

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 **Friday 8 April 2016** at **9.30 am**

Present:

Councillor J Robinson (Chairman)

Members of the Committee:

Councillors J Armstrong, R Bell, P Brookes, M Davinson, E Huntington, J Lindsay, P Stradling and O Temple

Co-opted Members:

Dr L Murthy

Also Present:

Councillor L Hovvels (Cabinet Portfolio Holder for Adult and Health Services)
Margaret Dent and Tony Cooke (representatives from the Rural Ambulance Monitoring Group)
Patrick Scott (Director of Operations, Durham and Darlington TEW NHS Trust)

1 Apologies for Absence

Apologies for absence were received from Councillors P Crathorne, S Forster, K Hopper, M Nicholls, L Pounder, A Savory, Mrs B Carr and Mrs R Hassoon.

2 Substitute Members

There were no substitute members in attendance.

3 Minutes

The minutes of the meeting held on 1 March 2016 were confirmed as a correct record and signed by the Chairman.

The following matters arising were reported.

With reference to item 6 of the minutes of 1 March, which detailed the concerns raised by Dr Murthy that a commission set up by the North East Combined Authority (NECA) to report on health and social care integration, excluded representation from the North East, the Principal Overview and Scrutiny Officer advised that he had contacted the NECA to express the Committee's concerns. A response had been received from Jane Robinson, Chief Executive of Gateshead MBC and project lead, who had given assurances that all local and regional stakeholders will be engaged including local Healthwatch organisations and that a series of listening events is planned.

She also gave a commitment to ongoing communication with stakeholders throughout the process which will identify further opportunities for engagement.

The Principal Overview and Scrutiny Officer informed members that the consultation on proposed changes by Durham Dales, Easington and Sedgefield CCG to urgent care services commenced on Monday 14 March and noted that confirmation had been received and circulated to the Committee in respect of the nine public engagement events that were to be held throughout the County.

4 Declarations of Interest

There were no declarations of interest.

5 Media Issues

The Principal Overview and Scrutiny Officer provided the Committee with details of the following items which had appeared in the press:

- **Mental health service appoints new boss – Northern Echo 21 March 2016**
Colin Martin has been appointed as the new Chief Executive of the Tees, Esk and Wear Valleys NHS Foundation Trust and he will take up the position on 1 May 2016.
- **North East Ambulance Service set for formal inspection – Northern Echo 23 March 2016**
The Chief Inspector of Hospitals is to lead an inspection of the North East Ambulance Service NHS Foundation Trust starting on 18 April with report on its findings to be published by the Care Quality Commission later this year. The Principal Overview and Scrutiny officer advised that there will be a submission from the Adults, Wellbeing and Health Overview and Scrutiny Committee.
- **Proposals for changes to urgent care in County Durham announced – Northern Echo 4 April 2016**
Consultation regarding proposed changes to urgent care services commenced on Monday 14 March 2016.
- **Crippling pressure on NHS in North East has led to missed waiting time targets across the region – Evening Chronicle 19 March 2016**
Every hospital trust in the North East region had missed their A&E waiting time targets in January, The weakest performer was County Durham where just 87.2% of patients waited less than four hours from arrival to admission, transfer or discharge, which is below the 95% expected standard.
- **Around the clock care for dying ‘not good enough’ – BBC News Website 31 March 2016**
A national review of end of life care has found most hospitals are failing to provide face to face palliative care specialists around the clock. Only 16 out of 142 hospital sites in England offer specialists on site 24 hours a day.

Resolved:

1. That the contents of the presentation be noted.

6 Any Items from Co-opted Members or Interested Parties

Councillor Richard Bell referred to the Committee's previous discussions in respect of the availability of performance information from North East Ambulance Service (NEAS) and reported that the members of the Rural Ambulance Monitoring Group (RAMG) / DDES CCG Ambulance Patient Representatives Group had approached him to express their concern at the lack of NEAS monitoring data being made available, and, that the CCG meetings have now changed from quarterly meetings to one meeting every six months. He added that it is becoming difficult to hold NEAS to account in any meaningful way. Margaret Dent from the Rural Ambulance Monitoring Group added that the data had not been made available to them and that she had requested that this be rectified.

The Principal Overview and Scrutiny Officer reminded members that NEAS had given a commitment to provide performance information to the Committee and the RAMG when an agreed format had been endorsed by the Trust that adhered to Information Governance and Data Protection requirements. Performance information reports were received from NEAS on 18 February and 11 March and had been circulated to the Committee electronically. Mark Cotton, Assistant Director of Communications and Engagement, had confirmed by email that these reports were available on the NEAS website and he had provided a link to the site. The Principal Overview and Scrutiny Officer advised that he would highlight the concerns of the Committee on this matter with NEAS and indicated that he would share the link to the NEAS website with the RAMG members.

