointed as Quality Lead for the SCCG. The SCCG are currently deciding on the level of officer support required and it was hoped that the management support structure would be agreed towards the end of April. Consideration is also being given to the waves of authorisation; the SCCG will form a rationale as to which wave of authorisation they will take. Members were pleased that all the GP Practices are engaged and enthusiastic about the changes and moving forward.

Chief Executive, Darlington Borough Council, Ada Burns reported that at a recent meeting of the Tees Valley Leaders and Mayors there was some very good discussion about increased collaboration with the Foundation Trusts in the Tees Valley and it was recognised the beneficial impact on the wider economy collaboration would bring.

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

**HP35. 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 the original Work Programme and requested Members to reconsider the Work Programme to accommodate further issues that need to be included and approve a number of Terms of Reference in respect of items on today's agenda. Those being; County Durham and Darlington NHS Foundation Trust Quality Accounts and Darlington Health and Well Being Board.

At the Special Joint meeting of Adult and Housing, Health and Partnerships and Place Scrutiny Committees it was agreed how the work on Telehealth could be split between the three Scrutiny Committees and Terms of Reference have now been developed for each strand. There are however, clear cross cutting issues for this Committee and Adults and Housing Scrutiny Committee and Terms of Reference for this area of work (part of the work will be carried out jointly) and Members were requested to consider and approve this. It is anticipated that the work would commence in the next Municipal Year.

With regards to the to the item on the Work Programme in respect of Association of North East Councils – Health Task and Finish Group, the Chair suggested that following discussions Members had held in respect of Health and Well Being Boards, Public Health Transition and Clinical Commissioning Groups, that time had overtaken this piece of work and therefore this item should be removed.

**RESOLVED** – (a) That the current status of the Work Programme be agreed;

(b) That the submitted Terms of Reference in respect of County Durham and Darlington NHS Foundation Trust Quality Accounts and Darlington Health and Well Being Board appended to the report be approved;

(c) That the submitted Terms of Reference in respect of Telehealthcare appended to the report be approved; and

(d) That the item in respect of Association of North East Councils – Health Task and Finish Group be removed from the Work Programme.

**HP36. DARLINGTON'S PROGRESS WITH DEVELOPING A HEALTH AND WELL BEING BOARD** – The Chief Executive submitted a report (previously circulated) presenting to Members the progress to date in establishing Darlington's Health and Well Being Board. This was following on from a discussion at the Tees Valley Health Scrutiny Joint Committee meeting on 26<sup>th</sup> March 2012, where each of the five Local Authorities were invited to outline the progress being made in establishing a local Health and Well Being Board (HWB). The submitted report also directed Members to details in respect of the progress made by the four Tees Valley Local Authorities for comparison. Each Local Authority was asked to specifically address the following themes; the progress has been made so far on establishing a HWB, how the HWB has gone about starting to build its key relationships, how the HWB is beginning to set priorities and what they are and the HWB's early thoughts on how it will ensure it has access to appropriate expertise to fulfil its intended planning and strategic role.

Ms Burns introduced the report and advised that the development of the HWB was a personal priority as health and wellbeing can contribute to unmet need, and through stronger integration can also reduce financial pressures. Ms Burns explained that time has been taken to forge

relationships with NHS partners, with a lot of the early work being around building relationships, exploring the opportunities to align health and wellbeing and interlinking the review of the Local Strategic Partnership. It was acknowledged it would take time to get used to different political, Local Authority and NHS commissioning processes. Specific reference was made to some of the events organised as part of the community engagements and the opportunity for GPs and HWBs to engage would be explored.

Ms Kay reassured the meeting that Darlington SCCG was the lead SCCG for the Ambulance contract for County Durham and Darlington and Dr Jones was the named clinical lead as concerns were raised that no CCGs appeared to be interesting in commissioning an ambulance service.

**RESOLVED** – That the current position be noted.

**HP37. COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST – QUALITY ACCOUNTS** – The Acting Director of Nursing, County Durham and Darlington NHS Foundation Trust submitted a report (previously circulated) which provided information in respect of the Trusts Quality Accounts for 2012/13. The submitted report provided a list of priority areas to be included in County Durham and Darlington NHS Foundation Trust’s 2012/13 Quality Accounts to enable Members comments to be sought on the priority areas identified. The Health Act 2009 requires the Trust to publish an Annual Quality Account Report. The purpose of the Annual Report is for the Trust to assess quality across all of the healthcare services they offer by reporting information on 2011/12 performance and identifying areas for improvement during the forthcoming year and how they will be achieved and measured. The priorities for improvement are divided into the three components of quality; safety, experience and effectiveness.

Associate Director of Patient Safety and Governance, Joanne Todd, introduced the draft Quality Accounts previously circulated and tabled a Guide to the Quality Accounts to assist Members. Ms Todd drew Members’ attention to the salient points within the Quality Accounts and asked for Members comments.

