

## North Yorkshire County Council Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 23 June 2017.

**Present:-**

**Members:-**

County Councillor Jim Clark (in the Chair)

County Councillors: Val Arnold, Philip Barrett, Liz Colling (Vice Chair), John Ennis, Mel Hobson, John Mann, Heather Moorhouse, Chris Pearson, Andy Solloway, Roberta Swiers, Robert Windass.

**Co-opted Members:-**

District Council Representatives:- Judith Chilvers (Selby), Ian Galloway (Harrogate), Bob Gardiner (Ryedale), Wendy Hull (Craven), Jane E Mortimer (Scarborough)

**In attendance:-**

Janet Probert, Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG  
Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG  
Liz Herring, Head of Service Adult Mental Health and Substance Misuse North Yorkshire, Tees Esk and Wear Valleys NHS Foundation Trust.

Kathy Clark, Assistant Director, Health and Adult Services, NYCC

Kashif Ahmed, Locality Head of Commissioning Selby, Health and Adult Services, NYCC

Sue Pitkethly and Dr. Colin Renwick, Airedale, Wharfedale and Craven CCG, Dr. Karl Mainprize and Trudy Balderson Airedale NHS Foundation Trust

Lincoln Sargeant, Director of Public Health, North Yorkshire County Council.

County Councillor Caroline Dickinson, Executive Members for Public Health, Prevention, Supported Housing and STPs

**County Council Officers:-**

Daniel Harry, Scrutiny Team Leader

Apologies for absence were received from: County Councillors Zoe Metcalfe, Nicola Wilson and District Councillors Kevin Hardisty (Hambleton) and Karin Sedgwick (Richmondshire)

**Copies of all documents considered are in the Minute Book**

**1. Minutes**

**Resolved**

That the Minutes of the meeting held on 7 April 2017 be taken as read and be confirmed and signed by the Chairman as a correct record.

**2. Any Declarations of Interest**

There were no declarations of interest to note.

**3. Chairman's Announcements**

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

### **Pharmacy Needs Assessment**

Cllr Jim Clark noted that the Health and Well Being Board is undertaking a consultation to inform the refresh of the Pharmacy Needs Assessment (PNA). The PNA looks at the health needs of the population of the county, the level and accessibility of pharmacy services and how these will be maintained and developed in the future. This will influence decisions on where to site pharmacies, their opening hours and what services are provided. The assessment is renewed every three years.

Cllr Jim Clark urged committee members to engage in the consultation process and share details with the networks that they are linked into.

The survey can be completed at [www.nypartnerships.org.uk/pnaconsultation](http://www.nypartnerships.org.uk/pnaconsultation)

The closing date for the consultation is 28 July 2017.

### **Vulnerability of the health system**

Cllr Jim Clark raised his concerns about the vulnerability of the health system that services the population of North Yorkshire and the concern that short term and immediate workforce shortages are leading to changes in service delivery that are outside of the STP process, reactionary and not strategic.

Cllr Jim Clark re-iterated that the NHS was going through a period of major change, possibly the most significant since it was created 70 years ago. This presented both risks and opportunities and that there was an obligation on us all to engage in any and all consultations on the future shape and form of health services.

### **STP mergers**

Cllr Jim Clark noted that the creation of an Accountable Care System for the North East and Cumbria, in effect a merger of 3 STPs, was being discussed. Whilst it is very early days and unclear what this would mean for North Yorkshire, the concern remained that there was a risk that health funding could be drawn northwards out of the county.

### **Clinical Commissioning Group (CCG) mergers**

Cllr Jim Clark informed the committee that there had been discussions about the possibility of closer working and/or mergers between CCGs in the county. One such scenario would include the Hambleton, Richmondshire and Whitby CCG, the Harrogate and Rural District CCG and the Scarborough and Ryedale CCG. If this were to be the case, then the population served would be around 300,000.

### **Agenda**

The Chair informed the committee that the order of agenda items for the meeting had been changed, from that which was published, to enable a Public Question on proposed changes to the provision of mental health services at the Friarage in Northallerton to be immediately followed by items on mental health.

## **4. Public Questions or Statements**

There were 2 questions from members of the public.

1) Question raised by County Councillor David Jeffels, as follows:

“As a result of growing concerns in my division of Seamer and Derwent Valley regarding the fear of financial crises in local Clinical Commissioning Groups (CCGs),

especially Vale of York, and the NHS Trust covering Scarborough and Whitby, can the O and S Committee instigate a meeting with CCG and NHS officers to ascertain the current and future situations.

