

Health Select Committee

A meeting of Health Select Committee was held on Tuesday, 21st September, 2010.

Present: Cllr Mrs Ann Cains (Chairman), Cllr Dick Cains, Cllr Aidan Cockerill, Cllr Kevin Faulks, Cllr Mohammed Javed, Cllr Andrew Sherris.

Officers: Liz Hanley, Glyn Roberts (CESC); Fiona McKie, Peter Mennear, Judith Trainer (LD); Dawn Welsh (PP).

Also in attendance: Cllr Jennie Beaumont (Ward Councillor). James Newton (LINK). Neil Reynolds (GP - Yarm). Joanne Dobson, Sarah Scott, Ruth Hill (NHS Stockton-on-Tees). Two Members of the Public.

Apologies: were submitted on behalf of Cllr Baker, Cllr Julia Cherrett and Cllr Sylvia Walmsley.

H 22/10 **Declarations of Interest**

Cllr Andrew Sherris declared a personal/non prejudicial interest in relation to Agenda Item No. 4 - Yarm GP Practice due to being a patient of the practice.

Cllr Jennie Beaumont declared a personal/non prejudicial interest in relation to Agenda Item No. 4 - Yarm GP Practice due to being a patient of the practice.

Cllr Javed declared a personal/non prejudicial interest due to being an employee of Tees, Esk and Wear Valley NHS Trust.

H 23/10 **Minutes of Previous Meeting - 5th July 2010**

The minutes of the meeting held on 5th July 2010 were agreed as a correct record.

H 24/10 **Yarm GP Practice Development**

The Committee were requested to consider the information provided in relation to the proposed Yarm GP Practice, and to record their views for submission to the PCT and Practice.

Members were provided with a briefing that outlined proposals for a re-developed medical centre in Yarm. The proposal was to replace the current Yarm Medical Practice with a new building on an adjacent site. The development was scheduled to begin in January 2011, with completion in January 2012. GP and community services would continue in the current building until the new build was complete.

Public Engagement activity had taken place during the summer period, and the detail was provided for Members' information.

Dr Reynolds was in attendance at the meeting in order to brief Members on the issues. He detailed the planning application which was due to be submitted to the planning committee and stated that funding was still to be finalised by the PCT. It was anticipated that the new build would begin in the Spring 2011.

Members were informed that there would be a pharmacy on site which would hopefully reduce traffic on Yarm High Street.

The Committee requested a brief update once the final outcome of the funding and planning application had been received.

The Committee wished to formally support the project.

CONCLUDED that the Committee supported the project and an update be provided to Members in due course.

H
25/10

Momentum Update

The Committee were requested to consider the information provided as part of an update on the Momentum: Pathways to healthcare project.

Members would recall that the Momentum project covered three programmes of work. These were:

- the new hospital project;
- the development of new primary and community care facilities (including Stockton Town Centre, Billingham and Yarm);
- and the re-design of services and care pathways, with the overall aim of providing care in the community and closer to people's homes.

Members had noted that following the decision by the government to withdraw the public capital funding for the new hospital site, North Tees and Hartlepool NHS Foundation Trust have sought to secure funding from alternative sources. In addition, the development of community services remained an integral part of the Momentum Project.

Members were informed that the acute trust was working hard to secure other sources of funding for the new hospital, and that progress was continuing in relation to the community facilities. The Hartlepool One Life Centre had been established, Lawson Street Medical Centre was completed, and the site of the Stockton Town Centre facility at Alma Street had been secured. PFI Social Credits had been awarded for the integrated health and social care centre at Billingham (subject to the Comprehensive Spending Review); the outline business case would be submitted to the Department of Health in November, with a final decision expected in January.

The re-design of services was continuing and 46 projects were ongoing. Services were beginning to transfer to the community in Hartlepool and this would be considered in Stockton in due course.

CONCLUDED that the update be noted.

H
26/10

NHS White Paper

The Committee were requested to consider the information provided in relation to the NHS White Paper and consider providing views for inclusion in the consultation response.

On 12 July, the Department of Health published the NHS White Paper which contained proposals that would significantly alter the structure of the NHS, and its relationships with other organisations including Local Authorities.

