

North Yorkshire County Council Scrutiny of Health Committee

Minutes of the meeting held at County Hall, Northallerton on 22 September 2017.

Members:-

County Councillor Jim Clark (in the Chair)

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

Co-opted Members:-

District Council Representatives:- Judith Chilvers (Selby), Ian Galloway (Harrogate), Elizabeth Shields (substitute for Bob Gardiner) (Ryedale), Toby Duff (substitute for Karin Sedgwick) (Richmondshire), Wendy Hull (Craven), Jane E Mortimer (Scarborough), Kevin Hardisty (Hambleton)

In attendance:-

Janet Probert, Chief Operating Officer, Hambleton, Richmondshire and Whitby CCG

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

Georgina Sayers, Communications and Engagement Manager, Hambleton, Richmondshire and Whitby CCG

Brent Kilmurray, Chief Operating Officer, Tees, Esk and Wear Valley NHS Foundation Trust

Adele Coulthard, Director of Operations, Tees, Esk and Wear Valley NHS Foundation Trust

Jess Williams, Vice Chair, Phoenix Group

Nigel Ayre, Project Manager, Healthwatch North Yorkshire

Claire Ferguson, Research and Intelligence Officer, Healthwatch North Yorkshire

Dr James Dunbar, South Tees Hospitals NHS Foundation Trust

Sharon Poskitt, Senior Nurse, South Tees Hospitals NHS Foundation Trust

Joanne Evans, Service Manager in Urgent and Emergency Care, South Tees Hospitals NHS Foundation Trust.

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

County Councillor Annabel Wilkinson.

County Council Officers:-

Daniel Harry, Scrutiny Team Leader

Louise Wallace, Health and Adult Services.

Apologies for absence were received from: District Councillors Bob Gardiner (Ryedale DC) substitute Cllr Elizabeth Shields and Karin Sedgwick (Richmondshire) substitute Cllr Toby Duff

Copies of all documents considered are in the Minute Book

12. Minutes

Resolved

That the Minutes of the meeting held on 23 June 2017 be taken as read and be confirmed and signed by the Chairman as a correct record.

13. Any Declarations of Interest

There were no declarations of interest to note.

14. Chairman's Announcements

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

Access to NHS dentistry

A query had previously been raised by Cllr Geoff Webber about the availability of NHS dentistry in the county, having been contacted by a constituent who was having trouble in locating a dentist willing to take on NHS patients in the Harrogate area. In response, we contacted NHS England, who commission NHS dentistry services, and asked the following questions:

- 1) Is there a shortage of NHS dental places in the Harrogate area and North Yorkshire as a whole?
- 2) If there is a shortage, then what is being done to ensure that people who cannot access NHS dentistry and who cannot afford private dentistry can access the regular dental checks and interventions that they need?

In summary, the response stated that NHS England (Yorkshire and the Humber) is currently reviewing how it can improve access to NHS dentists across the whole region and is considering how it can introduce additional capacity from within its existing budget. A plan for commissioning the wider dental pathway will be finalised by April 2018.

The Chair confirmed that this would be followed up by the committee and the NHS dental commissioning plan had been added to the committee work programme for early 2018.

NHS Property Services

Cllr Jim Clark reminded committee members of previous discussions about the management of NHS properties in the county and what happened to them once a service was no longer provided there, as is the case with the Lambert Memorial Hospital in Thirsk.

Cllr Liz Colling, Vice Chair, confirmed that she had met with Karina Dare and Shamim Eimaan of NHS Property Services and that the meeting was positive. It was noted that NHS Property Services only have responsibility for 10% of the NHS estate and that they are run as a commercial body. Cllr Liz Colling stated that there was to be an ongoing dialogue with NHS Property Services and that they would be attending a future Mid Cycle Briefing.

Capped expenditure regime

Cllr Jim Clark noted that there was no information publically available about what the implications are to be on the delivery of health services of the capped expenditure regime is in place across the Vale of York CCG, Scarborough and Ryedale CCG and York Teaching Hospital FT. Cllr Jim Clark confirmed that he and Cllr Liz Colling would meet with the lead officers from those organisations over the next month to gain a better understanding of the current position.

