DURHAM COUNTY COUNCIL

ADULTS, WELLBEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

At a Meeting of Adults, Wellbeing and Health Overview and Scrutiny Committee held in Committee Room 2, County Hall, Durham on Monday 1 October 2012 at 10.00 am

Pre	sent:
-----	-------

Councillor P Stradling (Chair)

Members of the Committee:

Councillors J Alvey, J Bailey, R Crute, A Savory, P Stradling, O Temple and A Wright

Also Present:

Councillor M Nicholls

Apologies:

Apologies for absence were received from Councillors R Todd, J Chaplow, J Armstrong, R Bell, K Davidson, T Taylor, Mrs H Gibbon and Mrs R Hassoon

Councillor Stradling welcomed Betty Carr, Vice-Chair of County Durham LINk, to the meeting and acknowledged the valuable contribution of the County Durham LINk to the work of the Committee.

1 Minutes

The Minutes of the meetings held on 24 July and 13 August 2012 were confirmed as a correct record and signed by the Chair.

Matters Arising

24 July 2012

The Principal Overview and Scrutiny Officer referred to the minutes of the meeting relating to the Momentum Project. He informed the Committee that an approach had been made to the Chair of Hartlepool Health Scrutiny Forum regarding the establishment of a joint Health Scrutiny Committee involving Hartlepool Borough and Durham County Councillors. The Chair of Hartlepool Health Scrutiny Forum had responded to the approach indicating that he did not feel it necessary to formally establish such a joint Health Scrutiny Committee and that current informal arrangements should continue. As a consequence of the response, an approach had been made to Alan Foster, Chief Executive of North Tees and Hartlepool NHS Foundation Trust, who would be attending the meeting of the Committee on 26 November to provide an update on the Momentum Project and explain progress regarding consultation.

The Principal Overview and Scrutiny Officer referred the Committee to Minute Number 9 and reported that a special meeting of the Committee had been arranged for 15 October 2012 at which the first agenda item would be the strategic approach to budgeting and the Quarter 1 revenue report for 2012/13.

13 August 2012

The Principal Overview and Scrutiny Officer referred to Minute A2 and informed the Committee that a response had been submitted on behalf of the Committee to the recommendations of Advisory Committee on Resource Allocation (ACRA). An acknowledgement of the representations had been received together with details of the membership of ACRA which had been circulated to Committee Members.

2 Declarations of Interest

There were no declarations of interest.

3 Items from Co-opted Members or Interested Parties

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

4 Media Relations

The Principal Overview and Scrutiny Officer showed examples of press articles relating to Adults. Wellbeing and Health which related to:

- Proposals by North Tees and Hartlepool NHS Trust to progress the building of a new hospital at Wynyard – the Trust would be attending the meeting of the Committee on 26 November to provide more details.
- The consultation process by the County Council on the Joint Health and Wellbeing Strategy – a report and presentation would be made to the special meeting of the Committee on 15 October to enable comments on the draft priorities to be fed into the consultation. The consultation period ended on 19 October 2012.
- Reference to review of ambulance cover by the North East Ambulance Service, particularly referring to the Durham Dales. Assurances had been sought that no changes would be implemented without a formal consultation exercise. Details of the proposed independent evaluation referred to in the minutes of the meeting held on 24 July had been received, and the Rural Ambulance Monitoring Group were involved in the process. Councillor Nicholls referred to the increased pressure now being placed on ambulance staff countrywide caused by the closure of A and E units. Councillor Savory informed the Committee that the press article referred to had caused great concern to the residents of the Durham Dales around any changes to the ambulance service. Councillor Stradling reminded the Committee it had received assurances that full consultation by the North East Ambulance Service would take place before any decisions were made.

5 Quality Legacy Project

The Committee considered a report of, and received a presentation from, Rosemary Grainger, Project Director of County Durham and Tees Valley Acute Services Quality Legacy Project which provided details of the Project (for copy of report and slides see file of Minutes).

The objective of the Quality Legacy Project was to reach consensus on the quality standards in acute services it was wanted to achieve, using levels of national best practice. The Project would identify opportunities for meeting these standards and assess the financial environment and workforce constraints in which such improvements may take place. The Project would support and enhance the commissioning of acute hospital services as Primary Care Trusts transferred their commissioning responsibilities to Clinical Commissioning Groups (CCG's) over the next year.

Councillor Stradling thanked the Project Director for the presentation. He expressed concerns that cost and requirements had been discussed and asked what would happen if the Project stated that a level of provision was needed which could not be afforded. The Project Director replied that this would be for partners to discuss and perhaps work together to change working practices to attempt to reach the needed level of provision.

Councillor Temple asked what the role of the Committee was in the work being carried out by the Project, as decisions made by the Project could have a great impact on the work of the Committee. The Project Director replied that the Project was not a decision making executive body, but would make recommendations to CCG's, so that when CCG's started to commission services, they were fully aware of the implications. A key role for the Committee would be to work with CCG's when they decided how to commission to the standards set out by the Project.

