

15 MARCH 2019

SOUTH TEES JOINT HEALTH SCRUTINY COMMITTEE

A meeting of the South Tees Joint Health Scrutiny Committee was held on 15 March 2019.

PRESENT Councillor Goddard (Chair);
Councillors Dryden, Hellaoui, Holyoake, McGee,
Walters and Watts.

OFFICIALS C Breheny, L Donaghue, E Kunonga and
A Pearson.

IN ATTENDANCE K Bainbridge – Integration Programme Manager,
South Tees Clinical Commissioning Group.

27. **APOLOGIES FOR ABSENCE** were submitted on behalf of Councillors Biswas, Mrs Cooney and O'Brien.

28. **MINUTES**

RESOLVED that the Minutes of the meeting held on 18 January 2019 be confirmed and signed by the Chair as a correct record.

29. **DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT**

The Director of Public Health presented his annual report for 2018/19. In April 2018 Middlesbrough and Redcar and Cleveland Borough Councils established a joint public health team. Public Health South Tees was the first joint public health service in the north east region and was amongst a few such arrangements nationally. The report outlined the public health challenges that the local community continued to face.

As part of the ensuing discussion, the following points were raised:

- A Member raised concerns that some parents were encouraging others that their children should not take up the vaccination programme at school. The Director of Public Health advised that there was a small group of people scaremongering others. It was something that was often challenging to deal with, but he advised that the take up of immunisations and vaccinations in the area was very good.
- How would the issues around poverty be tackled? The Director of Public Health advised that a lot of issues arose due to poverty and deprivation. There was a lack of funding being provided from the Government to address the issues. It was important that good employment opportunities were provided as that would go a long way in improving health and wellbeing locally.
- The Fair Funding Review discussed further reductions in funding

15 MARCH 2019

allocations. Beyond 2020/21 it was not known what would happen with the public health grant.

- It was important that the work programmes for the Health and Wellbeing Board and the Scrutiny Committees were not duplicated.
- There had been a lot of deaths related to prescribed drugs such as opioids. Opioids were prescribed for chronic pain but could cause addiction and lead to overdoses and carried significant risks when misused. The Director of Public Health advised that a report could be provided to the committee on prescription drugs and their use.
- Mental health issues should be part of the Local Authority's agenda.

At the conclusion of the discussions the following actions were agreed:

1. The report be noted; and
2. The Director of Public Health provide a report on prescription drugs and their use to the South Tees Joint Health Scrutiny Committee.

30. **LIVE WELL SOUTH TEES HEALTH AND WELLBEING BOARD**

The Director of Public Health presented a report providing an update on the work programme that was being addressed by the South Tees Health and Wellbeing Board.

The Integration Programme Manager for South Tees Clinical Commissioning Group provided an update on the Primary Care Networks (PCNs) and detailed the next steps for implementation.

As part of the ensuing discussion, the following points were raised:

- Could Healthwatch investigate opioid prescribing?
- A one size fits all approach would not work in the Primary Care Networks.
- There were risks that there could be a disjointed health care system.
- Appropriate medical funding was not being provided to the South Tees area. Clinicians were trying to prop up services when they were failing due to a lack of funding.
- Two GP practices had closed within East Cleveland in 18 months.
- The PCN's guidance was still very unclear.
- The clusters needed to be agreed by 15 May 2019. There would be 6/7 clusters across South Tees.
- Concerns were raised that the PCN model looked like a commercialised business model.
- There had been no consultation around the PCN model.
- Additional pressures on GPs would result in them leaving practices.

15 MARCH 2019

There was already a shortage of GPs in the area.

- There were opportunities for work to take place at a local level for the benefit of the local communities.
- A Member asked if the PCN model was progressed would there be a need for a CCG? The Director of Public Health advised that the Health and Social Care Act 2012 named the CCG as a statutory body:-**NOTED**

31. **BREAST DIAGNOSTIC SERVICES IN SOUTH TEES**

The Chair of the Middlesbrough Health Scrutiny Panel and the Middlesbrough Democratic Services and Scrutiny Officer provided an update on the Breast Diagnostic Services in South Tees. The Middlesbrough Health Scrutiny Panel had met on several occasions and received legal advice in relation to the 'temporary' relocation of the services from James Cook University Hospital to the University Hospital of North Tees. At the latest meeting the Health Scrutiny Panel was minded to make a referral to the Secretary of State for Health and Social Care if the information they had requested on several occasions was not provided.

Members of the South Tees Health Scrutiny Committee supported the proposals to make a referral to the Secretary of State for Health and Social Care.

At the conclusion of the discussions the following actions were agreed:

1. The report be noted; and
2. A letter be submitted by the Governance Manager advising of the South Tees Joint Health Scrutiny Committee's support for Middlesbrough Council's Health Scrutiny Panel proposals to make a referral to the Secretary of State for Health and Social Care.

32. **WORK PROGRAMME**

The Governance Manager presented a report detailing the committees work programme for the year:-**NOTED**.