

Agenda

Meeting: Scrutiny of Health Committee

**Venue: The Grand Committee Room,
County Hall, Northallerton DL7 8AD**

Date: Friday 7 April 2017 at 10.00 am

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Business

1. Minutes of the Scrutiny of Health Committee held on 27 January 2017 **(Pages 5 to 13)**
2. Declarations of Interest
3. Chairman's Announcements - Any correspondence, communication or other business brought forward by the direction of the Chairman of the Committee.
(FOR INFORMATION ONLY)
 - Mid Cycle Briefing (3 March 2017) update
 - End of life care – final report to North Yorkshire Health and Wellbeing Board on 17 March 2017
4. Public Questions or Statements

Members of the public may ask questions or make statements at this meeting if they have given notice to Daniel Harry, Principal Scrutiny Officer (*contact details below*) no later than midday on Tuesday 4 April 2017. Each speaker should limit himself/herself to 3 minutes on any item. Members of the public who have given notice will be invited to speak:-

- at this point in the meeting if their questions/statements relate to matters which are not otherwise on the Agenda (subject to an overall time limit of 30 minutes);

- when the relevant Agenda item is being considered if they wish to speak on a matter which is on the Agenda for this meeting.

5. Sustainability and Transformation Plans – Amanda Bloor (Chief Officer, NHS Harrogate and Rural District Clinical Commissioning Group), Janet Probert (Chief Officer, NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group), Chris O’Neill (Humber Coast and Vale STP Programme Director) – presentation (to follow)
6. Transforming our Communities – mental health services – Janet Probert and Lisa Pope (Hambleton, Richmondshire & Whitby CCG) – presentation (to follow)
7. Work Programme – Report of the Scrutiny Team Leader (North Yorkshire County Council)

(Pages 14 to 18)
8. Other business which the Chairman agrees should be considered as a matter of urgency because of special circumstances.

Barry Khan
Assistant Chief Executive (Legal and Democratic Services)
County Hall
Northallerton

28 March 2017

NOTES:

- (a) Members are reminded of the need to consider whether they have any interests to declare on any of the items on this agenda and, if so, of the need to explain the reason(s) why they have any interest when making a declaration.

A Democratic Services Officer or the Monitoring Officer will be pleased to advise on interest issues. Ideally their views should be sought as soon as possible and preferably prior to the day of the meeting, so that time is available to explore adequately any issues that might arise.

- (b) **Emergency Procedures For Meetings**

Fire

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An intermittent alarm indicates an emergency in nearby building. It is not necessary to evacuate the building but you should be ready for instructions from the Fire Warden.

Accident or Illness

First Aid treatment can be obtained by telephoning Extension 7575.

Scrutiny of Health Committee

1. Membership

County Councillors (13)							
	Councillors Name			Chairman/Vice Chairman	Political Party	Electoral Division	
1	ARNOLD, Val				Conservative		
2	BARRETT, Philip				NY Independent		
3	BILLING, David				Labour		
4	CASLING, Elizabeth				Conservative		
5	CLARK, Jim			Chairman	Conservative		
6	CLARK, John				Liberal		
7	DE COURCEY-BAYLEY, Margaret-Ann			Vice-Chairman	Liberal Democrat		
8	ENNIS, John				Conservative		
9	MARSHALL, Shelagh OBE				Conservative		
10	MOORHOUSE, Heather				Conservative		
11	PEARSON, Chris				Conservative		
12	SIMISTER, David				UKIP		
13	TROTTER, Cliff				Conservative		
Members other than County Councillors – (7) Voting							
	Name of Member				Representation		
1	HARDISTY, Kevin				Hambleton DC		
2	CHILVERS, Judith				Selby DC		
3	GARDINER, Bob				Ryedale DC		
4	MORTIMER, Jane E				Scarborough BC		
5	BROCKBANK, Linda				Craven DC		
6	SEDGWICK, Karin				Richmondshire DC		
7	GALLOWAY, Ian				Harrogate BC		
Total Membership – (20)				Quorum – (4)			
Con	Lib Dem	NY Ind	Labour	Liberal	UKIP	Ind	Total
8	1	1	1	1	1	0	

