OVERVIEW OF HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Health and Partnerships Scrutiny Committee has undertaken.

Work Programme 2014/15

- 2. We have given consideration to the Work Programme for this Committee for the Municipal Year 2014/15 and possible review topics and in doing so, we have taken into account the reduced resources available and ensured that, in recommending our work programme to Monitoring and Co-ordination Group, any work we undertake will have demonstrable outcomes and contribute to the work of the Council and its strategic aims and objectives.
- 3. Our Work Programme continues to develop and Members have recently considered and discussed various items and have received updates and reports on a number of issues.
- 4. With regard to Stroke Services it has been agreed that this work will concentrate on rehabilitation and on the services available to patients in the community after they have left the rehabilitation unit at Bishop Auckland General Hospital.
- 5. Telehealth/Telemedicine/Telecare has progressed and the Scrutiny Committee agreed that this piece of work should continue but should focus mainly on projects in Darlington.
- 6. Members have expressed their real concern at the further delay of the implementation of the co-location of the Accident and Emergency Department and Urgent Care on one site at Darlington Memorial Hospital. We received information regarding further revision to the plans which has now become a much bigger project. Members agreed to work with the CCG on progressing matters and to work with County Durham and Darlington Foundation Trust on getting the message out to residents that the Accident and Emergency Department at Darlington Memorial Hospital is not closing.
- 7. Members have agreed that the Task and Finish Review relating to Access to GP's Appointments should remain on the work programme and have extended an invitation to Dr Jenni Steele to come to talk to the Scrutiny Committee once the evaluation of Prime Ministers Challenge Fund projects providing pre-arranged appointments at the weekend and overflow clinics is completed.
- 8. Work on Long Term Conditions is picking up pace now that the Project Co-ordinator has been appointed. The main priority of the Project Co-ordinator is

- communication and engagement around primary care. Eight to ten events are planned over the next 18 months to engage and inform staff. Further updates will be given to Scrutiny Committee when available.
- Members agreed to add a piece of work on raising awareness of sepsis to the work programme in view of the scale and the severe impact on suffers and their families and the significant cost to the NHS.

Health and Well Being Board

10. The Committee discussed the work of the Board in particular a recent presentation on Telehealth/Telemedicine which will be useful for Member's work on the topic and the Pharmaceutical Needs Assessment (PNA).

Five Year Forward View

- 11. We received a PowerPoint Presentation from Darlington Clinical Commissioning Group in relation to the Five Year Forward View which outlined some new ideas for how the NHS will work in the future in relation to delivery of services and how funding is managed.
- 12. Members were advised that NHS England and its national partners have announced a new programme to focus on the acceleration of the design and implementation of new models of care in the NHS. We noted that rapid progress was needed to speed up the development of new care models for promoting health and wellbeing and providing care that can then be replicated more easily in other parts of the system.

Performance Management

- 13. Members received a PowerPoint Presentation which detailed a revised approach to performance management which has been adopted to allow an assessment of the achievement of One Darlington: Perfectly Placed outcomes and the performance of services delivered by the Council which contribute to the achievement of those outcomes.
- 14. The presentation highlighted statistical data around the key performance indicators that were relevant to this Scrutiny Committee. Particular references were made to under-18 conceptions, alcohol specific hospital admissions and crime statistics.

Multi-disciplinary Teams (MDTs)

15. Scrutiny considered a Presentation which had been given to Adults and Housing Scrutiny Committee on the development of the MDTs in Darlington which covered initial achievements, areas currently being worked on and the positive work and responses during the first three months of operation, work to be undertaken during the second phase of implementation and the future plans for the next three months. Members were keen to work with Healthwatch to look at the experiences of patients here.

North East Ambulance Service

- 16. We considered a report of NEAS which had been prepared for Tees Valley Joint Health Scrutiny Committee in order to understand the overall current provision of emergency care services. The report outlined the key findings and ambulance activity within the Tees Valley and data relating specifically to Darlington.t.
- 17. Members raised concerns over the shortage of paramedics and the need to retain them once fully trained. We were pleased to note the overall satisfaction rate of patients of 93 per cent. We discussed the current 111 service and some issues associated with this. Members noted the peak of GP's calling ambulances between 1.00 pm and 3.00 pm following house visits and the impact on hospitals and wondered if there is a need for more flexible ways of working in G P Surgeries.

Councillor Wendy Newall
Chair of the Health and Partnerships Scrutiny Committee