Discussion ensued about significant challenges for the Trust in producing their Quality Accounts and making them reflective of the new integrated organisation; whether the Scrutiny Committee could receive regular performance reports against the priorities as Members felt it was difficult to comment on the whole document when unaware of the performance against the previous years priorities; Members welcomed the inclusion of dignity and requested more information could be about the stroke research that was carried out, as detailed in the Quality Accounts.

Ms Callaghan reported the TEWV Quality Accounts would also be produced towards the end of April 2012 and the Trust would continue to run workshops to provide stakeholders with updates against the priorities and members of this scrutiny Committee are invited to attend.

The Chair suggested that Members submit any comments to the Democratic Officer and that the Chair and Vice-Chair draft a response to be circulated electronically to all Members of the Scrutiny Committee for comments, prior to submission to the Trust.

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

(b) That Members' comments be fed back to the Democratic Officer and that the Chair and Vice-Chair draft a response to be circulated electronically to all Members of the Scrutiny Committee for comments; and

(c) That a final response on behalf of the Scrutiny Committee be submitted to CDDFT ahead of its deadline.

**HP38 POLICY REVIEW – (A) REVIEW OF PROGRESS ON POLICY REVIEW ITEMS**  
– (i) **Clinical Strategy Task and Finish Review Group** – Members of the Long Term Condition Task and Finish Group and the Women's and Children Task and Finish 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 first meeting and the key focus of the discussion was to identify ways of ensuring that joint work between this Council and CDDFT. He advised that there would be another meeting of the Task and Finish Review Group to explore utilising the facilities at the Dolphin Centre as a drop in centre to promote Long Term Conditions.

Councillor Newall reported that the Women's and Children Task and Review Group held a successful first meeting. The main focus of the Group will be to gather evidence to support the Trust in maintaining women and children's services across two acute sites. The Group will also explore concerns about changes to commissioning arrangements and the potential of the current services/pathway fragmenting. The Group will undertake site visits and follow a journey of an average child's pathway from birth to five years and an example of high risk women, premature baby and the specialist support and services available.

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

**(B) REVIEW ITEMS FINAL REPORTS – (i) Darlington Health Profiles Task and Finish Review Group** – The Director of Resources submitted a report (previously circulated) presenting the outcome and findings of the Task and Finish Review Group established by the Health and Partnerships Scrutiny Committee to consider the health profile for Darlington 2011.

Children and staff from Darlington School of Mathematics and Science and Mount Pleasant Primary School attended the meeting to present to Members the DVD in respect of the dangers of smoking and second hand smoking to children. Members were delighted with the DVD and discussed how the DVD could be promoted. It was agreed that the DVD would appear on the Council's website and promoted to all the Schools within the Borough and consideration be given about using the DVD as far and wide as possible.

Members welcomed the reported and discussion ensued on the recommendation in respect of oral health.

**RESOLVED** – (a) That with the following amendment to paragraph 27, the recommendation to read 'that consideration be given to further work in respect of water fluoridation to improve oral health of the population', the recommendations contained within the Final Report be approved; and

(b) that the approved Final Report be submitted to Cabinet for approval.

**(iii) Local Strategic Partnership Task and Finish Review Group** – The Director of Resources submitted a report (previously circulated) presenting the outcome and findings of the Task and Finish Review Group established by Health and Partnerships Scrutiny Committee to consider the proposed changes to Darlington Partnership, which created an opportunity for Members to input into the development to increase Member involvement and generate proposals for how a community contribution to Darlington Partnership is developed.

The Assistant Director - Development and Commissioning welcomed the report and thanked the Scrutiny Committee for their work in strengthening the relationship between the LSP and elected Members. Particular reference was made to inviting Parish Councils to the proposed quarterly meetings and a discussion ensued. The majority feeling at the meeting was that the Final Report should not be amended, as there is already a Parish Council representative on the LSP Board and that one of the proposed recommendations asks that an evaluation be carried out in 12 months' time which could also reassess the list of invitees to the meetings.

**RESOLVED** – That the Final Report be approved and forwarded to Cabinet for approval.

**(C) REVIEW OF PROGRESS ON THE IMPLEMENTATION OF RECOMMENDATIONS FROM PREVIOUS REVIEW GROUPS – NORTH EAST JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE – REGIONAL REVIEW OF THE HEALTH NEEDS OF THE EX-SERVICE COMMUNITY** – The Director of Resources submitted a report (previously circulated) reporting the progress made against the recommendations and Action Plan following the work undertaken by the North East Joint Health Overview and Scrutiny Committee – Regional Review of the Health Needs of the Ex-Service Community. Also tabled was the report from the North East Health Overview and Scrutiny Joint Committee, which provided the second monitoring report on the progress that has been made on the implementation of the recommendations across all 12 Local Authorities.

Members welcomed the report and acknowledged that the work of TEWV as mentioned earlier in the agenda needed to be included. Councillor H. Scott highlighted some work that the Clervaux Trust are undertaking and the Assistant Director - Development and Commissioning provided Members with an update of the Community Covenant for Darlington.

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