2. Substitute Members

Conservative		Liberal Democrat	
	Councillors Names		Councillors Names
1	HESELTINE, Michael	1	GOSS, Andrew
2	BUTTERFIELD, Jean	2	SHIELDS, Elizabeth
3	BASTIMAN, Derek	3	
4	SWIERS, Helen	4	
NY Independent		Labour	
	Councillors Names		Councillors Names
1	McCARTNEY, John	1	MARSHALL, Brian
2		2	
Liberal		UKIP	
	Councillors Names		Councillors Names
1	SAVAGE, John	1	
Substitute Members other than County Councillors			
	1	VACANCY	(Hambleton DC)
	2	VACANCY	(Selby DC)
	3	SHIELDS, Elizabeth	(Ryedale DC)
	4	JENKINSON, Andrew	(Scarborough BC)
	5	HULL, Wendy	(Craven DC)
	6	CAMERON, Jamie	(Richmondshire DC)
	7	HASLAM, Paul	(Harrogate BC)

North Yorkshire County Council

Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 27 January 2017.

Present:-

Members:-

County Councillor Jim Clark (in the Chair)

County Councillors: Val Arnold, Bernard Bateman (as substitute for Shelagh Marshall OBE), David Billing, John Clark, Margaret-Ann de Courcey-Bayley, Caroline Dickinson, Heather Moorhouse, Patrick Mulligan (as substitute for John Ennis), Chris Pearson and Cliff Trotter.

Co-opted Members:-

District Council Representatives:- Kevin Hardisty (Hambleton), Judith Chilvers (Selby), Jane E Mortimer (Scarborough), Wendy Hull (Craven), Karin Sedgwick (Richmondshire) and Ian Galloway (Harrogate).

In attendance:-

Janet Probert, Chief Operating Officer and Lisa Pope, Deputy Chief Operating Officer, Hambleton Richmondshire and Whitby CCG

Adele Coulthard Director of Operations, North Yorkshire, Tees Esk and Wear Valleys NHS Foundation Trust

Clare Beard, Public Health Consultant, Health and Adult Services, North Yorkshire County Council

County Councillor Clare Wood, Chair of the North Yorkshire Health and Wellbeing Board

County Council Officers:-

Daniel Harry, Scrutiny Team Leader

Amanda Reynolds, Assistant Director for Integration, Health and Adult Services

Apologies for absence were received from: County Councillors Philip Barrett, John Ennis, Shelagh Marshall OBE and David Simister and from District Councillor Bob Gardiner.

Copies of all documents considered are in the Minute Book

137. Minutes

Resolved

That the Minutes of the meeting held on 18 November 2016 be taken as read and be confirmed and signed by the Chairman as a correct record.

138. Any Declarations of Interest

There were no declarations of interest to note.

139. Chairman's Announcements

The Chairman provided the Committee with an update relating to the following matters:-

Joint Scrutiny of Health – the Chairman provided an overview of discussions at two Joint Scrutiny of Health meetings that had been held recently, as below:

At the meeting of the Better Health Programme (Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby) Joint Scrutiny of Health Committee on 19 January 2017 there was an in-depth discussion about the challenges of recruiting and retaining a health work force that could meet the changing needs and disease profiles of patients. This was followed by the presentation of findings on the public consultations on potential changes to the way in which health services are delivered. Public concerns about travel distances and times in rural areas were acknowledged.

The next meeting of the group will be in early March, to be confirmed.

At the meeting of the Healthy Futures Programme (West Yorkshire) Joint Scrutiny of Health Committee on 23 January 2017 there was an in-depth discussion about the proposed reconfiguration of stroke services. In the course of these discussions, concerns were raised by Members about the apparent lack of meaningful engagement by the STP lead officers and also local authority adult social care officers.

The next meeting of the group will be in early March, to be confirmed.

The Chairman informed the committee that Joint Scrutiny of Health arrangements were not yet in place to cover the reconfiguration of health services in the Humber Coast and Vale STP area. He confirmed that this is being pursued and that it was anticipated that the lead Local Authority would be Hull City Council.

Mid Cycle Briefing Update – the Chairman noted that there were two items discussed at the meeting on 16 December 2016, STPs and Community Pharmacies, both of which are covered in the agenda for this meeting.