Merger of (4) GP surgeries in Scarborough

Daniel Harry, Scrutiny Team Leader, stated that Scarborough and Ryedale CCG had informed them that 4 GP practices in Scarborough are considering merging. A 'soft' merger will take place in December 2017, with the full merger thereafter. Daniel Harry said that he had been told that all 4 sites would remain and that the merger should lead to an improvement in service, as between the 4 sites they will be able to offer appointments from 7.30am to 7.30pm and at the weekend.

Daniel Harry confirmed that a representative of the Scarborough and Ryedale CCG will be invited to attend the November Mid Cycle Briefing of the committee to provide further detail on what is proposed, the potential impact and what engagement and consultation had been undertaken or was planned.

Mental Health Services in Harrogate

Cllr Jim Clark informed the committee that the Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) and Harrogate and Rural District Clinical Commissioning Group (H&RD CCG) had started a programme of public engagement on the future of mental health services in the Harrogate area. This follows the recent pause on the development of an in-patient mental health unit at Cardale Park in Harrogate. Cllr Jim Clark noted that further details would be provided to a future meeting of the committee, subject to confirmation of the proposed timeline for engagement, consultation and any subsequent changes to services.

Accountable Care Systems

Cllr Jim Clark confirmed that the introduction of an Accountable Care System for the north east and Cumbria had been discussed at the recent Joint Health Scrutiny of the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby Sustainability and Transformation Partnership (STP). At this stage, it is not clear what this will mean but the concern remains that a stronger focus further north towards Newcastle could disadvantage people living in the north of the county.

Yorkshire Ambulance Service

Cllr Jim Clark confirmed that concerns raised by Cllr John Blackie regarding ambulance coverage and response in parts of Richmondshire had been investigated. This had involved meetings with: Mark Inman and Pete Summerfield of the Yorkshire Ambulance Service (YAS); Janet Probert and John Darley of Hambleton, Richmondshire and Whitby CCG; a telephone interview with Leaf Mobbs, the Director of Planning and Development at YAS; and a review of YAS performance data. The outcome of this investigation has been shared with the Chair of the Richmondshire Area Committee, the Chair of the Health and Wellbeing Board and it will be discussed at the next meeting of the Richmondshire Area Committee.

15. Public Questions or Statements

There were two questions from members of the public.

Question raised by Roger Tuckett:

“Grenfell Tower teaches us that reliance on desk-top studies puts vulnerable people’s lives at risk. Is it any different with assessing demand levels for suicidal patients needing in-patient hospital beds?”

Cllr Jim Clark thanked Roger Tuckett for his question and agreed that copies of a document (appended to the minutes) be allowed to be distributed to the committee. Cllr Jim Clark, noting the reference that had been made to Grenfell Tower, stated that the loss of life as a result of the fire was dreadful. Also, that it was subject to a public enquiry, which had not yet delivered its conclusions or recommendations and so the comparison with the consultation on proposals for changes to mental health in-patient services was not helpful.

Cllr Jim Clark requested that the concerns raised by Roger Tuckett be taken into account as part of the consultation process. The committee were reminded that there would not be a decision at this meeting, as the consultation had only just finished and a full and complete analysis of the responses had yet to be completed, but that there

would be a full discussion and evaluation of all the evidence at the Scrutiny of Health committee meeting on 15 December 2017.

Question raised by Jo Foster, Richmondshire Liberal Democrats:

“Our Police Commissioner, Julia Mulligan’s attempt to take control of the Fire Service has been rejected by the police watchdog on the basis that it is: ‘...very high risk, lacking in any detailed assessment of what it would achieve and which, critically, cannot be reversed if things go wrong.’ Is this committee prepared to endorse a similar high-risk, leap in to the dark?”

Cllr Jim Clark thanked Jo Foster for her question and noted that the committee would not endorse a ‘leap into the dark’ but would impartially consider all of the evidence that is put before it and then come to a decision.

16. Transforming Adult and Older People’s Mental Health Services in Hambleton and Richmondshire - Post-consultation update

Considered -

Presentation by Janet Probert and Lisa Pope, Hambleton, Richmondshire and Whitby CCG, Brent Kilmurray, Chief Operating Officer and Adele Coulthard, Director of Operations, Tees, Esk and Wear Valley NHS FT.