In response to the second point raised by Cllr Bell, the Principal Overview and Scrutiny Officer replied that whilst representatives from the Committee attended the Ambulance PRG meetings, they were part of the DDES CCG governance arrangements and a matter that this Committee had no control over.

The Committee agreed that an email should be sent to Mark expressing their concerns.

7 2015/16 Quarter 3 Performance Management Report

The Committee noted a report of the Assistant Chief Executive, presented by the Head of Planning and Service Strategy, Children and Adults Services, which presented progress against the Council's corporate basket of performance indicators for the Altogether Healthier theme and reported other significant performance issues for the third quarter of 2015/16 (for copy see file of Minutes).

The Head of Planning and Service Strategy highlighted the key achievements and provided analysis of the report. Information provided included that the Stop Smoking Service is on track to achieve the 2015/16 target and cancer screening rates are higher in County Durham than both regional and national rates. Referring to paragraph 5c of the report, the Head of Planning and Service Strategy commented that the reported delay of transfers from hospital to care are not necessarily attributable to a lack of availability of adult social care. It was reported that the percentage of mothers smoking at time of delivery has improved on the same period last year, and, the number of pregnant women setting a date to stop smoking has continued to rise.

On a less positive note, the number of people receiving NHS health checks is lower than the national and regional performance and this matter is being monitored by the Health and Wellbeing Board. The Head of Planning and Service Strategy commented that an area of particular concern is the deterioration in the number of successful completions from alcohol and drug treatment for opiates. Lyn Wilson, Consultant in Public Health, informed the Committee that a new, single provider, is now in place and initial baseline work is being carried out prior to a performance plan being established. It is hoped that this will lead to improvements in quarter four.

Tracker indicators show childhood obesity has increased and it is worse than the national and regional averages and the report provided details on the action being taken to reduce this. The suicide rate for County Durham remains higher than the rate in England and the North East. The Chairman expressed his concerns at the increasing rate of suicides in men, in particular, adding that he was aware that reports that had been undertaken on suicides in men in the Consett / Stanley and Easington areas. The Head of Planning and Service Strategy suggested members may find the information contained in the Suicide Audit Report useful and he agreed to circulate the report to the Committee.

Referring to the Government's plans for a tax on sugary soft drinks, Councillor Armstrong remarked on whether the Government had any plans to introduce a similar levy on the sugar in alcoholic drinks.

Members discussed the low take-up of NHS health checks and Dr Murthy queried whether GPs should be offered incentives for every health check undertaken and that take-up of these checks may improve if the incentive was offered to the public. Members commented that this issue of payments to GPs should be investigated. Councillor Hovvels observed that many people have difficulty making appointments with their GP and this may be an obstacle to those wishing to arrange a health check. Councillor Hovvels suggested other avenues could be explored in order to encourage the public to arrange a health check, for example, it may be possible for these health checks to be provided through pharmacies, or, perhaps large groups of people could be targeted by offering checks at workplaces or community events such as football matches. Councillor Huntington pointed out that with the prospect of more urgent care walk-in establishments being closed, more opportunities for the public to access programmes like this are being lost. Councillor Temple commented that he was not aware of exactly who is being targeted for these health checks adding that he would like further information.

The Principal Overview and Scrutiny Officer advised that drug and alcohol treatment and childhood obesity are cross-cutting issues, with the lead Committee for drug and alcohol treatment being the Safer and Stronger Communities Overview and Scrutiny Committee, and, the Children and Young People's Overview and Scrutiny Committee leading on childhood obesity. Members agreed to suggest that the lead Committee should write to the Government to ask whether a tax on the sugar in alcoholic drinks would be considered.

Resolved:

1. That the report and performance issues identified therein be noted.

8 Forecast of Revenue Outturn Quarter 3, 2015/16

The Committee considered a report of the Head of Financial and Human Resource Services, presented by the Finance Manager for Corporate Resources. The report provided details of the updated forecast outturn position for the Children and Adults Services (CAS) service grouping, covering both revenue and capital budgets and highlighting major variances in comparison with the budget, based on spending to the end of December 2015. The Finance Manager delivered a presentation on the Revenue and Capital Outturn Forecast for Quarter 3, 2015/16 (for copy of report and slides see file of Minutes).

The Chairman thanked the Finance Manager for his presentation.

Resolved:

1. That the revenue and capital outturn projections, which form the basis of the budgetary control position reported corporately via Corporate Management Team and Cabinet, be noted.

9 NHS Foundation Trust 2015/16 Quality Accounts

The Committee noted a report of the Assistant Chief Executive which provided information on the proposed process for preparation of the 2015/16 Quality Accounts for:

- County Durham and Darlington NHS Foundation Trust
- Tees, Esk and Wear Valleys NHS Foundation Trust
- North East Ambulance Service NHS Foundation Trust

(for copy see file of Minutes).

