

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

18 February 2014

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

APOLOGIES – Councillors I. Haszeldine, Nutt and Francis, (3)

ALSO IN ATTENDANCE – Councillor Copeland, Cabinet Member for Adult Social Care and Housing. (1)

OFFICERS IN ATTENDANCE – Catherine Whitehead, Assistant Director – Resources Group, Mary Hall, Senior Engagement Officer and Karen Graves, Democratic Officer.

EXTERNAL REPRESENTATIVES - Edmund Lovell, Associate Director of Marketing and Communications, Fiona McQuiston, Health Improvement Lead (for Cancer) and Barbara Potter, Clinical Risk Manager, County Durham and Darlington NHS Foundation Trust (CDDFT); Martin Phillips, Chief Officer, Darlington Clinical Commissioning Group (CCG), Michelle Thompson, Ian Groves and Liz McAllister, Healthwatch Darlington; and Sarah Callaghan, Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV).

HP46. MINUTES – Submitted – The Minutes (previously circulated) of the meetings of this Scrutiny Committee held on 10 December 2013 and 8 and 28 January 2014.

RESOLVED – That, with the inclusion of Councillor Taylor in the attendance of the meeting held on 10 December, 2013, the Minutes be approved as a correct record.

HP47. MATTERS ARISING – In respect of Minute HP45/Jan/14, Councillor H Scott advised Scrutiny that she had the assurance of the Health and Well Being Board that a Community Stroke Rehabilitation Service in County Durham and Darlington was a priority.

HP48. WORK PROGRAMME 2013/14 – The Director of Neighbourhood Services and 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. 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.

It was emphasised that the work programme was a rolling programme and any Member of this Scrutiny could request an item to be included provided that a Quad of Aims had been submitted to the Scrutiny Committee prior to ensure that it contributed to the strategic aims of the Council.

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.

Scrutiny Committee were advised that the de-commissioning of the Shuttle Bus Service, which operates between the Trusts two Acute Hospital sites, is to be discussed by the Trust Board in the near future as the contract comes to an end on 1st April 2014.

A Member questioned whether the CCG had made a decision on the Children's and Maternity Services at The Friarage Hospital and was advised that the decision will be discussed at the public Governing Body Meeting on 27 February 2014.

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

(b) That the Work Programme be updated to reflect the decisions of this Scrutiny Committee.

HP49. NHS TALKING ABOUT CANCERTEAM ENGAGAING LOCAL COMMUNITIES AND CANCER SYMPTON AWARENESS AND SYMPTON DETECTION – The Health Improvement Lead, County Durham and Darlington NHS Foundation Trust gave a presentation to Members on the work of the Talking About Cancer Team which is part of County Durham and Darlington NHS Foundation Trust and currently commissioned by Darlington.

Committee were advised that it was a small well established Team of professionals who worked in the community raising awareness around a range of different cancer focuses. The Team is purely a cancer Information and Support service and not involved with any fund raising activity. The focus was on signs and symptoms awareness designed to increase individuals understanding and encourage presentation to their GP to ensure possible early intervention and diagnosis.

Particular reference was made to January and February 2014 when the Team was focusing on raising awareness around the National Bowel Cancer Screening Programme. This NHS programme currently screens adults in the age range 60-75, due to the increased risk of bowel cancer with age.

Discussion ensued on the review of the service and the role of Scrutiny Committee as part of that review, whether statistical information was available that gave comparisons of patients attending GP's due to symptoms rather than a screening programme, the timescale for the Prostate Cancer Awareness Programme, the success of the Asthma Programme and whether a similar programme could be established for Cancer Awareness sessions and the extent of the advertising for community based awareness events in Darlington.

RESOLVED – That the thanks of this Committee be extended to the Health Improvement Lead for her informative presentation.

HP50. WINTER PLANNING AND PREPAREDNESS – The Chief Officer, Darlington Clinical Commissioning Group (CCG) and the Clinical Risk Manager, NHS County

Durham and Darlington NHS Foundation Trust (CDDFT) advised Committee of winter planning and preparedness recently undertaken.

Scrutiny was advised that Darlington CCG maintained regular contact with the CDDFT and that activity had been slightly down recently. This could be due to several schemes, including Paramedic Ring Back and co-location urgent care from 6.00pm, taking the pressure off the service.

It was reported that the 111 service had been partially successful and the Trust was currently looking at the Emergency Care Intensive Support Team. At the end of November the CCG had been awarded £2.1m, £1m had been allocated to the CDDFT and the remainder to other organisations to manage social teams to keep people out of hospitals.

Particular reference was made to the Ambulance handover to the Trust being a national measure this year and that delayed discharge was dealt with as appropriate to the case as figures were worked out differently and delayed discharges were defined differently by various services. Scrutiny were advised that a delayed discharge was defined as five days from being medically unfit to discharge, although it was emphasised that social services responses could be up to five days. The processes and systems were currently being reviewed and there was a need to initially treat the patient and not focus on discharge.

