

DURHAM COUNTY COUNCIL

At a Meeting of **Adults, Wellbeing and Health Overview and Scrutiny Committee** held in Committee Room 2, County Hall, Durham on **Wednesday 6 September 2017 at 9.30 am**

Present:

Councillor J Chaplow (Chairman)

Members of the Committee:

Councillors A Bainbridge, R Bell, P Crathorne, R Crute, G Darkes, M Davinson, E Huntington, L Mavin, A Patterson, S Quinn, A Reed, J Robinson, M Simmons, H Smith, L Taylor and O Temple

Co-opted Members:

Mrs R Hassoon

Also Present:

Councillor M McKeon

1 Apologies

Apologies for absence were received from Councillors C Kay, K Liddell, A Savory and Mrs B Carr

2 Substitute Members

There were no substitute members.

3 Minutes

The Minutes of the meeting held on 7 July 2017 were agreed and signed by the Chairman as a correct record.

4 Declarations of Interest

There were no declarations of interest.

5 Any Items from Co-opted Members or Interested Parties

There were no items from Co-opted Members or interested Parties.

6 South Tyneside and Sunderland NHS Partnership Path to Excellence Consultation

The Committee received a report of the Director of Transformation and Partnerships that provided background information in respect of the Path to Excellence consultation

currently being undertaken by South Tyneside and Sunderland NHS Partnership (for copy see file of Minutes).

The Principal Overview and Scrutiny Officer advised Members that copies of the full consultation document were available in the Resource Centre together with copies of the consultation questionnaire.

The Chairman welcomed the following officers from South Tyneside and Sunderland NHS Partnership to the meeting:-

- Dave Gallagher – accountable officer NHS Sunderland Clinical Commissioning Group (CCG)
- Peter Sutton – director of planning and business development South Tyneside Hospital NHS Foundation Trust and City Hospitals Sunderland NHS FT
- Scott Watson – director of contracting NHS Sunderland CCG
- Michael Houghton – director of commissioning NHS North Durham CCG
- Patrick Garner – programme manager for Path to Excellence
- Caroline Latta – communications and engagement lead for Path to Excellence

The officers provided a detailed presentation that covered the following points (for copy see file of Minutes):-

- Why hospital services need to change – strategic context
- South Tyneside and Sunderland Health Group –
 - Joint Aims
 - Joint Values
- The Clinical Change Process
- Clinical Service Reviews
- Key Tests
- Robust Governance
- Key Impact Assessments
- Vulnerable Services First
- Stroke Services
 - Temporary Stroke Change
 - Hospital Trust Acute Scores
 - Options 1 – 3
 - Preferred Option for stroke care
- Maternity and Healthcare services
 - Services challenges
 - Women's healthcare gynaecology patient pathway

Options 1 and 2

- Children and Young People's Healthcare Services
 - Service challenges
 - Patient Pathway
 - Options 1 and 2
- Impact for Durham Patients
- Durham Patient Flow
 - Stroke Admissions
 - Maternity Deliveries

- Elective Gynaecology
- Emergency Gynaecology
- Under 16 A&E Attendances
- Under 16 Emergency Admissions
- NHS Legal and Policy Context for Major Service Change
 - NHS Legal duties
 - Best practice consultation approach
- What happens next
- How to get involved
- Next Event details

Mrs Hassoon asked in relation to stroke services if the journey time and the risks involved with the changes had been considered. She went on to say that when someone had rehabilitation and extended stay in hospital would someone be responsible to ensure that a care plan was in place before the patient was discharged. She was particularly concerned when there was a cross-over of care from the Local Authority and CCGs. The Director of Planning and Business Development said that there would be an increase in travel time for residents in South Tyneside however national evidence had shown that it was important to get people to the right centre for excellence and that this could save lives. He added that it was also important to get the right people in the right place with the right skills and equipment.

Councillor Bell asked how this fit in with the Sustainability and Transformation Plans. The Accountable Officer advised that this consultation fits within the Northumberland, Tyne and Wear and North Durham STP and work had started prior to the introduction of it. He added that crossing boundaries was nothing new to the NHS and that there was very little change for the residents of Durham.

Councillor Robinson said that he could not object to this plan as it did have its advantages for the people of County Durham however he was concerned about the levels of staffing and suggested that the Secretary of State should be asked the question of how to address this.

Councillor Crute said that although the impact for County Durham was minimal people would want to show solidarity for what was happening at South Tyneside and Sunderland. He was concerned as to the impact of the Local Authority budgets as care budgets were not sufficient enough to deal with the demand. He agreed with the Chairman that pressure should be placed on the Secretary of State to address retention and recruitment of staff. The Director of Planning and Business Development said that there still needed to be centralisation of services regardless of funding, staffing and services. He added that there would be an improvement of the quality of services provided for the residents of South Tyneside but that they would be looking at the impact of travel.

Referring to the changes, Councillor Temple asked if the pathway for stroke services had been changed as he was concerned that increased travel times could increase the risk to the patient. The Director of Planning and Business Development advised that investment had been made in additional nurse practitioners to help with these issues and to deliver speedy access. Councillor Temple asked for clarification that this was triage to A&E improvements rather than the direct pathway and was advised that there would be a

quicker time to the stroke ward which would be an improvement for the patient especially out of hours.

The Corporate Director of Adult and Health Services commented that the overall budgets and impact for local authorities would remain a challenge. He said that the authority would need to continue to monitor the demand for post stroke services.