The Principal Overview and Scrutiny Officer informed the Committee that the draft Quality Accounts are likely to be received during the week commencing 11 April 2016. It was proposed that a special meeting of the Committee be held on 27 April to receive presentations from the Trusts' representatives. A draft formal response will then be considered at a further special meeting of the Committee on 9 May to enable responses to be submitted to the Foundation Trusts within the statutory deadline.

Resolved:

1. That the report and that the process for producing a response to the NHS Foundation Trust Draft Quality Accounts 2015/16 be received and noted.
2. That the new Chief Executive of Tees, Esk and Wear Valleys NHS Foundation Trust be invited to the Special Meeting of the Committee on 9 May.

10 Council Plan 2016/2019 - Refresh of Work Programme for Adults Wellbeing and Health Overview and Scrutiny Committee

The Committee considered a report of the Assistant Chief Executive which provided information contained within the Council Plan 2016-2019, relevant to the work of the Adults, Wellbeing and Health Overview and Scrutiny Committee, which enabled members to refresh the Committee Work Programme to reflect the four objectives and actions within the Council Plan for the Council's Altogether Healthier priority theme (for copy see file of Minutes).

The Principal Scrutiny Officer presented the report and drew members' attention to the current work programme of the Committee and the cross cutting areas covered across the Children and Young People and Safer and Stronger Communities Overview and Scrutiny Committees. Members were advised that the work programme for 2016-17 would be brought back to the Committee in June further to any discussions and feedback from this meeting.

Members commented that it would be useful to add GP funding and health checks to the programme bearing in mind that timescales and statutory duties also need to be factored in. Cllr Temple suggested the inclusion of a piece of work on the increasing rate of suicide in the County and it was suggested that this may be best undertaken by a small working group. The Head of Planning and Service Strategy agreed that it would be timely to undertake some work on this issue, linking with the wider mental health issues. The Principal Overview and Scrutiny Officer pointed out that the Children and Young Peoples Overview and Scrutiny Committee have carried out some work on self-harm in children, adding that duplication of work should be avoided.

Resolved:

1. That the information contained in the Altogether Healthier priority theme of the Council Plan 2016-2019, be noted.
2. That the comments from the Committee be reflected within the refresh of the Adults, Wellbeing and Health Overview and Scrutiny Committee work programme for 2016-2017.
3. That at its meeting on 30 June 2016, the Adults, Wellbeing and Health Committee receives a further report detailing the Committee's work programme for 2016-2017.

11 Any other business

The Principal Overview and Scrutiny Officer reported upon proposals by North Tees and Hartlepool NHS Foundation Trust to close their Assisted Reproductive Unit facility at University Hospital Hartlepool.

Hartlepool Borough Council's Audit and Governance Committee had met to consider the proposals and requested the Trust to engage in meaningful consultation in respect of the proposals.

The Trust subsequently has requested the constitution of a Joint Health Scrutiny Committee consisting of representatives of the Health Scrutiny Committees of Hartlepool Borough Council, Stockton on Tees Borough Council and Durham County Council to consider this matter.

On investigation, it was found that the closure would affect only a very small number of County Durham residents and these services were available within County Durham and Darlington NHS Foundation Trust and, as such, it was not considered to be a significant development or substantial variation of health service for County Durham under the terms of the Health and Social Care 2012 Act.

Accordingly, the Chair of the Adults Wellbeing and Health OSC had written to the Chair of Hartlepool Borough Council's Audit and Governance Committee with copies sent to North Tees and Hartlepool NHS Foundation Trust and their legal representatives stating that in view of the above, the Committee would decline the opportunity to participate in any joint Health Scrutiny Committee.

The Principal Overview and Scrutiny Officer reported that an application by Hartlepool Borough Council for Judicial Review of the Trust's original decision to close the ARU had been considered by the High Court and a consent order granted which stated that formal consultation upon the future of the ARU at University Hospital of Hartlepool be undertaken either individually with Hartlepool Borough Council or via a joint Health Scrutiny Committee consisting of Hartlepool Borough Council, Stockton on Tees Borough Council and Durham County Council.

In view of the aforementioned judgement, Hartlepool Borough Council and North Tees and Hartlepool NHS Foundation Trust had sought clarification on Durham County Council's position on this matter. The Chair sought endorsement of the Committee's previously declared position that in view of the fact that the closure would affect only a very small number of County Durham residents and these services were available within County Durham and Darlington NHS Foundation Trust, it was not considered to be a significant development or substantial variation of health service for County Durham under the terms of the Health and Social Care 2012 Act and the Committee would decline the opportunity to participate in any joint Health Scrutiny Committee arrangements on this matter.

Resolved:

1. The Committee endorsed the actions of the Chairman and confirmed its previously declared position.