140. Public Questions or Statements

There were no statements or questions from members of the public.

- 141.** The agenda order was changed so that the presentation on mental health service re-configuration was taken as the first substantive item.

142. Transforming our Communities – Mental Health Services

Considered –

The report of Janet Probert, Chief Operating Officer, Hambleton Richmondshire and Whitby CCG and Adele Coulthard, Director of Operations, North Yorkshire at Tees Esk and Wear Valleys NHS Foundation Trust, providing the context and background to a proposed re-configuration of adult and older peoples' mental health services in Hambleton, Richmondshire and Whitby.

Janet Probert explained that the proposed reconfiguration of adult and older peoples' mental health services followed on from the work that had been done through the 'Fit 4 the Future' programme and the 'Transforming Communities' work on physical health. The aims are to: simplify access to services, in part by creating a single point of contact for referrals; review the existing care pathways, to help improve continuity of care; support people in their home for longer and to provide services as close as possible to their home; review opportunities for the utilisation of new technologies; and increase support for carers.

Janet Probert outlined some of the key messages that had come out of the previous consultation on the reconfiguration of services for physical health. This included feedback from those consulted that 'It's not about beds – I have one'. In other words, there has been a strong emphasis upon community care and supporting people in their own homes.

Adele Coulthard stated that access to specialist acute care when required was a priority and that this would be provided at a number of specialist sites. This then would mean that some people would have to travel some distance to receive the treatment that they need. The negative impact of prolonged hospital stays was highlighted and so the need to move people on as quickly as possible into the community, by using facilities such as step-up and step-down beds.

Adele Coulthard noted that a strengths-based model for recovery had been adopted, where the focus was upon getting people's mental health back to where it was before they were ill.

Janet Probert outlined the triple phased engagement process, as follows:

- Phase 1 - listening phase - February and March 2017
- Phase 2 – reporting and options development – March, April and May 2017
- Phase 3 - formal 12 week consultation period - mid-May to mid-August 2017.

Cllr Jim Clark raised concerns about the future of the mental health in-patient wards at the Friarage Hospital in Northallerton.

In response, Adele Coulthard stated that some of the properties that were managed by TEWV were no longer fit for the delivery of modern mental health services. This included the mental health in-patient wards at the Friarage Hospital in Northallerton. These properties would be reviewed as part of the re-configuration programme. In the short term, there was a drive to improve the overall quality of the estate. In the longer term and subject to the outcome of the consultation, there may be opportunities to develop a mental health service hub.

Cllr Heather Moorhouse questioned what the role of non-specialist services was in the provision of mental health interventions.

Jane Probert stated that GPs played a key role with about 40% of a GP's caseload relating to mental health problems.

Cllr Wendy Hull emphasised the need to more formally engage the voluntary and community sector in the commissioning of mental health services across the county.

Cllr Val Arnold questioned whether there were shortages in skilled mental health workers in North Yorkshire.

In response, Adele Coulthard stated that there were challenges, as there are elsewhere within the NHS, particularly in recruiting and retaining workers in the 20 to 40 years of age group.

In summing up, Cllr Jim Clark observed that mental health services in North Yorkshire had suffered from years of under-investment and it was pleasing to see a concerted effort to close the gap with neighbouring authorities, such as County Durham and the Tees Valley.

Resolved –

- a) Thank Janet Probert, Lisa Pope and Adele Coulthard for attending
- b) That the aims and objectives of the proposed re-configuration of Adult and Older Peoples' Mental Health Services in Hambleton, Richmondshire and Whitby be supported
- c) That a further report on the early findings of the programme of public engagement and proposed next steps for the process of service reconfiguration be brought to this committee at the meeting on 23 June 2017.

143. Sustainability and Transformation Plans – Update

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, providing a summary of discussions at the Scrutiny of Health Mid Cycle Briefing, that took place on 16 December 2016, and an overview of the current state of the Sustainability and Transformation Plan (STP) process. A number of areas of concern were highlighted some lines of enquiry suggested.

Daniel Harry provided an overview of the report, highlighting: some of the key messages that had come out of the discussions with the STP lead officers at the Mid Cycle Briefing; the concerns that remained regarding governance arrangements and how realistic and robust the financial plans were; and a number of lines of enquiry that the Committee may wish to continue to pursue.