Janet Probert introduced the presentation and emphasised that every effort had been made to engage with the public on the proposed changes to mental health services. Also, that every effort had been made to engage with the Scrutiny of Health Committee and this was the fourth time in a row that she had been to the committee to discuss mental health services and the need to change them so that they are fit for the future.

The presentation was then delivered by Janet Probert and Adele Coulthard. The key points from the presentation are summarised below:

- The ambition is to deliver the best possible service for the local population
- The views of the public are critically important and will be listened to
- A total of 866 people were engaged with at 35 public events
- There had also been a media campaign that was designed to promote engagement
- Discussions about the future of mental health services commenced in 2013
- In 2014 stakeholder engagement started. In 2015 there was a series of appreciative enquiry events and in 2017 there has been pre-engagement and formal consultation
- The priority is to keep care as close as possible to home
- Option 2 remains the preferred option of the CCG, TEWV and medical professionals
- A variety of different in-patient sites are already used outside of the county
- The fourth option, a 7 day enhanced community and crisis care and access to local remodelled adult functional assessment and treatment mental health beds on the Friarage Hospital site, had been discounted as it was not clinically safe
- In-patient mental health services have become increasingly specialised and so it has become increasingly difficult to have all the necessary specialisms and interventions at every site
- Patients are admitted only when they are seriously ill and they need to have privacy and dignity and should not be in mixed wards
- The CQC has suggested that the different populations of in-patients should be cared for differently and that single sex accommodation should be a priority.

Following the presentation Jess, a former mental health service user and Vice Chair of the Phoenix Group, spoke to the committee about her experiences and her view of what type of mental health services were needed. Jess stated that in-patient admission was the last possible option and that investment was needed in community services. Options 2 and 3 in the consultation offered an opportunity to make savings that could then be re-invested in community based care. Jess acknowledged that there simply was not enough money to do everything and so TEWV and the CCG had to develop new services that reflected local need and changes in mental health treatments and interventions.

Jess also noted that any in-patient wards that were used had to be of the highest standard, single sex, with different accommodation available according to the type of illness people had. Jess also highlighted her concerns that there had been a great deal of mis-information about the future of the Friarage Hospital. Jess stated that if the existing wards were vacated, then it was likely that they would be used by South Tees to provide more physical health services for local people.

Cllr Jim Clark thanked Jess for coming to the meeting and for her valuable input as a former service user.

Janet Probert stated that should the provision of in-patient mental health facilities at the Friarage end, then this would not pose a threat to the future of the Friarage Hospital.

Dr James Dunbar of South Tees Hospitals NHS Foundation Trust, stated that the Friarage was critically important to the Foundation Trust and that any vacated space would be used to increase the local delivery of physical health services.

Janet Probert recognised the concerns of the committee regarding travel times to alternative mental health in-patient sites but stated that for most people Darlington and Middlesbrough were closer to them than the Friarage. It was accepted, however, that this was not the case for people in the immediate vicinity of Northallerton. Janet Probert stated that the CCG and TEWV would work with the County Council and others to look at how the issues around travel times could be addressed.

Brent Kilmurray said that the intention was to provide a resource centre for mental health services on the Friarage site, building on best practice. This would be something new and exciting which would offer a real improvement in the way that community mental health services were delivered. It would mean more care close to home, evening and weekend cover, more in-reach to care homes and more access to psychological therapies. The aim is to co-design this new approach with service users and carers.

Adele Coulthard emphasised that the majority of in-patient admissions were now compulsory and under the Mental Health Act, they were no longer voluntary or self-referral. They were for people in crisis who needed 'psychiatric intensive care', care which was only available at larger sites due to the skills, specialisms and health professionals required. Locally, the level of demand for in-patient services did not warrant provision at the Friarage.

Adele Coulthard stated that work was underway to develop community-based sanctuary accommodation, for people in crisis, to further avoid the need for an admission to mental health in-patient services.

Janet Probert welcomed the work that Healthwatch North Yorkshire had done and said that the CCG and TEWV would continue to work with Healthwatch, as they offered a different perspective.

