

## Health Select Committee

A meeting of Health Select Committee was held on Monday, 14th December, 2009.

**Present:** Cllr Mrs Ann Cains (Chairman), Cllr Jim Beall, Cllr Julia Cherrett, Cllr Aidan Cockerill, Cllr Kevin Faulks, Cllr Andrew Sherris

**Officers:** Peter Mennear, Fiona Shayler (LD); Dawn Welsh (R);

**Also in attendance:** Cllr Dixon (Ingleby Barwick Ward Councillor); Ruth Hill, Louise Johnson (NHS Stockton on Tees). Pam Bretton, Andy Fletcher (North Tees and Hartlepool NHS Foundation Trust). James Newton (LINK). Francis Hayes, Chris Nestor (Standards Committee).

**Apologies:** were submitted on behalf of Cllr Liz Nesbitt, Cllr Sylvia Walmsley.

### **H       Declarations of Interest**

**41/09**

Cllr Faulks and Cllr Dixon, declared a personal/non prejudicial interest in relation to Agenda Item No. 4 Phlebotomy Services in Ingleby Barwick, further to being users of the Service.

James Newton also declared a personal/non prejudicial interest in relation to Agenda Item No. 4 Phlebotomy Services in Ingleby Barwick, further to being users of the Service.

### **H       Draft Minutes - 26th October 2009**

**42/09**

The minutes of 26th October 2009 were agreed as a correct record subject to some minor changes.

### **H       Update on Phlebotomy Services in Ingleby Barwick**

**43/09**

The Committee were requested to consider the update provided by NHS Stockton-on-Tees in relation to phlebotomy services in Ingleby Barwick.

Members will recall that at the meeting on 14 September, the Committee received a briefing regarding the proposal to relocate certain phlebotomy clinics in Stockton Borough.

At the meeting on the 14 September, members were informed that in order to improve patient access and reinstate phlebotomy services at Ingleby Barwick, two phlebotomy sessions would be transferred from Thornaby Health Centre to the Woodbridge Practice in Ingleby Barwick. The proposal was solely in relation to the location of these services, and not the total capacity.

Members requested that an update be provided to the Committee after the sessions at Ingleby Barwick had been in place for three months. Representatives of NHS Stockton-on-Tees (the PCT) were in attendance at the meeting to provide a verbal update and respond to Members' questions.

Ward Councillors representing Ingleby Barwick and Thornaby have been contacted and had provided comments.

Members felt that the service had been well received and would like the service to be extended if possible. It was logistically possible to extend the service as the room that was used at Ingleby Barwick was available and the equipment was in place but funding would be required for staffing. Members noted that the results of a survey of patients using the service at Thornaby Health Centre following the re-instatement of services at Ingleby, showed that a number of the patients who still used Thornaby would prefer to visit Ingleby Barwick if the service was there.

Members were made aware that patients were able to go to any phlebotomy service and thought that it would be useful to have full list or central point of contact to gain this information to make access easier for patients.

CONCLUDED that the report and comments be noted and that a further report be received in 3 months.

#### **H 44/09      Efficiency, Improvement and Transformation Review of Fair Access to Care Services (FACS)**

Members were provided with an update on the Efficiency, Improvement and Transformation Review of Fair Access to Care Services (FACS).

It was reported that legal advice had been sought and it was felt that a full consultation exercise should be undertaken prior to any recommendations being put forward. It was also important to note that during Election Purdah no consultation exercises were able to be undertaken. Members of the Committee felt that it was important to ensure that sufficient time was allowed to ensure the consultation was thoroughly planned and implemented.

It was felt that Officers should begin to put together the consultation documents with an aim to consult as soon as feasibly possible. There was currently a sub group of Officers meeting to discuss the consultation exercise and once a draft version had been produced Members of the Health Select Committee would be requested to comment upon it.

CONCLUDED that the update and comments be noted and that the consultation plans be considered by the Committee in due course.

#### **H 45/09      Monitoring of previously agreed recommendations - review of alcohol services**

Members were asked to consider the assessments of progress contained within the attached Progress Updates on the implementation of previously agreed recommendations from the review of Alcohol Services.

Members wished to commend the work that had gone into the production of the Alcohol Strategy.

CONCLUDED that assessments of progress contained within the report be accepted, and further updates be received as appropriate.

#### **H                      Centre for Public Scrutiny Expert Advisory Team Support and Health**

## **46/09 Inequality Programme**

The report informed the Committee of two support programmes from the Centre for Public Scrutiny and sought approval to progress the bids.

The Select Committee had in the past taken advantage of the free support days provided by the Centre for Public Centre to deliver Member training on Health Scrutiny. The current programme of support from the Centre comprised 10 free days to Overview and Scrutiny Committees (OSCs) in each Strategic Health Authority area. Placements would support OSCs working together on common issues across whole regions or sub regions.

Health Scrutiny Officers had placed a holding bid for the support which has been approved, in principle, by the Centre subject to the detail of the support programme being agreed in detail.

In addition to the above programme, the Centre were also inviting bids under a new Health Inequality Scrutiny Programme to raise the profile of overview and scrutiny as a tool to promote community well being and help Councils and their partners in addressing health inequalities within their local community.

There had been informal discussions at North East scrutiny network meetings and a proposal had been put forward to submit a bid to undertake a piece of regional scrutiny work on the Health Needs of Veterans.

The Chair had attended a meeting with other Health OSC Chairs and support officers on Wednesday 9 December to discuss the detail of the proposals.

CONCLUDED that the proposals be supported.

## **H Tees Valley Health Joint Scrutiny Committee update**

**47/09**

The Joint Committee considered health scrutiny issues that were of relevance and importance to residents across the Tees Valley as a whole.

The approved minutes from the meetings of the 14 September and 12 October were provided for Members information. The minutes of 16 November had not been approved as yet and there would be a further meeting on 17th December.

CONCLUDED that the update be noted.

## **H Work Programme**

**48/09**

**- to consider the work programme in respect of the current review**

The Scrutiny Officer would be updating the Work Programme in order for it to be discussed at the next meeting.

CONCLUDED that the Work Programme be considered at the next meeting.

## **H Chair's Update**

**49/09**

The Chairman noted that there would be a report at the Executive Scrutiny Committee on 14th December regarding the Health Select Committee's

response to NHS consultations. It was discussed that many consultation periods were of 12 weeks in total and as the Committee's response had to pass through the Executive Scrutiny and Cabinet process, Members felt that this cut the time for the Committee to respond down substantially and wished to look at options to ensure that the consultation was carried out effectively. The Chairman noted that the report to Executive Scrutiny proposed that for all non-statutory consultations, the Committee would be able to respond directly to the NHS.

The Chair had attended a presentation on Summary Care Records prior to consultation taking place in the Spring.

Members were briefed on the Care Quality Commission and were requested to consider how the Select Committee and the Commission could work together.

CONCLUDED that the Chair's update be noted.