Cllr Jim Clark noted that the Mid Cycle Briefing had provided an opportunity to have a robust discussion with the STP lead officers and to re-iterate what the concerns were. Also, that local government had yet to be fully involved in the STP process, an omission that ran the risk of undermining any plans that were being developed to keep people out of hospital and in their homes or other community settings

Cllr Jim Clark stated that North Yorkshire County Council was still in discussion with the Secretary of State about having one STP for North Yorkshire. At the same time, early work is underway to try and make sense of the current 3 STP solution and how integrated health and social care services could be delivered on a North Yorkshire basis within that.

Cllr Bernard Bateman raised concerns about the future of Ripon Community Hospital and the 'Healthy Ripon Strategy'. The strategy was supposed to deliver a Community Hub that combined Primary Care, supported accommodation, diagnostic and out-patient facilities, social care, rehabilitation, leisure services and a swimming pool. One of this appeared to be happening.

In response, Cllr Jim Clark noted that it was now over 5 years since the first meeting about the 'Healthy Ripon Strategy' and that all appeared to have gone quiet. He stated that the Committee did not want to see a repeat of what happened to the Lambert Memorial Hospital at Thirsk, where a sudden temporary closure on the grounds of safety led to a permanent closure.

Cllr Wendy Hull suggested that the apparent shortages of capital available to the NHS to implement the changes to services required could, in part, be addressed by a system wide review of capital expenditure.

Cllr David Billing noted that experience showed that change in the NHS was slow and difficult. As such, it seemed unlikely that the proposed deficit reductions would be achieved.

Cllr Ian Galloway highlighted his concerns that Harrogate district risked being overlooked when taken as part of the West Yorkshire STP. The priorities of Harrogate district residents would be overridden by the needs of people in Leeds, Bradford and other large urban areas.

Cllr Jane Mortimer questioned whether having one STP for North Yorkshire would help matters, as the STP footprints need to focus upon the larger acute services.

Cllr John Clark raised concerns that whilst local authorities were being listened to it remained to be seen whether anything changed as a result.

Cllr Jim Clark restated the massive challenge faced posed by the shortage of the capital funding, within the NHS, needed to make fundamental changes to the way in which health services are delivered.

Cllr Patrick Mulligan stated that there were deep concerns about the West Yorkshire STP and what this would mean for the residents of Craven District. Their needs would simply be overlooked, as the needs of people in West Yorkshire were prioritised. Cllr Mulligan also noted the massive financial challenge faced by the West Yorkshire and Harrogate STP.

In summing up, Cllr Jim Clark re-iterated the concerns expressed by the Committee about the risk posed to local health and social care, community-based funding and services in the county. He noted that the STP process was NHS dominated, rushed in its development and unrealistic in its financial assumptions and planning. Cllr Clark stated that whilst the STP process is supported in principle, it ran the risk of being another heavy-handed, top-down reorganisation of health that would not deliver what has been promised.

Cllr Jim Clark stated that, on behalf of the committee, he would continue to work with the Chair of the North Yorkshire Health and Wellbeing Board, the Director of Health and Adult Services and the Chief Executive to ensure that there was a co-ordinated approach to the oversight of and engagement with STPs.

Resolved –

- a) That the lead officers for the three STPs that cover North Yorkshire be invited to the next meeting of the Committee, at 10am on 7 April 2017, to provide an update on progress with the development of the STPs, specifically how the STP process going to be able to:
 - Deliver integrated health and social care services in a large rural county, split across 3 STP footprints
 - Address the shortages in qualified, skilled and experienced health and social care staff, staff who are urgently needed to enable the transformation of services and to deliver integrated and new forms of care
 - Allocate finances within their STP, in particular capital funding, which is seen as essential in transforming service delivery in North Yorkshire. For example, mental health inpatient facilities at York and Harrogate and community hospitals at Whitby and Ripon
 - Address concerns nationally and locally about governance, scrutiny and accountability issues, in particular in relation to the new organisations that are being developed for service delivery, such as Accountable Care Organisations.

