

## NORTH YORKSHIRE COUNTY COUNCIL

19 July 2017

**SCRUTINY OF HEALTH COMMITTEE – STATEMENT BY THE CHAIRMAN**

At present, the work of the Scrutiny of Health committee is increasingly dominated by issues relating to the downgrading and closure of physical and mental health services in the county. Members will be aware that the NHS nationally and locally is going through a period of rapid change, change which will have serious ramifications for health services in the county and to which we need to be alert.

Shortages of funding, shortages of skilled workers and a shortage of time are all leading to service changes that are largely reactionary and which resolve an immediate pressure or issue without due consideration of the longer term implications. A key characteristic of this is greater centralisation of services in larger urban centres both within the county and outside.

**Sustainability and Transformation Partnerships**

The Sustainability and Transformation Partnerships (STP) continue with their work to reduce their 'do nothing deficits' and develop centralised, hospital-based specialist health services and the community health and social care services that are needed to support them. Looking to the north of the county to the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP, it is apparent that the model that would best serve the people of North Yorkshire is one of the James Cook at Middlesbrough, the Darlington Memorial Hospital and the Friarage in Northallerton all working together. Elsewhere in the county the plans are less well advanced but it is clear that we want to ensure particularly that services at Harrogate District Hospital and Scarborough General Hospital are protected.

**Accountable Care Systems**

I recently learned that there are draft proposals for the creation of an Accountable Care System for the North East and Cumbria. Whilst it is not clear what exactly this would mean for North Yorkshire, it is likely to further increase the focus of NHS spending on northern cities, such as Middlesbrough, Newcastle and Durham. Should similar proposals be developed for the Leeds-Bradford area and around Hull and the Humber, there is a risk that NHS resources will be pulled further out of the county and our less populated, rural areas.

**Community hospitals**

A worrying pattern that is emerging is that of smaller, community hospitals being closed at short notice and of services being downgraded due to workforce pressures.

Last year, the Lambert Community Hospital in Thirsk finally closed, after months of being temporarily closed, as a result of shortages in nursing staff.

In April, the Castleberg Hospital in Settle was closed due to serious concerns about the safety of the building. The hospital provided step-up and step-down beds for 10 people, typically older people. A consultation will commence in the next weeks about the future use of the site but I am concerned that the outcome will be the permanent closure of the hospital.

In light of the above, I am increasingly concerned that other services in some of the smaller hospitals in the county, like Ripon Community Hospital, Malton Community Hospital and Selby War Memorial Hospital, may be closed temporarily or permanently due to workforce pressures or the lack of finances.

In June, there were concerns that some consultant-led services at the Darlington Memorial Hospital would need to be closed temporarily due to staffing shortages, with services transferred to the James Cook at Middlesbrough.

Also in June, we heard that the Hambleton, Richmondshire and Whitby Clinical Commissioning Group (CCG) and the Tees Esk and Wear Valleys NHS Foundation Trust were consulting on changes to mental health services in the north of the county, which would entail closing the two in-patient mental health wards at the Friarage in Northallerton. The proposal is that in-patient services to be provided in Bishop Auckland, Darlington and Middlesbrough.

Subsequently, I have been informed that the planned purpose built in-patient accommodation at Cardale Park in Harrogate, that was set to replace that currently provided at the Briary Wing, has now been 'paused' due to financial pressures. In my own view, this project may now be abandoned and it will be unacceptable for mental health patients, particularly older people with dementia, to be moved across to York for the treatment that they need.

### **Capped expenditure regimes**

Members may be aware of the capped expenditure regime that is due to come into force in the east of the county. The Scarborough and Ryedale CCG, the Vale of York CCG and the York Teaching Hospital NHS Foundation Trust will face years of regulated spending with potential for a complete overhaul of services to ensure that they are kept within their budgets.

This is something that the Scrutiny of Health Committee will closely follow as the implications of the cap become clearer.

### **Consultation and engagement**

Over the next months, as these and other changes to NHS services are put forward, the Scrutiny of Health Committee will carefully examine proposals, review the evidence base, financial assumptions and clinical guidelines. There is an emphasis upon us all as members of the Council to respond to these consultations on the future of our health services and encourage others to engage with the NHS.

In conclusion, the long list of changes I have outlined above are likely to be just the start. I firmly believe that the next two years will see more and more local NHS services in the county downgraded or removed, with a clear expectation that people will travel to larger urban centres for the treatment that they need. Whilst there is a strong case in favour of creating specialist centres where 24 hour consultant-led care is available, local health services that are essential to the operation of an effective health and social care system near to where people live should not be overlooked and should be developed throughout the county.

Cllr Jim Clark  
5 July 2017