In summarising, Janet Probert outlined the next steps, as follows:

- Finish the analysis and completed the report over the next two weeks
- Go through the NHS England checkpoint process of assurance
- Present findings and proposed way forward to the Northern Clinical Senate
- Report to CCG Governing Body on 26 October 2017
- Update the Scrutiny of Health Committee at the meeting on 15 December 2017.

Cllr Jim Clark thanked all attending for the presentation and in-depth explanations that had been provided about the rationale and what the new services could look like.

Cllr Jim Clark noted the need to look at mental health service provision in the county as a whole to better understand what the level of need is and how it can best be met, within the existing financial constraints. Cllr Jim Clark stated that the outcome of the engagement on mental health services in Harrogate and the surrounding area and the services that will be offered by the new mental health hospital in York should be taken into account when considering the future of mental health services in Hambleton and Richmondshire.

Cllr Jim Clark asked Janet Probert a series of questions, as follows: why it was that there appeared to be a general move away from providing in-patient beds in the north of the county, when they were available elsewhere; how will any reduced in-patient capacity be managed and will enough community based services be built up to compensate; and how far have recent proposed changes to the development of mental health services been influenced by need and how far by CCG funding problems.

Janet Probert noted that Cllr Clark had been a strong advocate for improved mental health services in the county for many years. In response to the specific questions, Janet Probert stated that there were not enough people in the area with the level and complexity of mental health need that would justify building a new in-patient facility or bringing the existing wards up to a modern standard.

Adele Coulthard stated that 98% of TEWV patients received the care that they needed out of hospital. The 2% that are admitted for in-patient treatment accounted for 60% of total expenditure.

Janet Probert noted that about 10% of the HRW CCG annual budget was spent on mental health services, compared to the 8% that was allocated by central government. Whilst Middlesbrough CCG spent about 13% of its annual budget on mental health services, it benefitted from a larger overall allocation of central government funding. This is due to the allocations being based upon health needs. In an area like Hambleton and Richmondshire, where people are generally healthier and live longer the allocation is less. This is despite the fact that by living longer and having multiple long term conditions, it is more expensive to provide health services here.

Janet Probert said that the reality was that any increase in mental health services would be at the expense of physical health services and at present it was not clear what element of physical health services could be safely run down to provide the increased funding.

Brent Kilmurray said that there was no firm decision about the future of the Cardale site in Harrogate. The site had been purchased at a cost of £2 million and planning permissions had been gained. There was a need to better understand, through local engagement and consultation with the public, stakeholders, service users and carers, how the site could best be used.

Brent Kilmurray stated that access to transport and travel times were a key consideration for service users and their carers and that this would be taken into

account. It was noted, however, that 98% of people received their mental health services and interventions in the community close to where they lived and not in an in-patient facility.

In response, Cllr Jim Clark stated that this was not a simple binary choice between in-patient or community based services. Instead, it was about ensuring that services met identified need as best they could within the finances, whatever combination of services that was.

Cllr Jim Clark noted that the quality of services had significantly improved since TEWV had become the provider of most mental health services in the county.

Cllr Liz Colling queried whether the local concerns about the future of the Friarage Hospital had distorted the consultation and engagement process by taking the focus away from the needs of mental health service users and their carers.

In response, Janet Probert said that the importance of the Friarage Hospital to local people was known and that the analysis of the consultation responses should be able to distinguish between general concerns about the future of the Hospital and concerns about how mental health services are provided in Hambleton and Richmondshire.

Cllr Liz Colling then sought further information on patient flows to the mental health in-patient beds at the Friarage.

Adele Coulthard stated that the Friarage is mostly used by people living in Hambleton. People living in Richmondshire tend to go to Darlington or Middlesbrough. Very few people from the area travel south. The only exception to this is the use of the small, specialist unit in Malton.

Cllr Kevin Hardisty stated that the Friarage Hospital was very important to local people and had been supported by them over the years. He stated that a recent fund raising event had raised £20,000 and that local services needed to be maintained at the Friarage.

Cllr Toby Duff reiterated the value of the Friarage to local people and stated that South Tees NHS Foundation Trust had not done enough to address workforce shortages, shortages that were now placing services at risk.