The White Paper was provided for Members information. The main proposals of the White Paper could be summarised as follows:

- GP Consortia to be responsible for commissioning the majority of NHS services by 2012-13, replacing PCTs;
- A national NHS Commissioning Board to oversee and allocate budgets to consortia, commission dentistry, community pharmacy, and primary ophthalmic services, and commission national and regional specialised services;
- Local Authorities to become responsible for local public health improvement, using a dedicated public health budget, and the joint appointment of a Director of Public Health with a newly created national Public Health Service;
- The establishment of Local Health and Wellbeing Boards, by councils, that would be responsible for promoting integration between health and social care (and other services), producing the Joint Strategic Needs Assessments, and 'building partnership' for service changes;
- The replacement of LINks by Healthwatch. Local Healthwatch would have an expanded role compared to LINks and will cover NHS complaints advocacy services, advice and information for patients, and supporting patients in their right to exercise choice (eg. when choosing a GP);
- Monitor, currently the independent regulator of foundation trusts, will become the 'economic regulator' of all NHS providers.

The White Paper, and supporting documents, were currently open to public consultation. The supporting document entitled Local democratic legitimacy in health goes into more detail on the functions of the proposed Health and Wellbeing Boards, and summarised these as follows:

- 'to assess the needs of the local population and lead the statutory joint strategic needs assessment;
- to promote integration and partnership across areas, including through promoting joined up commissioning plans across the NHS, social care and public health;
- to support joint commissioning and pooled budget arrangements, where all parties agree this makes sense; and
- to undertake a scrutiny role in relation to major service redesign.'

Members should also be aware of new guidance in relation to considering service re-designs in the interim period before permanent arrangements were put in place. The NHS had been advised that four tests needed to be met before proposals would be approved. These were:

- support from GP commissioners;
- strengthened public and patient engagement;
- clarity on the clinical evidence base; and
- consistency with current and prospective patient choice.

Ruth Hill provided a briefing to Members following the Health and Wellbeing Partnership session that had been held immediately prior to this meeting where Members had discussed their response to the White Paper.

Members considered the discussions held at the Partnership, and discussed a suggested response to each of the consultation questions. Members had concerns in relation to the scrutiny role that would be taken by the proposed Health and Wellbeing Boards, the expanded role for LINKs and the creation of HealthWatch, and the effect that the transition period would have on health care. The Scrutiny Officer would formalise the Committee's response and distribute to Members for final comments and endorsement prior to submission.

CONCLUDED that the Scrutiny Officer formalise the Committee's draft response to the NHS White Paper.

**H
27/10**

EIT Review of Fair Access to Care Services

The FACS consultation process took place during the period 1 June to 27 August 2010. The consultation consisted of a survey, a series of engagement meetings and provision of information.

The process sought to ascertain views on the following two questions:-

- How strongly do you agree with the idea of changing the eligibility rules for social care services so that some of the savings can be re-invested in community services open to all?
- If the Council did make a change, what sort of community based services would you most like to see?

A survey and information booklet was sent to 6851 clients and carers who were in receipt of Council adult social care services. The survey was also generally made available to the public and was made available on the Council's website. 1276 surveys were returned out of the 6851 that were mailed out and a further 64 were returned from Members of the public and other interested parties.

In addition to the survey a range of engagement events and meetings were attended. This included seven dedicated public meetings, attendance at a range of existing forums, dedicated focus groups. Events were organised for particular client groups, including three Learning Disability Day Services events and a deaf community meeting.

The full process was advertised through press releases, pull up banners in public areas and articles in Stockton News. Information on the consultation was made available through a dedicated helpline and a dedicated website. 156 calls were made to the FACS helpline.

Members were provided with a full summary of the survey responses and were

provided with a summary of the comments that were recorded at all of the events.

Members would be making recommendations at their meeting on 18th October 2010. It was requested that further information be submitted on potential savings and costs of alternative services. It was suggested that discussions be held with Catalyst regarding voluntary sector provision and the possible support mechanisms that could be available.

CONCLUDED that the information received be noted and that the further information requested be received at the next meeting.

**H
28/10** **Tees Valley Health Scrutiny Joint Committee Update**

The Committee were requested to consider an update on the work of the Tees Valley Joint Committee.

The Minutes from the meetings of 8 March, 8 April, and 19 July had been approved and were provided for Members information.

The minutes for the meetings of 23 August and 13 September had not yet been approved. The meeting of 23 August discussed the capacity in community mental health services, and the NHS White Paper. The meeting of 13 September covered an update on the Momentum programme, with particular reference to the hospital project, an update on progress since the submission of the Committee's Cancer Screening Report, and the Joint Committee's response to the NHS White Paper.

CONCLUDED that the update be noted.

**H
29/10** **Work Programme**

The next meeting would be held on 18th October 2010.

CONCLUDED that the Work Programme be noted.

**H
30/10** **Chair's Update**

Members were informed that the Chair had been appointed the Chairman of the newly established Regional Health Scrutiny Committee meetings.

CONCLUDED that the Chair's update be noted.