

HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on 13 January 2015.

PRESENT: Councillor Dryden (Chair), Councillor Biswas (Vice Chair); Councillors Hubbard, Junier and M Thompson.

OFFICERS: J Dixon and E Pout.

ALSO IN ATTENDANCE: C Blair - Associate Director of Commissioning, Delivery and Operations, South Tees CCG.
R McKenna - Commissioning Manager, North of England Commissioning Support Unit.

APOLOGIES FOR ABSENCE were submitted on behalf of Councillors Cole and Mrs H Pearson OBE.

** DECLARATIONS OF MEMBERS' INTERESTS

| Name of Member | Type of Interest | Item/Nature of Interest |
|--------------------|------------------|---|
| Councillor Hubbard | Non-pecuniary | Agenda Item 4 – Registered patient at Resolution Health Centre. |

** MINUTES

The Minutes of the Health Scrutiny Panel meeting held on 16 December 2014 were submitted and approved as a correct record.

SUSPENSION OF COUNCIL PROCEDURE RULE NO. 5 – ORDER OF BUSINESS

In accordance with Council Procedure Rule No. 5, the Panel agreed to vary the order of business to deal with an additional item under Any Other Business, namely a Position Statement in relation to Winter Pressures 2014/15, received from South Tees Hospitals NHS Foundation Trust following circulation of the agenda.

ANY OTHER BUSINESS

Winter Pressures 2014/15 Position Statement

The Scrutiny Support Officer circulated a position statement at the meeting which had been supplied by South Tees Hospitals NHS Foundation Trust in relation to Winter Pressures 2014/15.

The report provided an update in light of the current concerns regarding winter pressures in A&E across the country, highlighting the current and short term outlook for James Cook Hospital.

It was highlighted that the Trust had been under sustained and significant pressure since 2 January 2015 and had, in addition to the winter plan, instigated additional actions including the cancellation of some elective operations, which had supported the front line teams to respond. On 9 January 2015, STHFT was the only acute trust reporting NEEP 3 with all others remaining at NEEP4. The current plans would be reviewed again on 12 January 2015.

Details in relation to the following areas were outlined in the report and the information was discussed by the Panel:-

- Key challenges faced by the Trust.
- Winter surge mid-December to 5 January 2015.

- Beds – 16 additional beds had now been opened with a discharge lounge facility of two beds and six chairs. A further 12 beds had been commissioned by Middlesbrough local authority as time to think beds at The Gateway and Middlesbrough and Redcar and Cleveland local authority had commissioned 12 new intermediate care beds at St Peter's Court, Redcar.
- Front of House Services (A&E and Acute Assessment Unit (AAU)). Further funding had been made available for the period 18 - 21 December 2014 due to predicted additional surge. The Trust increased service capacity and the System Resilience Group had agreed to fund this level of support to March 2015.
- Staffing.
- Patient Flow – It was reported that on 9 January 2015, there was a total of 66 patients with delayed transfers of care, 37 of them at James Cook, 8 at Friarage and 21 at Community Hospitals. The Panel was advised that a significant amount of work had been undertaken to minimise 'bed blocking' and that procedures were now in place to avoid this happening with Middlesbrough patients. The South Tees CCG was picking up this issue with North Yorkshire CCG as it appeared that the majority of patients with delayed transfers were from North Yorkshire.
- Handover of patient care from ambulance to acute trust. Clarification was provided in relation to the reference to 'the development of a regional flight deck being piloted'. The Panel was advised that this was basically a performance dashboard across the North East region that showed how many patients were in A&E and how many patients were expected in A&E. The system was used by all CCGs as a management tool and the Trust would be able to see at a glance the regional position four times a day.
- Communications.
- Escalation. The Trust's North East Escalation Plan (NEEP) had been reviewed regionally to ensure consistency of approach by Trusts and locally to enhance the approach prompting at each NEEP levels to minimise variation. Levels 1-2 indicated mild pressure, levels 3-4 indicated significant pressure and levels 5 would be a major incident.
- Current position and short term outlook.
- A&E.
- AAU – Reference was made to the increase in military staff to support sickness absence and it was clarified that all military staff had honorary contracts with the Trust. They could be brought in to cover additional hours when they were not on operational tours.
 - In relation to the cancellation of elective procedures requiring an overnight stay except day cases, 23 hour cases and category 1 procedures, the Panel was advised that work had been done to reduce the waiting list over the summer so that there would be fewer cancellations if pressure increased over the winter. The One Life Centre and Nuffield could be used for minor procedures to alleviate pressures.

AGREED as follows:-

1. That the STH(NHS)FT be thanked for the position statement provided, at short notice, and that it be advised that the Panel was pleased with the efforts being made in maintaining NEEP 3, although it had some concerns around delayed transfers/discharge of patients.
2. That the Scrutiny Support Officer prepares a letter on behalf of the Panel to North Yorkshire CCG and North Yorkshire Council, expressing the Panel's concerns in relation to delayed transfer/discharge of patients to the North Yorkshire area to see what is being done to alleviate the problem.