144. Dying Well and End of Life Care

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, providing a copy of the draft of the final report on the in-depth scrutiny of End of Life Care in North Yorkshire that has been undertaken by this Committee since July 2016. Members were asked to review the draft report and identify any gaps or omissions, inaccuracies, areas for further investigation and to assure themselves that the recommendations are specific, realistic and relevant to the evidence base presented in the report.

Daniel Harry provided an overview of the work that had been undertaken as part of the extended and in-depth scrutiny of end of life care services and interventions in the county. This included a summary of the recommendations that had been drafted to date.

Members were informed that there remained a number of lines of enquiry outstanding that would be pursued in February. Further engagement with key stakeholders would also be undertaken during that month.

Daniel Harry confirmed that the final, agreed version of the report would be submitted to the North Yorkshire Health and Wellbeing Board for consideration at their meeting on 17 March 2017. Daniel Harry asked Members of the Scrutiny of Health Committee to delegate responsibility, for agreeing the final version of the report, to the Mid Cycle Briefing that will be held on 3 March 2017.

There followed a discussion about the scope of the report and some of the findings and recommendations.

Cllr Kevin Hardisty welcomed the report, noting the complex nature of the subject and the amount of material presented.

Cllr David Billing noted the key role that hospices had to play in supporting patients and carers. Also, the essential support that is often offered by undertakers to the bereaved, which can make a big difference to how people cope with their loss.

Cllr Clare Wood welcomed the work that the committee had done to support the 'Dying Well' theme in the North Yorkshire Health and Wellbeing Strategy 2015-20, highlighting that the key message was one of supporting people's choices about the manner of their death.

Cllr Jim Clark noted that further work would be undertaken over February to finalise the report, including a peer review and a final edit to ensure that key messages were more accessible.

Resolved –

- a) That the committee thank Daniel Harry for the work that he has done to support this piece of extended scrutiny
- b) That the draft report be circulated to all those people who have contributed to it for review
- c) That the remaining lines of enquiry be pursued, including the following that were identified by the committee: the role of the Yorkshire Ambulance Service; the role that mental health services have to play, particularly Tees Esk and Wear Valleys

NHS Foundation Trust; and the role of undertakers in providing support to families

- d) That the committee delegates authority to formally sign off the report to the meeting of the Scrutiny of Health Mid Cycle Briefing on 3 March 2017
- e) That the final agreed version of the report be submitted to the North Yorkshire Health and Wellbeing Board for consideration at their meeting on 17 March 2017.

145. CQC Diabetes Review – Overview of Diabetes Prevalence and Responses

Considered –

The report of Clare Beard, Consultant in Public Health, Health and Adult Services, North Yorkshire County Council, providing a summary of the national issues raised in a recent Care Quality Commission review of diabetes care and support and highlighting what this means at a local level in North Yorkshire.

Daniel Harry informed the committee that this report was presented at the request of the Chairman, in response to the national report of the CQC. The aim of the discussions is to better understand what the local issues may be in North Yorkshire and what is being done in response.

Clare Beard gave an overview of the key issues in the report, highlighting that:

- Type 2 diabetes is avoidable
- it has an ‘insidious onset’, as people are often not aware that they are developing it until they have very obvious symptoms
- it can have a significant impact on people’s health and wellbeing and how they live their lives
- it costs health and social care a great deal of money, particularly where there are complications
- people are living for longer with Type 2 diabetes and that it is recognised that managing the disease takes a great deal of effort and determination.

Clare Beard also noted that there had been variations across the county in the take up of the Tier 2 adult weight management service, with the Selby area having the greatest take up.

In response, Cllr Kevin Hardisty noted that more could be done to make people aware of the impact of Type 2 diabetes and that it is a serious and potentially life threatening condition.

A number of Members representing district councils queried the extent to which their council had been involved in the Tier 2 adult weight management service pilot.

Clare Beard agreed to provide further information to the Members representing district councils.

Cllr John Clark raised concerns that the CCG bidding process for National Diabetes Prevention Programme had been done on a STP basis, at a point in time when the STP plans had not been completed and not consulted upon. Further concerns were raised about the differing approaches being taken by the STPs covering North Yorkshire and what this meant about equality of access to services in the county.

There was a discussion about the increase in childhood obesity, the reasons for it and the actions being taken to respond to it and prevent it. Particular attention was paid to the role of schools and the responsibilities of families.