It would appear, according to information I have received, that the Secretary of State for Health, Jeremy Hunt, is about to sign off plans to bring about changes in local NHS services. The changes are, it is feared, going to result in costs being cut.

There are genuine worries that this action will result in the closure of A and E Departments and maternity units in hospitals, such as those serving North Yorkshire residents.

A key meeting involving senior officers from the Health Care department in the County Council, and members, with NHS and CCG officers would hopefully clarify the position so far as NHS and health care services in general in North Yorkshire are concerned.”

In response to the Public Question from Cllr David Jeffels, Cllr Jim Clark stated that he had been in contact with Simon Cox, Chief Officer at NHS Scarborough and Ryedale Clinical Commissioning Group, and asked to meet with him and colleagues from the Vale of York CCG and the York Teaching Hospital NHS Foundation Trust to discuss the financial situation in the east of the county and any plans for service changes.

Cllr Jim Clark also passed on an assurance from Simon Cox that, at present, there were no plans to close Scarborough Accident and Emergency Department. Simon Cox had also noted that work had been underway for some time to look at new ways of working at Scarborough Hospital, to ensure the best outcomes for patients and the long term sustainability of the hospital.

2) Question raised by Roger Tuckett, Chair, Hambleton and Richmondshire Mental Health Forum, relating to agenda item 5.

“Launching now a public consultation based on Friarage inpatient ward closures is unjustified, and we first require further pre-engagement on enhancing all community mental health services.”

In response, Cllr Jim Clark reminded the committee that their role was to assure themselves that the proposals that had been put forward for consultation were supported by evidence and a strong business case. It was not simply a case of ‘rubber stamping’ what was proposed. Cllr Clark suggested to the committee that there was no reason to stop the consultation process but that it was important that the issues raised by Roger Tuckett were taken into account.

A briefing note previously prepared by Roger Tuckett had been circulated to the members of this committee ahead of the committee meeting.

## **5. Transforming our Communities – Mental Health Services**

Considered –

The report of Janet Probert, Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG, Lisa Pope, Deputy Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG and Liz Herring, Head of Service Adult Mental Health and Substance Misuse North Yorkshire, 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 thanked Roger Tuckett for his question and that the points that he raised in his statement. Janet Probert re-iterated that the CCG were committed to undertaking a thorough and robust consultation and that nothing had yet been decided.

Janet Probert noted that the proposals that had been put forward in the consultation document had been developed after extensive public engagement, a review of the clinical evidence base and financial modelling. Based upon this, the options in the consultation document are considered to be the best that are available for the local population.

In summary, Janet Probert made the following observations relating to the consultation:

- The consultation only applies to the Hambleton and Richmondshire area of the county. Mental health services in Whitby are provided by Scarborough and Ryedale
- New ways of working are key to the delivery of effective and efficient mental health services in a rural area like Hambleton and Richmondshire
- More support will be provided by GPs and from GP practices, with more care available in the community and close to where people live
- There is less need for intensive support from specialist teams
- The 2 in-patient mental health wards at the Friarage Hospital are not fit for purpose and have been inspected by the CQC and found to be in need of improvement
- The average length of journey will not be adversely affected by the proposed move of in-patient mental health services to other sites. In some cases the journey times will be shorter
- A fourth option of developing a new, purpose built in-patient unit at the Friarage was explored but not progressed due to the low numbers of people using the site meaning that it was not financially viable
- Any proposed change to services has to comply with the NHS England Reassurance process.

Janet Probert confirmed that the consultation would commence in the week commencing 3 July 2017. Janet Probert asked that committee members forward to her details of any groups or organisations that may wish to engage in the consultation and in particular consultation events.

Cllr Jim Clark queried why a new mental health in-patient unit was not being built to meet the needs of people in the north of the county, when similar units had already been built or were planned in Scarborough, Malton, Harrogate and York.

In response, Janet Probert stated that the comparatively smaller population levels and lower levels of demand meant that it was not an efficient, effective or safe way of providing services.

Cllr Jim Clark noted that the ageing population and increasing prevalence of dementia would have an impact upon demand for in-patient services.

Cllr Liz Colling queried whether the in-patient units at Darlington, Middlesbrough and Bishop Auckland would be protected in the longer term or whether there would be a progressive centralisation of mental health in-patient wards to the north, such as Durham and Newcastle.

Cllr John Mann queried where the capital for the development of community services would come from.