Cllr Ian Galloway said that the Police were picking up an increasing amount of community safety issues relating to people with mental health problems. This wasted police time and the Cardale development, being opposite Harrogate Police station, would have helped with this by enabling mental disorder offenders to get the help they needed promptly.

Cllr Heather Moorhouse asked what plans were in place to enable the TEWV workforce to be trained in the new roles that will be required as a transition is made from in-patient services to new ways of delivering services in the community.

In response to these questions, Adele Coulthard stated that TEWV had a good working relationship with the police and mental health training was provided to police officers as part of the partnership work done to support the Mental Health Crisis Care Concordat locally.

Adele Coulthard said that a place of safety did not have to be a mental health in-patient unit but could be anywhere where treatment could be administered in a clinically safe way. It was noted that over the past 6 months the Hambleton and Richmondshire s.136 suite had only been used by 2 people. This was because the majority of people with mental health problems who end up being picked up by the police do not need in-

patient services as they are often under the influence of drink or drugs and have experienced some form of crisis that can be dealt with in different ways.

In response to earlier questions regarding the transition from in-patient services to community based services, Brent Kilmurray said that there would be a transition period and that the timescales needed would be factored into the plans, should the preferred option go ahead.

Brent Kilmurray informed the committee that some building defects had been discovered at the Roseberry Park hospital in Middlesbrough, which had been built as part of the government PFI initiative. These defects had been temporarily corrected but there was a need for long term repairs to be undertaken. This would mean that some mental health services would be moved to Hartlepool on a temporary basis to enable the work to be completed. Services for people from North Yorkshire would still be provided in Middlesbrough.

Cllr Jim Clark asked Brent Kilmurray to provide an update at the committee meeting on 15 December 2017.

Cllr John Ennis queried how local clinicians had reacted to the proposed changes to mental health services.

In response, Janet Probert said that of the 17 GP practices in Hambleton and Richmondshire, 16 GP practices had supported Option 2. 1 had abstained.

Adele Coulthard stated that staff at TEWV had a range of views but most supported Option 2 and increased investment in community mental health services.

Janet Probert outlined the next steps as being agreement of the preferred option by the CCG Governing Body in October 2017 with details of implementation being brought back to the Scrutiny of Health Committee at the meeting on 15 December 2017.

Cllr Jim Clark asked that the issues raised by Roger Tuckett be taken into account and that the resolution that the committee had received from Northallerton Town Council be considered.

Janet Probert stated that she was attending a meeting of Northallerton Town Council on Monday 2 October 2017.

Resolved -

1. Thank all for attending
2. Support in principle the drive to improve mental health services in the county and in particular prevention and early intervention
3. That the impact of proposed service changes upon travel times is taken into account
4. 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 north and away from North Yorkshire over time
5. That the issues identified by: Roger Tuckett; Richmondshire Liberal Democrats; and Northallerton Town Council are taken into account
6. Come back to the meeting of the Scrutiny of Health Committee on 15 December 2017 to provide an update on the programme of repair works that will be undertaken at the Roseberry Park site in Middlesbrough
7. Come back to the meeting of the Scrutiny of Health Committee on 15 December 2017 to present the final report on the consultation analysis and proposals, including: a detailed plan of how the transition between in-patient services and

community services will be managed; and an examination of what the impact of the development of in-patient mental health services in Harrogate and York will be upon care pathways in Hambleton and Richmondshire.

17. Healthwatch Response to the Future of Mental Health Services in Hambleton and Richmondshire

Considered -

The report by Nigel Ayre, Manager and Claire Ferguson, Research and Intelligence Officer, Healthwatch North Yorkshire

Nigel Ayre introduced the report and provided the committee with an overview of the role and responsibilities of Healthwatch and its role as an independent voice for health and social care service users. The key points from the report are summarised as follows:

- The ability of carers, particularly young carers, to support people in mental health services may be impacted upon by a move of in-patient care from the Friarage to Darlington, Bishop Auckland and Middlesbrough. Further consideration could be given to public transport options.
- The transition from in-patient services to community based care in Hambleton and Richmondshire will need to be carefully managed. Further work may need to be done to ensure that local community services across a broad range of public and voluntary providers are linked into the mental health in-patient sites at Darlington, Bishop Auckland and Middlesbrough.
- There are concerns that any change to services will result in a breakdown in continuity of care as patients are dealt with by different staff at different sites.
- The closure of the in-patient mental health wards at the Friarage could further reduce the county's overall inpatient capacity, with the potential for an increase in Out of Area placements.
- A system-wide view of mental health service provision should be maintained, with potential changes both inside and outside of the county being taken into account. In particular, the current review of mental health services in Harrogate and the surrounding area.