Cllr David Billing highlighted the lack of central government regulation of food advertising.

Cllr John Clark stated that high sugar foods remained cheap and central government had yet to respond to calls for a tax on sugar.

Resolved –

- a) Thank Clare Beard for attending
- b) That the aims and objectives of the work that is underway to promote healthy lifestyles, healthy weight and NHS health checks be supported
- c) That details of the Tier 2 adult weight management service are shared with District Council representatives on the committee
- d) That the leaders of the three STPs that cover North Yorkshire be encouraged to participate in the National Diabetes Prevention Programme, on the same terms.

146. Funding of Community Pharmacies – Update on Discussions at Mid Cycle Briefing on 16 December 2016

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, providing details of discussions that took place at the Scrutiny of Health Mid Cycle Briefing on 16 December 2016 regarding changes to the Government funding of Community Pharmacies. This was in response to a Notice of Motion that was put to County Council on 9 November 2016.

Daniel Harry gave an overview of the report and highlighted the proposal made at the Mid Cycle Briefing on 16 December 2016 to maintain a watching brief and to model the long term potential impact of the funding reductions.

Cllr David Billing stated the importance of better understanding the impacts of the funding reductions, particularly around accessibility to community pharmacy services.

Cllr Kevin Hardisty raised concerns about the future of the screening and other services that are currently offered by community pharmacies, which help take pressure off GPs and A&E departments.

Cllr Wendy Hull noted that the Department of Health had publicised the role of community pharmacies as a first point of contact for people with non-emergency health concerns and that the risk was that funding reductions would undermine this.

Clare Beard was invited to comment and suggested that any proposed work on modelling the potential long term impact of funding reductions on community pharmacy services could be included in the Pharmaceutical Needs Assessment.

Resolved –

- a) A watching brief be maintained on the impact of Government reductions to community pharmacy funding over the next two years, with regular updates to the Scrutiny of Health Committee.

- b) To work with Public Health and other agencies and organisations to consider ways in which the potential impact of the reductions in funding can be better understood, in particular:
- The impact upon GPs and A&E
 - The impact upon vulnerable people
 - The impact upon people living in the more deprived areas of the county.

147. Work Programme

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, highlighting the role of the Scrutiny of Health Committee and reviewing the work programme, taking into account current areas of involvement and decisions taken in respect of earlier agenda items.

Daniel Harry noted that the provision of and access to dentistry services, particularly on an emergency basis by people not registered with a dentist, was being considered as an area for scrutiny, subject to an initial piece of work by Public Health at North Yorkshire County Council.

Cllr John Clark requested further information on the outcome of the recent CQC inspection of the Yorkshire Ambulance Service.

Resolved –

- a) That the Work Programme be noted.

The meeting concluded at 12:35

DH

**NORTH YORKSHIRE COUNTY COUNCIL
SCRUTINY OF HEALTH COMMITTEE
7 April 2017**

Remit of the Committee and Main Areas of Work

Purpose of Report

The purpose of this report is to highlight the role of the Scrutiny of Health Committee (SoHC) and to review the work programme taking into account current areas of involvement and decisions taken in respect of earlier agenda items.

Introduction

1. The role of the Scrutiny of Health Committee is to review any matter relating to the planning, provision and operation of health services in the County.
2. Broadly speaking the bulk of the Committee's work falls into the following categories:
 - a) being consulted on the reconfiguration of healthcare and public health services locally
 - b) contributing to the Department of Health's Quality Accounts initiative and the Care Quality Commission's process of registering NHS trusts
 - c) carrying out detailed examination into a particular healthcare/public health service.
3. The Committee's powers include:
 - reviewing and scrutinising any matter relating to the planning, provision and operation of health services in the local authority's area
 - requiring NHS bodies to provide information within 28 days to and attend (through officers) before meetings of the committee to answer questions necessary for the discharge of health scrutiny functions
 - making reports and recommendations to local NHS bodies and to the local authority on any health matters that they scrutinise
 - requiring NHS bodies to respond within a fixed timescale to the health scrutiny reports or recommendations
 - requiring NHS bodies to consult health scrutiny on proposals for substantial developments or variations to the local health service
 - referring contested proposals to the Secretary of State for Health.