SOUTH TEES CCG – URGENT CARE REVIEW

The Scrutiny Support Officer submitted an introductory report in relation to the South Tees Urgent Care Review.

On 18 November 2014, the Health Scrutiny Panel received information in relation to the Alternative Provider Medical Service (APMS) contract review at the Resolution Health Centre. The Panel was informed of the co-terminus nature of the contract which also involved the walk-in centre based in North Ormesby. Whilst the Resolution Centre contract was extended until March 2016, the Panel

was advised that the walk-in element (the part of the contract held by the CCG) was also subject to a decision by the CCG at its Board meeting in November.

The Panel subsequently wrote to the CCG outlining its support for the walk-in centre and its wish to see the provision remain in its current form, due to the recognition that it was a valuable resource for the town.

Members were also informed about an Urgent Care Review that was being undertaken by the South Tees CCG and it was agreed that the Panel wished to receive further information. Accordingly, appropriate representatives had been invited to the meeting.

Doctor M Milner, Urgent Care Lead, South Tees CCG had been invited to attend the meeting to provide information in relation to the Urgent Care Review, however, he submitted his apologies as he had been unavoidably detained. The Panel agreed that he should be invited to a future meeting. C Blair, Associate Director of Commissioning Delivery and Operations, South Tees CCG and R McKenna, Commissioning Manager, North of England Commissioning Support Unit, were in attendance at the meeting to provide information. A report prepared by the South Tees CCG in relation to the review at the Resolution Practice, had been circulated to Members prior to the meeting.

The report provided detailed information in relation to the Resolution Practice, including background information, current service provision, contracted activity, unregistered attendances, patient demographics and analysis of attendances.

It was highlighted that the APMS Review demonstrated that attendances at the practice were well above those that had been contracted, clearly demonstrating existing patient demand. The success of the walk-in centre appeared to have created new patient demand and there was no evidence that there had been a decrease in the demand for accident and emergency.

In relation to the future of the walk-in service at Resolution, three options were identified and outlined at 6.1 of the circulated report. As a result, the South Tees CCG Governing Body approved the extension to the unregistered element of the APMS contract until March 2016.

A discussion ensued and the following issues were raised:-

- Reference was made to the fact that the number of patients attending A&E had not decreased, despite an increase in the use of the walk-in element of the Resolution Practice and it was queried whether staff at the Resolution would ever refer patients to A&E if the practice was busy. The Panel was advised that patients would only be referred to A&E if their condition was life-threatening. At busy times, additional capacity should be called on in order to meet current KPIs of patients being seen within 30 minutes.
- In response to a query, it was confirmed that those patients referred to James Cook A&E from the Resolution walk-in were not monitored so it would be difficult to know whether patients presenting at A&E had initially attended Resolution.
- Reference was made to ensuring that patients attended the appropriate place and it was highlighted that around 35,000 patients per annum, attending A&E could have been self-managed. It was felt that consideration was required in relation to promoting clearer signposting to appropriate services.
- The issue of GP services was touched upon, including the variation in patient appointment booking systems between practices and whether this impacted upon the numbers of patients using the Resolution walk-in service and A&E. The Panel considered it would be worthwhile looking at direct access to each of the 26 GPs surgeries across Middlesbrough and how appointments were offered.
- It was highlighted that the Resolution walk-in was in addition to the three GP practices within North Ormesby Health Village. Despite being located in separate buildings, it had been noted

that some patients, if dissatisfied with GP appointment times offered to them, attended the walk-in as an alternative.

Councillor N Walker, Ward Councillor for Hemlington, was in attendance at the meeting and referred to the issue of Hemlington Medical Centre which had also been subject to the APMS contract review. Councillor Walker updated the Panel in respect of the latest position and advised that the current provider's contract had been extended for a three-month period whilst a branch surgery provider was sought.

The Chair thanked the representatives for their attendance and the information provided.

AGREED as follows:-

1. That the contents of the circulated report be noted.
2. That the Panel's position in relation to the Resolution Walk-in Centre remained unchanged, in so far as the Panel wished to see the Walk-in Centre maintained in its current form as it was a valuable resource for the town.
3. That the Scrutiny Support Officer liaise with NHS England to obtain information in relation to the appointment booking systems for the 26 GP practices in Middlesbrough and to report back to the Panel.
4. That Doctor Milner be invited to attend a future Panel meeting in relation to the Urgent Care Review.
5. That the Panel's previous views in relation to maintaining a GP practice at Hemlington be reiterated.

OVERVIEW AND SCRUTINY BOARD UPDATE

The Chair requested that the Panel note the contents of the submitted report which provided an update on business conducted at the Overview and Scrutiny Board meeting held on 9 December 2014, namely:-

- Attendance of Executive Member for Education and Skills.
- First Capital Monitoring and Review Report 2014.
- Local Government Association (LGA) National Procurement Strategy.
- Final Report of the Economic Regeneration and Transport Scrutiny Panel – Wi-fi Town.
- Remaining Items of Business (deferred from previous meeting).

AGREED that the report be noted.

DATE AND TIME OF NEXT MEETING

The next meeting of the Health Scrutiny Panel was scheduled for Monday, 2 February 2015 at 4.00pm.