Nigel Ayre said that the report was being finalised and would be used by the CCG and TEWV as part of their considerations.

Cllr Liz Colling noted that Out of Area placements were not necessarily a bad thing, as often it meant that people could access the specialist care that they needed.

Cllr Jim Clark thanked Nigel Ayre and Claire Ferguson for attending and the input that Healthwatch had provided.

Resolved -

1. That the report be noted
2. Thank Nigel Ayre and Claire Ferguson for attending
3. That the issues raised by Healthwatch are taken into account as part of the analysis of the consultation findings and any conclusions drawn.

18. Sustainability and Transformation Partnerships - Development of Proposals and Engagement with Consultation Timetable

Considered -

The verbal update by Janet Probert, Hambleton, Richmondshire and Whitby CCG
Janet Probert gave an overview of the Sustainability and Transformation Planning (STP) process across the three STPs that cover the county, as follows:

Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP

- Work is progressing on the main themes, such as stroke services, cancer, mental health and staying healthy
- There are no concrete proposals at this time and it is unlikely that there will be any formal engagement and consultation until 2018
- An accountable care system is being developed for the north east and Cumbria, which takes in all of the Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP
- Hambleton, Richmondshire and Whitby CCG will work with the accountable care system as and when it benefits the local population.

Humber Coast and Vale STP

- The new lead officer for the STP is Simon Pleydell
- There is potential for a review of the current STP boundary as there are significant differences across the health economies north and south of the Humber.

West Yorkshire and Harrogate STP

- Work on the 10 key priority areas is proceeding, with each programme at different stages of development and with its own milestones for delivery
- A total of £31m in transformation funding for A&E, cancer, mental health, learning disabilities and diabetes has been secured by the STP
- A strategic case for change for stroke services has been developed but there is no confirmed date for engagement and consultation.

Cllr Jim Clark queried whether the creation of an accountable care system for the north of England would have a negative impact upon services in the north of the county, as the risk was that the focus would be upon Newcastle and surrounding areas.

Janet Probert said that the CCG would work with the accountable care system but that the natural footprint was North Yorkshire and the focus was upon delivering services locally.

Cllr Jim Clark noted the pragmatic view and said that the committee would keep a close watch on how the accountable care system develops.

Janet Probert then introduced an update that was being provided by the Hambleton, Richmondshire and Whitby CCG and South Tees Hospitals NHS Foundation Trust on physical health services being provided by the Friarage Hospital in Northallerton. This included a short presentation.

Dr James Dunbar, South Tees Hospitals NHS Foundation Trust, said that the affection that local people had for the Friarage was well known and respected and that the aim of the presentation and discussions today was to outline some of the challenges that were being experienced with the delivery of the services.

Dr James Dunbar told the committee that the Friarage was a vital asset for South Tees Hospitals NHS Foundation Trust and assured members that there were no plans for the closure of the Friarage. Indeed, the future of the hospital was exciting and a range of new services could be delivered from the Friarage closer to people's homes.

Dr James Dunbar stated that there were shortages of key personnel, such as consultant anaesthetists, which was beginning to have an impact upon the services that could be delivered at the hospital. Whilst a number of temporary fixes had been

put in place, a permanent solution was needed that ensured long term sustainability of services. As such, the aim is to start a conversation with local people about the type of services that could be provided from the Friarage site.

Dr James Dunbar said that the old approach of hospitals providing every type of health service and intervention was no longer sustainable or safe. The increasing complexity of medical procedures, the increasing complexity of the illnesses that people present with, shortages of key staff and the creation of regional and sub-regional centres of excellence have meant that different hospitals now provide different services.