In response, Janet Probert stated that the Tees Esk and Wear Valleys NHS Foundation Trust would be providing the necessary capital.

Cllr Heather Moorhouse raised concerns about managing the transition from one form of care to another and the potential impact of workforce shortages upon patient safety.

Janet Probert confirmed that the proposed changes were part on the ongoing development of the workforce and existing community-based service delivery. It was not about starting from scratch. As such the transition of service provision should be relatively easy.

Cllr Liz Colling asked how the plans fitted with the Sustainability and Transformation Partnership (STP) process for Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby.

Janet Probert stated that the proposed changes had been developed in line with the aspirations in the STP and the North Yorkshire Mental Health Strategy.

Cllr Andy Solloway noted that Janet Probert had put forward a convincing case that the proposed changes needed to be made to ensure good and improved outcomes for patients. He suggested that the strength of the argument was not reflected in the consultation documents.

Daniel Harry confirmed that a copy of the presentation would be circulated to Committee Members by email after the meeting.

#### **Resolved –**

- a) Thank Janet Probert, Lisa Pope and Liz Herring for attending
- b) Support in principle the work of HRW CCG to improve the quality of mental health services in the Hambleton and Richmondshire areas of the county
- c) That the impact of proposed service changes upon travel times is taken into account
- d) That some assurances are given regarding the long term sustainability of the other proposed sites for in-patient care (Darlington, Middlesbrough and Bishop Auckland), so that there is not a progressive withdrawal of in-patient mental health services further away from North Yorkshire over time
- e) That the issues identified by Roger Tuckett, Chair of the Hambleton and Richmondshire Mental Health Forum, in his public question and briefing note are taken into account as part of the consultation
- f) That the Chief Executive Officer of the Tees Esk and Wear Valleys NHS Foundation Trust attends the next meeting of the committee at 10am on Friday 22 September 2017
- g) That Janet Probert and Lisa Pope attend the next meeting of the committee at 10am on Friday 22 September 2017 to provide an update on the consultation process and any early findings.

## **6. North Yorkshire Mental Health Strategy**

Considered –

The presentation by Kathy Clark, Assistant Director, Health and Adult Services, NYCC and Kashif Ahmed, Locality Head of Commissioning Selby, Health and Adult Services, NYCC.

Kathy Clark introduced the strategy and stated that it is a partnership strategy that covers all of North Yorkshire and it was signed off by the North Yorkshire Health and Wellbeing Board in 2016. It sets out aspirations for the provision of mental health services in the county and is intended to be used by both commissioners and providers of mental health services.

Kashif Ahmed then gave an overview of some of the key achievements resulting from the implementation of the strategy, as follows:

- Roll out of instructor training around 'Mental Health First Aid'
- Establishment of the School Mental Health Wellbeing Service
- Creation of an Eating Disorder Service, delivered by CAMHS
- The ongoing development of IAPT (Increasing Access to Psychological Therapies)
- A strong focus upon the Crisis Care Concordat
- Planned strategic review of the NYCC Health and Adult Services mental health services to commence in July 2017
- Development of a Craven Mental Health Locality Plan, including mapping out services and patient flows.

Cllr Health Moorhouse noted that the strategy had improved partnership working on mental health.

Cllr Andy Solloway queried how children who are not in school would be able to access mental health and wellbeing support and services.

In response, Kathy Clark confirmed that she would raise this with colleagues in NYCC Children and Young People's Services.

Cllr Philip Barrett asked what progress was being made with linking the Bradford and the North Yorkshire mental health strategies, ensuring that Craven was not lost between the two.

Kashif Ahmed stated that there were strong similarities between the two mental health strategies and that the Craven Mental Health Locality Plan was helping to ensure that the mental health needs of Craven residents were not neglected. There was also a Craven Mental Health Forum which was helping to keep a strong focus upon the local area and to ensure that key service standards were agreed and met.

Cllr Jim Clark asked whether the Queen's Speech had indicated that any new legislation was under development.

Kathy Clark noted that no significant changes were anticipated and that any further policy development was expected to focus upon standards and targets.

#### **Resolved –**

- a) Thank Kathy Clark and Kashif Ahmed for attending
- b) A copy of the Craven Mental Health Locality Plan to be made available to members of the committee, once complete
- c) A copy of the map of mental health services in Craven to be made available to members of the committee, once complete
- d) Kathy Clark and Kashif Ahmed to attend a future meeting of the committee to provide an update on the delivery of the North Yorkshire Mental Health Strategy, with a particular focus upon Craven.

