

Health Select Committee

A meeting of the Health Select Committee was held on Wednesday 22nd February 2006

Present: Councillor Mrs Womphrey (Chairman), Councillors Dixon, Frankland, Harrington, Laing (vice Lupton) and Mrs Robinson

Officers: G Birtle, M. Henderson, M. Waggott (LD); A. Baxter, T. Beckwith (CESC)

Also in attendance Councillor Mrs. Cains

Apologies for absence were received from Councillors Apedaile, Coombs, Lupton, Nesbitt, Noble, Roberts, Sherris and Teasdale

1042 Draft Minutes

The minutes of the Committee's meeting held on 13th February 2006 were approved for submission to Council.

1043 Primary Care Trust Reconfiguration

The Committee continued its consideration of two options, put forward by the Strategic Health Authority (SHA), for the reconfiguration of Primary Care Trusts (PCT) in Teesside and County Durham.

Members were reminded of the options:

Option 1

- One new PCT for County Durham and Darlington
- One new PCT FOR Teesside

Option 2

- One new County Durham PCT (merging 5 existing ones)
- Five PCTs covering Darlington, Hartlepool, Stockton on Tees, Middlesbrough and Redcar and Cleveland based on the boundaries of Unitary Local Authorities

Members were also reminded that there was a requirement to deliver a 15% saving on management and administrative costs, equivalent to £6 million in Teesside and County Durham.

The Committee noted that seven criteria had been identified, against which each option should be assessed to determine which was most appropriate. The Committee considered each option and checked them against the criteria.

Following this process the Committee agreed that Option 2 better fitted the criteria as a whole and would be the most appropriate for Stockton Borough.

The Committee was of the opinion that option 2 maintained the current coterminosity of PCTs with Unitary Authorities in the Tees Valley. This had significant advantages in creating the partnerships and shared priorities for local residents. It was also of the opinion that locally based PCTs were best able to engage with all local practitioners and, together with the Council, involve residents and users in every aspect of health strategy and service delivery.

The Committee pointed out that coterminosity had been the basis of many reconfigurations across the country and SHA's elsewhere had sought to retain or create coterminosity where it had not previously existed. Additionally, the Government had recently emphasised the benefits of the coterminosity approach in its White Paper "Our health, our care, our say"

The Committee found no evidence to support some of the claims made in the Consultative Document. These included the assertion that large PCTs, like the ones proposed in option 1, would be better placed to commission services and would be more financially sound than smaller PCTs.

The Committee noted that Option 1 would create savings with the removal of several PCT Boards. However, the Committee did not feel that this should override the need to have the right solution especially where there were many other innovative ways of making savings. Members also expressed the concern that absence of Board level representation from many of the partnerships in Stockton was a serious disadvantage in terms of reaching shared agreement on strategies and priorities as well as commitment to implementation.

The Committee considered that any change to the existing structure for Stockton would be second best and would potentially prove more expensive to the Council.

In conclusion the Committee highlighted its principal reasons for supporting Option 2 :

- it retained the essential coterminous model for Stockton
- it supported the partnership arrangements across Stockton on Tees
- it allowed the development of shared health and well being priorities
- there was no real evidence to support many of the assertions, within the consultation document, that supported Option 1
- the necessary savings could be found in a number of ways and, in any event, North Tees PCT should not be expected to find the share allocated.

CONCLUDED that a report, based on the Committee's consideration and discussion of this matter, be prepared recommending that the Council support Option 2 and consequently the retention of a coterminous Primary Care Trust with Stockton Borough Council.