Dr James Dunbar said that South Tees Hospitals NHS Foundation Trust was being supported by the Royal College of Anaesthesia and the Royal College of Emergency Medicine, who were reviewing the services currently being delivered from the Friarage.

Dr James Dunbar stated that he and colleagues would keep updating the committee both at formal meetings and Mid Cycle Briefings. At this stage, it was likely that final recommendations would be made in the Summer of 2018.

Cllr Liz Colling noted the interdependencies between key, skilled roles in a hospital setting and how shortages in one specialism could have a dramatic impact in other areas.

Cllr John Ennis stated that recruitment and retention to key roles was an ongoing issue and one that was being looked into by this committee and the Care and Independence Overview and Scrutiny Committee as part of a piece of joint scrutiny into health and social care workforce planning.

Dr James Dunbar said that there were national difficulties recruiting doctors and anaesthetists. These problems were particularly acute in the north east. Work was underway to promote recruitment and training but it took time and North Yorkshire would always be in competition with areas like York and Newcastle.

Cllr Jim Clark encouraged the CCG and South Tees Hospitals NHS Foundation Trust to engage with local people on the future of service delivery at the Friarage at the earliest possible opportunity.

Cllr Jim Clark reminded members that it was the role of the committee to hear evidence and then take a decision based upon it. The high levels of emotion around hospital buildings and sites was unhelpful as the focus must be upon outcomes for patient and carers.

Janet Probert said that the reason for coming to committee today was to start a dialogue with local people, services users and carers about the type of physical health services that could be delivered safely and effectively from the Friarage. No deals were being done behind closed doors and the process would be open and transparent.

Janet Probert noted that a great deal of investment had gone into the Friarage over the past couple of years with the MRI scanner and the opening of the new Cancer Unit. There is always a balance to be struck between high quality, specialist services and local delivery. For example, working with the James Cook means that specialist cancer treatment can be provided at Middlesbrough but that all follow up and outpatient services can then be provided in Northallerton.

Resolved -

1. Thank all for attending
2. Support in principle the work that is being done to ensure that long term sustainability of hospital based health services at the Friarage

3. Come back to the meeting of the Scrutiny of Health Committee on 15 December 2017 to provide an update
4. In the interim, provide regular updates to the Committee Chair and Vice-Chair.

19. Integrated Prevention, Community Care and Support in Scarborough and Ryedale

Considered -

The verbal update by Simon Cox, Scarborough and Ryedale CCG

Daniel Harry noted that Simon Cox was unable to attend the meeting but that he had provided a short, written update on the procurement process, as below:

“As Members may be aware, Scarborough and Ryedale CCG commenced its integrated Community Services procurement in July 2017 with a pre-qualification questionnaire that resulted in three bidders being shortlisted. These were:

- Humber NHS Foundation Trust
- Scarborough and Ryedale Health and Social Care Partnership, a consortium of NYCC and the East Coast Health Options (ECHO) the local GP federation.
- County Durham and Darlington NHS Foundation Trust.

The CCG are now in the second stage of their procurement process, referred to as dialogue. This is a series of structured meetings with bidding organisations and helps bidders understand the CCG’s requirements and refine their service and commercial proposals.

Once the CCG is happy that all significant elements of its requirements have been discussed, it will ask the bidding organisations to submit their final tenders, which will be evaluated and a recommendation made about which organisation the CCG will select to be its preferred bidder.

The CCG’s current timeline envisages announcing its preferred bidder in mid-November with a new service due to commence on 3 April 2017.

Members will note that as the procurement is a commercially confidential process, the CCG and its officers cannot discuss the finer details of its procurement or bidder proposals.”

Daniel Harry read this update to the committee.

Cllr Jim Clark highlighted his concerns that the timetable was very ambitious and that the capped expenditure regime may have an impact on what could be delivered. Cllr Jim Clark stated that he and Cllr Liz Colling would be meeting with Simon Cox on 3 October 2017.

Resolved -

That the update be noted.

20. Work Programme

Considered -

The report of the Scrutiny Team Leader, North Yorkshire County Council, for the Committee to discuss and check that the Work Programme reflects the key issues that need to be addressed.

Resolved -

1. That the report be noted.
2. 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 12:40

DH