## **7. Sustainability and Transformation Partnerships**

Considered – presentation and verbal update by Janet Probert, of HRW CCG, on behalf of the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby (DDTHRW) STP. Also a paper provided by Emma Latimer, of the Humber Coast and Vale STP.

Janet Probert noted that the purdah periods associated with local and national elections had meant that the STPs had not moved on significantly over the past 2 months.

The focus for the DDTHRW STP was on the acutes and finding a model for delivery in the northern part of the county that was safe, efficient and met patient needs. At this stage, there was a strong case for the James Cook in Middlesbrough, the Darlington Memorial Hospital and the Friarage in Northallerton all working together as a local health system. Whilst it was likely that specialist services would be centralised, a number of other services would be de-centralised. This could include more outpatient and follow up appointments being delivered from local sites, such as the Friarage.

Janet Probert stated that shortages in skilled staff and funding meant that not all services could be offered across all sites. There had to be some rationalisation to ensure that patients received the best possible care. Also, that the Yorkshire Ambulance Service were playing an increasingly important role as paramedics made decisions about interventions and where people could best receive the care that they need.

Cllr Jim Clark queried whether there was going to be an Accountable Care System for the North East and Cumbria. If so, then what would this mean for North Yorkshire residents as the concern was that this could lead to resources being pulled further north towards Durham and Newcastle.

In response, Janet Probert stated that the configurations of different bodies and organisations did not necessarily matter. The key was to continue to work locally with the services in a given area to support the local population.

Cllr Jim Clark noted that there was a high level of support from committee members for the model of the Friarage, the Darlington Memorial Hospital and the James Cook working together.

#### **Resolved –**

- a) Thank Janet Probert for attending
- b) To support in principle a health system for the Hambleton and Richmondshire area of North Yorkshire that is based around the James Cook University Hospital, the Darlington Memorial Hospital and the Friarage Hospital
- c) To seek assurances that the creation of an Accountable Care System for the North East and Cumbria will not result in a drain of essential healthcare resources from North Yorkshire, northwards
- d) That a further update on the plans for engagement and consultation is provided by the lead officers for the three STPs that cover North Yorkshire at the next meeting of the committee at 10am on Friday 22 September 2017.

#### **8. Castleberg Hospital, Settle**

Considered –

The report of Sue Pitkethly and Dr. Colin Renwick, Airedale, Wharfedale and Craven CCG, Dr. Karl Mainprize and Trudy Balderson Airedale NHS Foundation Trust regarding the temporary closure of the Castleberg Hospital at Settle.

Sue Pitkethly introduced the report and provided some background detail on the hospital, as follows:

- In April 2017 Castleberg Hospital in Settle was closed on a temporary basis due to serious concerns about the safety of the building. There had been sewerage leaks in the building, power cuts, no heating, no hot water and fire alarms failing.
- The reason for the temporary closure was concerns about patient safety. Whilst the building was old and had some long standing maintenance issues, things had deteriorated significantly in February and March with the frequency and severity of problems with the building increasing
- The hospital was used as a step-up and step-down facility for about 10 people, typically older people.

Sue Pitkethly outlined the timeline for engagement and consultation on the future use of the site as follows:

- July and August – pre-consultation engagement
- September, October and November – formal public consultation
- December – finalise recommendations
- January – formal sign off processes.

The options for the site are: keep it open; close it; build or develop an alternative site.

Trudy Balderson noted that staff had been shocked at the temporary closure of the hospital but not surprised. The majority of staff had since been re-deployed elsewhere in the Trust.

Cllr Jim Clark queried as to how long the problems with the building had been known and why there was not a discussion sooner about possible options. He stated that this felt like a repeat of the Lambert at Thirsk, where a consultation on the future of a health facility was undertaken once it had been closed.

Cllr Philip Barrett asked who was responsible for the building and why more was not done to maintain it. He suggested that it looked as though the building had been deliberately run down over time.

In response, Sue Pitkethly stated that the building was owned by NHS Property Services. Also, that if the hospital was to be permanently closed and then sold, then the proceeds of the sale would go to the NHS centrally and not locally.

Cllr Liz Colling requested that a representative from NHS Property Services attend a future meeting of the committee to explain their role and responsibilities.

Cllr Wendy Hull stated that more engagement was needed prior to a formal consultation to ensure that the options for the use of the site and new ways of working in the area were fully explored.