Councillor Crute asked about the impact that this Project would have on CCG's. The Project Director replied that the Project would provide checks and balances for CCG's and would require CCG's to work together. One of the key roles of CCG's was to continue to improve standards and outcomes, and this Project was aimed at helping them to do this.

Resolved:

That the report and presentation be noted, and the Committee continue to receive updates as the Project develops.

Councillor Stradling vacated the Chair and left the meeting. Councillor R Crute assumed the Chair.

Councillor R Crute (Chair)

6 County Durham Local Involvement Network (LINk) Annual Report 2011/12

The Committee considered a report of the Assistant Chief Executive and received a presentation from Betty Carr, Vice Chair, County Durham LINk, which provided details of the LINk Annual Report for 2011/12 (for copy of report and slides see file of Minutes). Members noted the following key issues highlighted by the LINk within their Annual Report:-

- Review of LINk's Governance arrangements;
- Enter and View Visit Reports;
- An independent evaluation of the LINk;
- The work undertaken with the County Council in developing local HealthWatch arrangements.

The Chair thanked the Vice Chair of LINk for the assistance that LINk had provided in the work of the Committee. He stressed the need to ensure that the experience and knowledge contained within LINk was not lost during the transition around Health reform.

Resolved:

That the report and presentation be noted.

7 Quarter 1 2012/13 Performance Management Report

The Committee considered a report of the Assistant Chief Executive that presented progress against the council's corporate basket of performance indicators and reported other significant performance issues for the first quarter of 2012/13 (for copy see file of Minutes).

Councillor Crute referred to paragraph 7(a) and asked why the average length of stay for a permanent residential admission had reduced from 547 days in 2010/11 to 487 days in 2011/12. Peter Appleton, Head of Planning and Service, Children and Adult Services replied that this reduction in the length of stay was due to people staying in their own home longer, which resulted in their age of admission being greater and length of stay being shorter.

Councillor Temple informed the Committee that he was pleased with the increase in screening for bowel cancer as mentioned in paragraph 7(b) and asked whether any lessons from this increase could be transferred to other campaigns such as the initiation of breastfeeding. The Head of Planning and Service, Children and Adult Services replied that although lessons were learned from successful campaigns, these were not always transferable, as target audiences were often different.

Councillor Wright referred to paragraph 11(b)(iii) regarding excess winter deaths and expressed concern that there was not sufficient publicity about the flu vaccination. Mary Bewley, Head of Communications and Involvement, NHS County Durham and Darlington informed the Committee that there had been a slight delay in getting information from the Department of Health but added that information would be available in time that the flu vaccination programme needed to commence.

Resolved:

That the report be noted.

8 Health and Social Care Act 2012 and the Implications for Health Overview and Scrutiny

The Committee considered a report of the Assistant Chief Executive which detailed the progress made in implementing the recommendations of the Health and Social Care Act 2012 and the implications for Health Overview and Scrutiny report considered by the Committee at its special meeting held on 13 August 2012 (for copy see file of Minutes).

The Principal Overview and Scrutiny Officer referred the Committee to paragraph 4 of the report and reported that the Chair of the Committee and Overview and Scrutiny Manager were to deliver the proposed information sharing presentation to the Durham Dales, Easington and Sedgefield Clinical Commissioning Group (CCG) at their development day.

Discussions were taking place with North Durham CCG for a similar presentation to take place.

The Principal Overview and Scrutiny Officer informed the Committee that arrangements were being made for the CCG's final Clear and Credible plans to be presented to the Committee at its meeting to be held on 26 November 2012.

The Principal Overview and Scrutiny Officer informed the Committee that the lead officer identified in the NHS Durham Dales, Easington and Sedgefield CCG was Mr Joseph Chandy, not Dr Joseph Chandy as printed in the report.

Reference was made to the participation of members of the Committee in the "Big Tent" engagement event in respect of the Draft Health and Wellbeing strategy which was currently out to public consultation. The Principal Overview and Scrutiny Officer indicated that a report and presentation on the Health and Wellbeing strategy and the draft priorities detailed therein would be considered at a special meeting of the Committee on 15 October 2012.

Resolved:

- (i) That the report be noted
- (ii) That the progress made in implementation of the recommendations previously agreed in respect of the implications for Health Overview and Scrutiny of NHS Reforms presented in the Health and Social Care Act 2012 be noted.

9 Department of Health Consultation - Local Authority Health Scrutiny

The Committee considered a report of the Assistant Chief Executive which provided details of the County Council's response to the Department of Health consultation paper on local authority health scrutiny (for copy see file of Minutes).

The Principal Overview and Scrutiny Officer informed the Committee that the response was shown at Appendix 2 of the report and had been submitted on 6 September 2012.

Resolved:

- (i) That the report be noted
- (ii) That the corporate response to the consultation at Appendix 2 be endorsed.

Signed				
Chairman of the meeting	held or	1 26 No	vember	2012