Scheduled Committee and Mid Cycle Briefing dates

4. Forthcoming committee dates are:
 - 10am on 23 June 2017
 - 10am on 22 September 2017
 - 10am on 15 December 2017.

All the meetings will be held at County Hall.

5. Forthcoming Mid Cycle Briefing dates are:

- 10.30am on 28 July 2017
- 10.30am 3 November 2017
- 10.30am 26 January 2018
- 10.30am 27 April 2018.

These are not public meetings and are attended by the Spokespersons for the political groups.

Areas of Involvement and Work Programme

6. The Committee's on-going and emerging areas of work involvement are summarised in Appendix 1.

Recommendation

7. That Members review the Committee's work programme, taking into account issues highlighted in this report, the outcome of discussions on previous agenda items and any other healthcare developments taking place across the County.

Daniel Harry
Scrutiny Team Leader
North Yorkshire County Council
22 March 2017

NORTH YORKSHIRE COUNTY COUNCIL**Scrutiny of Health Committee – Work Programme/Areas of Involvement – 2017 and 2018**

(Note: Shading denotes period of on-going involvement/monitoring but without confirmed dates for items to the committee;
✓ = Confirmed agenda item)

	7 Apr	23 Jun	22 Sep	15 Dec	16 Mar	
Strategic Developments						
1. Implications on health and care services of Sustainability and Transformational Plans across North Yorkshire	✓	✓	✓	✓	✓	Report by the STP lead officers at the 7 April 2017 committee meeting, in response to issues raised at 27 January 2017 meeting.
2. NY Mental Health Strategy		✓				Follow up at 23 June 2017, particularly with regard to issues raised at 2 September 2016 meeting.
3. Funding of Community Pharmacies			✓			Follow up to 27 January 2017 committee meeting – watching brief and Public Health impact monitoring.
4. Health and social care workforce planning			✓			Review of work underway to address shortages of skilled, trained and experienced health and social care staff in the county.
Local Service Developments						
5. Hambleton, Richmondshire & Whitby CCG: Hambleton and Richmondshire - "Fit 4 the Future", including developments at the Lambert Hospital, Thirsk		✓				Follow up on use of Lambert and continuity of care at 23 June 2017 committee.
6. Hambleton, Richmondshire & Whitby CCG: Transforming our Communities – mental health services.	✓					Report on the early findings of the programme of public engagement and proposed next steps for the process of service reconfiguration.
7. Hambleton, Richmondshire & Whitby CCG – future plans for Whitby Hospital			✓			Follow up to discussions at 3 March 2017 MCB. Update at MCB on 28 July 2017.

	7 Apr	23 Jun	22 Sep	15 Dec	16 Mar	
8. Integrated prevention, community care and support in Scarborough and Ryedale			✓			28 July 2017 MCB 22 September 2017 Committee.
9. Mental Health Service in York/Selby area and Bootham Hospital						28 July 2017 MCB – progress with business case and commencement of building.
10. District Nurse Service – opening times, coverage, challenges - TBC						28 July 2017 MCB – initial discussion TBC
Public Health Developments						
11. Development of base-line data and an on-going monitoring system on the impact of Fracking.		✓				Lincoln Sargeant and Simon Padfield PHE.
12. Dentistry provision in North Yorkshire		✓				Lincoln Sargeant to follow up and ascertain whether there are issues relating to access to services, especially on an emergency basis
13. Pharmaceutical Needs Assessment for North Yorkshire				✓	✓	
In-depth Project						
14. Dying well and End of Life Care			✓			Report to Health and Wellbeing Board on 17 March 2017. Follow up September.

Other areas to be explored:

- Supporting people living with one or more long term condition
- Online medical advice and prescriptions.

Meeting dates 2017/18

Meeting				
Agenda Briefing	20 June 2017 10.30am	19 September 2017 10.30am	12 December 2017 10.30am	13 March 2018 10.30am
Scrutiny of Health Committee	23 June 2017 10.00am	22 September 2017 10.00am	15 December 2017 10.00am	16 March 2018 10.00am
Mid Cycle Briefing	28 July 2017 10.30am	3 November 2017 10.30am	26 January 2018 10.30am	27 April 2018 10.30am