Sue Pitkethly noted that considerable pre-consultation engagement had been undertaken already and that there was a need to go ahead with the consultation as soon as possible.

In closing, Cllr Jim Clark stated that it was disappointing to see a second example of a community hospital closing in the county at short notice on a temporary basis, with the likelihood being that the closure would then become permanent. He re-iterated the need for the Scrutiny of Health Committee, NYCC Health and Adult Services and the local community to be engaged with early on and not late in the day when a health unit was already closed.



**Resolved –**

- a) To support the consultation process in principle
- b) To request that further consideration be given to whether there is a need for a longer period of engagement work ahead of the launch of a formal consultation process
- c) That representatives from the Airedale Wharfedale and Craven CCG and the Airedale NHS Foundation Trust attend the meeting of the Scrutiny of Health Mid Cycle Briefing at 10.30am on 28 July 2017 to provide an update on the engagement and consultation process
- d) To follow up with NHS Property Services the process for the maintenance, management and disposal of NHS properties.

**9. Monitoring the human health impacts of shale gas extraction**

Considered – the report of Lincoln Sargeant, Director of Public Health, North Yorkshire County Council and Simon Padfield, Public Health England concerning the establishment of a system to monitor the human health impacts of shale gas extraction in the county.

Lincoln Sargeant summarised the key aspects of the report, noting the difficulties associated with establishing baseline data at such a local level and also the difficulties associated with attribution. Also, that the risks associated with shale gas extraction will be low where the operations are properly run and regulated.

Lincoln Sargeant noted that many of the human health indicators that could be monitored would only pick up issues once they had been impacting upon the local population for some time, potentially years. As such, it may be preferable to look at environmental monitoring data, which offered an early warning that there may be a health concern.

Cllr Bob Gardiner stated that it was in the interests of the extraction company to ensure that operations were efficient otherwise it would represent a shocking failure in the business with loss of profit and exposure to legal challenge. Also, that gas had been extracted in the area for the past 20 years, without any cause for concern.

**Resolved –**

- a) Thank Lincoln Sargeant for attending and also to thank Simon Padfield and colleagues from Public Health England for their contribution to the report
- b) To note the report, in particular some of the difficulties in establishing a causal link between shale gas extraction and adverse movements in human health indicators.

**10. Joint Scrutiny with the Care and Independence Overview and Scrutiny Committee: a) health and social care workforce planning; b) integration of health, mental health and adult social care commissioning and service provision**

Considered –

The report of the Scrutiny Team Leader, North Yorkshire County Council, providing an overview of proposed joint scrutiny with the Care and Independence Overview and Scrutiny Committee looking at health and social care workforce pressures and integration.

Daniel Harry gave a summary of the report, noting that the proposed joint scrutiny on workforce could proceed, subject to agreement by the committee and also the Care and Independence Overview and Scrutiny Committee, in the next month. The

proposed joint scrutiny on the integration on health and social care, however, required further work to determine key lines of enquiry.

The Chair asked for volunteers to take part in the joint scrutiny on workforce planning. The following Councillors put themselves forward:

- Cllr Jim Clark (Chair)
- Cllr Liz Colling (Vice-Chair)
- Cllr Val Arnold
- Cllr Heather Moorhouse.

**Resolved –**

- a) That the proposed joint scrutiny of workforce planning proceeds, subject to the outcome of discussions at the North Yorkshire County Council Care and Independence Overview and Scrutiny Committee meeting on 29 June 2017
- b) That further work is done to develop the lines of enquiry to be pursued through the proposed joint scrutiny of the integration of health and social care
- c) Committee members who wish to put themselves forward for the joint scrutiny of workforce planning to contact Daniel Harry.

**11. Overview and Scrutiny at NYCC and committee work programme**

Considered the report of the Scrutiny Team Leader, North Yorkshire County Council, which is intended to give both new and experienced committee members an overview of the role of the scrutiny committee, specifically: how overview and scrutiny is undertaken at the Council; the way in which subjects for scrutiny are identified; why it is important; and what role committee Members have to play.

Daniel Harry introduced the report and noted that a copy of the work programme was appended for the committee to discuss and check that it reflects the key issues that need to be addressed.

**Resolved –**

- a) To note the report
- b) That any committee member that had an issue that they felt needed inclusion on the work programme send this to Daniel Harry so that it could be discussed by the Chair, Vice-Chair and Spokespersons at the next Mid Cycle Briefing.

The meeting concluded at 12:45

DH