Concerns were expressed that patients calling the 111 service were advised to initially contact their GP thereby alleviating accident and emergency pressure but placing further demands on GP Practices. Scrutiny was assured that the patient always came first and that an emergency appointment at a GP was often the best course of action. It was essential that the correct balance was achieved.

The Associate Director of Marketing and Communications CDDFT made reference to a recent Stakeholder event at which Durham CCG had expressed concerns using GPs for emergencies, however, Darlington was in a better position although still had its challenges. There was awareness that a change was required with regard to emergency care and that urgent care needed to be on site 24 hours a day. He advised that a review was being undertaken and different models were being explored covering front of house i.e. admissions, assessment etc. It was also stressed that suitable care needed to be found for patients out of hospital and that 15 per cent of emergency care should be done out of hospitals as this was a very demanding service on the hospital.

Reference was made to the work of the Red Cross helping with discharges between the hours of 11.00am to 7.00pm, where an Ambulance should take a patient in an emergency situation and to an evaluation to be undertaken in April regarding Dr. Piper House.

The Chair advised that Scrutiny hoped to visit the A&E Department in the near future.

RESOLVED – (a) That the Chief Officer, Darlington Clinical Commissioning Group (CCG) and the Clinical Risk Manager, NHS County Durham and Darlington NHS Foundation Trust (CDDFT) be thanked for their informative presentation.

(b) That arrangements be made for members of Health and Partnerships Scrutiny Committee to undertake a visit to the A&E Department, Darlington Memorial Hospital.

HP51. HEALTHWATCH DARLINGTON UPDATE – SEPTEMBER 2013 TO JANUARY 2014 – The Chair of Healthwatch Darlington submitted a report (previously circulated) on the work of Healthwatch Darlington for the period September 2013 to January 2014.

Scrutiny Committee were advised that the Board, which was hoping to be floating independently by 31 March 2014, were now Directors of Healthwatch Darlington and currently awaiting charitable status with the Charity Commission. Meetings were being held with the Carers Federation and the local authority to ensure a smooth exit process. Healthwatch Darlington is the first in the north east to be at this stage and was meeting with other Healthwatches in order to share good practice.

Particular reference was made to the Healthwatch Work Plan specifically the seven Task and Finish Groups which were giving consideration to Enter and View, GP Access, Data Intelligence, Equality and Diversity, Cancer Services, Mental Health and Children and Young People. The outcomes of the Review Groups were to respond to current concerns, improve services for patients, monitor quality of services, explore difficulties encountered by different cultures, understand the costs of meeting unmet needs for people living with cancer and other long term health conditions, promote services and improve support for people affected by suicide and understand the needs and concerns of children and young people.

Scrutiny was also informed that two training and induction sessions had recently been held for current and new volunteers to meet other volunteers and staff members. This enables the volunteers to sign up to the various Healthwatch Task Groups and training opportunities.

Healthwatch Darlington continues to work closely with various organisations which helps co-ordinate activities and gives an opportunity for feedback between key organisations, service users, carers and the public.

Discussion ensued on the Board coping extremely well with four Directors as opposed to five, Healthwatch complying with the Carers Federation requirements and the excellent work undertaken by the volunteers.

The Chair of Healthwatch Darlington welcomed the suggestion that Healthwatch be included on all Health and Partnerships Task and Finish Review Groups so that information could be shared. However it was stressed that work needed to be shared and not duplicated.

RESOLVED – (a) That the work currently being undertaken by Healthwatch Darlington be noted.

(b) That this Scrutiny Committee work closely with Healthwatch Darlington on all Task and Finish Review Groups being undertaken.

HP52. ANNUAL VETERANS REPORT – The Chief Executive submitted a report (previously circulated) informing Scrutiny of progress relating to work, at local and regional levels, with veterans and the service providers that support them .

The submitted report referred to the commitment Darlington Borough Council (DBC) had made to support work undertaken in partnership to support the Armed Forces and the delivery of the Community Covenant. Members were advised that DBC continued to work closely with other Tees Valley Authorities to understand the issues faced by veterans and that a joint proposal for a specialist worker to work across the whole of the Tees Valley, to help co-ordinate activity in relation to veterans, had been submitted.

Darlington had also successfully drawn down £35k to support cohesion activity at West Park Academy following a successful bid for Armed Forces Community Covenant Grant. The money was to be used to create a play area and outdoor sensory garden, which will have wheelchair access, for use by the local community. A bid for funding for a Veterans Café by Age UK was unsuccessful, however this work was continuing and the bid may be re-submitted at a later date.

The Regional Action Plan outlining the 47 recommendations addressed to local authorities, the NHS, Armed Forces and various other organisations detailed the regional on-going and completed work in relation to veterans.

Discussion ensued on the Veterans' Wellbeing Assessment and Liaison Service (VWALS), provided by TEWVS in partnership with the Royal British Legion and Combat Stress and launched in June 2012. VWALS is a new mental health and wellbeing service to support veterans and their families in the north east and provides a single point of access to the range of mental health support services which already exist across the region, making it much easier to get signposted to the right help and support.