Councillor Robinson said that the STP had discussed unintended consequences in the NHS and the pressures faced by local authorities to deliver community based services. He asked for confirmation that there would be no change to the Durham Treatment Centre proposals that had previously been reported to the Committee and was assured that it was still on track.

Referring to the shortage of staff, Councillor Darkes asked if there were any plans being developed at a local level to address the recruitment and retention difficulties being referenced including the potential for University sponsorships to fill any gaps. The Accountable Officer said that it took a long time to train medics and that there had been a national recruitment drive. He added that CCGs were bringing in a workforce from Sunderland University and were looking at training people in the North East and retaining staff.

Councillor Darkes suggested that officers should put a positive note on the presentation slides to reference this.

The Principal Overview and Scrutiny Officer reported that the next meeting of the Committee would be held on 2 October 2017 and suggested that a further report be brought to that meeting which detailed a draft response to this consultation based upon the points raised. He also suggested that a further report be brought to the Committee's January meeting outlining the feedback from the consultation and engagement process prior to the final decision being made by the Partnership.

Resolved:

- (i) That the report be received;
- (ii) That the information detailed within the Path to Excellence public consultation documents and the presentation given to the Committee be noted;
- (iii) That a draft response to the consultation based upon members comments at today's meeting be submitted to the Committee's meeting scheduled for 2 October 2017;
- (iv) That a further report being brought back to the Adults Wellbeing and Health Overview and Scrutiny Committee detailing the feedback from the communication and engagement activity prior to a final decision being made by the CCGs in respect of the proposals, be agreed.

7 Proposed establishment of a Northumberland, Tyne and Wear and North Durham STP Joint Health Scrutiny Committee

The Committee received a report of the Director of Transformation and Partnerships that considered the establishment of a Joint Health Scrutiny Committee under the provisions

of the Health and Social Care Act 2012 involving all local authorities affected by the Northumberland, Tyne and Wear and North Durham Sustainability and Transformation Plan (STP) and any associated service review proposals (for copy see file of Minutes).

The Principal Overview and Scrutiny Officer informed the Committee that following the well-established joint scrutiny for the Southern STP, the former Chairman of this Committee wrote to the Northern STP local authorities with a proposal to establish a joint body. Each local authority had reported this to their own committees to endorse the implementation. He added that any referral to the Secretary of State would remain with each local authority. Membership of the body would be 2 labour and 1 liberal democrat member from this committee.

Mrs Hassoon asked if co-opted members would be represented. The Principal Overview and Scrutiny Officer advised that this option had not been taken up however he informed the Committee that all meetings were open to the public.

Councillor Bell asked for an update on the STPs and was advised that the Southern STP was still in its draft stage with a statutory consultation yet to commence. The Principal Overview and Scrutiny Officer advised that a number of requirements had been placed upon the STPs from NHS England whereby they had to set out associated funding requirements prior to any consultation plans being finalised. With regards to the Northern STP a number of pre-existing plans were in place and engagement activities had taken place in January and February 2017. He hoped that the first meeting of the Northern STP joint scrutiny Committee would be arranged before the end of October.

8 Preventative Mental Health Review and Re-commissioning Update

The Committee received a report of the Corporate Director of Adult and Health Services that gave an update on the future plans for community preventative mental health services in County Durham, first reported to Overview and Scrutiny in November 2016 (for copy see file of Minutes).

The Strategic Commissioning Manager for Mental Health and the Commissioning Policy & Planning Officer give details of the new countywide mental health, promotion, prevention and wellbeing model. The key elements of the model were highlighted as:-

- A life course approach defined as 'Starting Well', 'Developing Well', 'Living Well', 'Working Well' and 'Ageing Well' .
- Outcomes related to promotion, prevention, early intervention and recovery, including the 'Five Ways to Wellbeing'.
- Improved access through the Well Being for Life service (for adults) and One Point service (for children and families) and outreach into community buildings, complemented by signposting and navigation along pathways to other services.

Members were informed that there would be better access online with self help material available and which places to go to would be highlighted. The no wrong door approach would be embedded across all services so that staff could direct people to the right place for the right service.

In relation to the current contract the Committee were informed that money had been ring fenced for Mental health Services and was protected to some degree however there was no guarantee that this could be sustained.

Work was ongoing to improve access to CAMHS and the crisis element for suicide prevention had improved to ensure that people received the right support.

The Committee were informed that regular progress reporting would go through the Metal Health Partnership Board and the Health and Wellbeing Board.

Councillor Reed referred to alcohol services and that there did not appear to be any support for people from the Crisis Services to achieve an overall outcome and no support beyond the initial help. The Strategic Commissioning Manager advised that the substance misuse service was being re-tendered at present and that temporary arrangements were in place. He said that the service provided support across the County and that they work closely with the Mental Health Service.

The Principal Overview and Scrutiny Officer went on to advise that a report had been to cabinet on the Drug and Alcohol Service and that a seminar was arranged for all members. He went on to inform members that the Safer and Stronger OSC played an active role in the monitoring of the pre-existing services and the work undertaken to look at the new model. The integral element of mental health would be looked at by this committee.

Resolved:

- (i) That the contents of the report and the implementation plan for the new mental health promotion, prevention and wellbeing model be noted.
- (ii) That a further report during 2018 outlining progress and key implementation stages be received.