VWALS also takes factors such as housing, welfare and employment issues into consideration and, when appropriate, liaises with local organisations to ensure that veterans also receive support in these areas as part of their care.

RESOLVED – (a) That this Scrutiny Committee acknowledges the work, undertaken over the last year, with other local authorities in relation to veterans.

(b) That this Scrutiny Committee notes the success of funding applications that have been submitted.

HP53. QUALITY ACCOUNTS – PROGRESS REPORT – The Director Neighbourhood Services and Resources submitted a report (previously circulated) advising Members of the recent meeting in respect of the County Durham and Darlington NHS Foundation Trust Quality Accounts.

The submitted report advised Members that it had been agreed that the Scrutiny Committee would be more involved, at an early stage, with local Foundation Trusts Quality Accounts to enable it to have a better understanding and knowledge of performance when asked to submit a commentary on the Quality Accounts at the end of the Municipal Year 2013/14.

Scrutiny Committee have committed to attending the Stakeholder events hosted by Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) and County Durham and Darlington NHS Foundation Trust (CDDFT) and established Working Groups with members of Healthwatch Darlington to receive six monthly performance reports from both Trusts.

Particular reference was made to the information gathered which Committee were asked to note in preparation for its response to the Quality Accounts in April/May 2014.

RESOLVED – That the notes of the meeting held on 15 January 2014 in respect of County Durham and Darlington NHS Foundation Trust be noted.

HP54. ALCOHOL TASK AND FINISH REVIEW GROUP – Submitted – The notes of the initial meeting of Alcohol Group held on 13 January 2014 which gave consideration to indicators in relation to drugs, alcohol and smoking from the Darlington Health Profile for 2013.

Discussion ensued on the actions of the Group, the need to talk to young people about their drinking habits and non-alcoholic drinks being very sugary.

RESOLVED – That the notes be approved.

HP55. ACCESS TO GP APPOINTMENTS TASK AND FINISH REVIEW GROUP – Submitted – The notes of the meeting of the Access to GP Appointments Task and Finish Group held on 17 January 2014 which gave consideration to experiences by members of the public when trying to make a GP Appointment, the impact of an increasing population of GP's and the development of a survey relating to GP Appointments.

Concerns were expressed that the Group did not focus on a handful of specific cases and looked at the overall service offered. It was also stressed that duplication of surveys should be avoided.

Discussion continued on the possibility of including Practice Managers in this piece of work, the impact of missed appointments on GP Practice, the use of text messaging to ensure appointments are kept, some GP appointments being more appropriate for Nurses, use of telephone appointments and the work undertaken by pharmacies to alleviate strain on GP Practices.

RESOLVED – (a) That the notes of the Group be approved.

(b) That the progress and next steps be noted.

HP56. SUSTAINABLE COMMUNITY STRATEGY – The Chief Executive submitted a report (previously circulated) together with Darlington's Sustainable Community Strategy (also previously circulated), One Darlington: Perfectly Placed, which it was proposed to revisit and refresh in light of the changed circumstances since its approval in 2008.

The submitted report outlined the background to the approval of Darlington's Sustainable Community Strategy (SCS); the need, as a result of the Council's current financial position and the significant changes to the national economic situation to review the vision and the outcomes to ensure the Council and its partners continued to be focussed on key outcomes; and the processes involved in developing and approving a revised Strategy.

The Assistant Director – Chief Executive reported that the Local Strategic Partnership had re-visited the original vision One Darlington; Perfectly Placed and that the Council had, as a result of the Money Talks Events and the Peer Review, developed a 'Vision on a Page' (also previously circulated) which showed the overall role of the Council in driving forward the vision for Darlington. It was reported that the vision, if approved by Cabinet and Council, had been developed in a way that enabled all partners to focus on the same vision, outcomes and conditions ,whilst developing a statement about their own roles and the steps they would need to take within the own organisations.

It was proposed that the detailed delivery of the overall vision would be developed through further exploration with Members, partners and staff prior to the development of a further document which would fully articulate the vision and that further work thereon would be undertaken with all of this Council's Scrutiny Committees to develop appropriate delivery mechanisms to enable the SCS to be updated.

Particular reference was also made to the need to measure performance against the key objectives and priorities and how this would be achieved and it was reported that a revised performance development framework process was currently being developed and would be reported to Members in due course. It was anticipated that this new framework would assist Members in developing their work programmes over the next Municipal Year and would focus Members on ensuring any work undertaken would reflect the strategic aims of the Council.

Discussion ensued on the need to involve Healthwatch Darlington, the timescale being extended to enable Scrutiny to effectively contribute to this piece of work and a Special meeting of this Scrutiny Committee being arranged to give full consideration to the Sustainable Community Strategy.

RESOLVED – That the report be noted and a special meeting of this Scrutiny Committee be held to enable further work to be undertaken.