

HEALTH SCRUTINY COMMITTEE

Wednesday, 21st November, 2012

Present:- Councillor Colin Eastwood – in the Chair
Councillors Mrs Johnson, Loades, Taylor.J and Williams

1. APOLOGIES

Apologies were received from Cllr Mrs Hailstones, Cllr Mrs Cornes and Cllr Becket.

2. DECLARATIONS OF INTEREST

Cllr Johnson declared an interest as she worked for the North Staffs Users Group.

3. MINUTES OF PREVIOUS MEETING

That the minutes of the meeting held on the 24th October 2012 be agreed as a correct record.

4. MINUTES FROM THE COUNTY HEALTH SELECT COMMITTEE MEETING HELD ON MONDAY 5TH NOVEMBER 2012

Resolved: That the minutes be noted.

5. MINUTES FROM THE HEALTH ACCOUNTABILITY SESSION HELD ON 22ND OCTOBER 2012

Resolved: That the minutes be noted

6. INFANT MORTALITY

The Chair welcomed Dr John Harvey, Public Health Consultant and Sally Parkin, Clinical Director at North Staffs CCG. Dr Harvey outlined the problems currently facing the area. The main issues causing concern had started in 2007/08 and there were still problems in getting data for a substantial period of time due to the validation processes. A review had been carried out which sought to identify specific problematic areas but no single factor had stood out. There was an awareness that certain factors were certainly contributory such as smoking but the pattern in Newcastle did not appear to have been repeated in adjoining areas. It was thought that smoking was the most significant issue with a 12% variance between the best and worse areas in England. Where possible issues such as smoking were being supported through a national support team for health inequalities.

Dr Harvey confirmed that infant mortality rates were coming down to the levels seen in 2006 but that staff were not becoming complacent due to this and current levels were still not considered to be acceptable.

Members queried what the international levels of Infant Mortality were. It was stated that the best levels were in Scandinavia and that the main reasons behind this were to do with cultural issues and accessibility to high quality services.

Members discussed a Maternity Pathway document that had been distributed. Maternity care was delivered in various settings by a range of healthcare professionals including GPs, Midwives and Obstetric Consultants. There were numerous pathways/protocols that had been developed in partnership with University Hospital of North Staffordshire which adhered to NICE guidance and sat as an appendix to the North Staffordshire Ante Natal Service Specification. These Pathways/protocols varies depending on any associated health risk factors that were identified at the first booking appointment.

Members questioned whether this was the current pathway and it was confirmed that it was. Concerns were raised that there appeared to be a large workload for midwives; it was stated that this was kept under scrutiny and that at present the levels of work were deemed to be safe.

Members asked whether Councils could take on campaigns to help with issues surrounding infant mortality. IT was confirmed that campaigns were carried out by the County Council and that campaigns in primary care use were effective and needed to be enhanced if possible. Members also considered that Infant illness should also be addressed alongside infant mortality.

The Chair thanked Sally and Dr Harvey for attending the meeting.

Resolved: That the update and briefing notes be received.

7. MODEL OF CARE PHASE TWO FORTNIGHTLY UPDATE

The Chair raised concerns regarding the availability of the fortnightly updates and stated the importance of receiving them on time.

Members raised concerns regarding progress of Phase Two, especially regarding the closure of beds before community services were up and running. It was understood that there were no resources for running double services and that this was therefore creating a provision gap.

The Chair confirmed that he would contact the County Council regarding accountability sessions to ensure that any dates could be organised well in advance and so that members could be prepared with questions in good time. Care also had to be taken to ensure that all questions asked were responded to. It was thought that the closure of the Bennett Centre would have an impact which was as yet unknown.

Concern was also raised that the Commissioners claimed not to be aware that these problems would occur even though they had been highlighted by the Scrutiny Committee.

Members requested that the Clinical Commissioning Group be invited to a future meeting of the Committee to provide an update on the situation. The Chair confirmed that he had a meeting with the CCG on 12th December and would discuss the concerns of the Committee then. The Chair also requested that any further questions for the CCG be passed to him prior to the meeting on 12th December.

There was also concern regarding where responsibility lay between the Health Authority and Social Services for certain activities . The Chair agreed that this issue needed to be raised with the County Council.

Members also expressed concerns that there was no direct contract with PALS and that complaints had to go through ward staff and that this made confidentiality an issue. The Chair agreed to raise this issue with the County.

Resolved: That the Chair take the concerns of the Committee back to the County Council.

8. NUTRITION

This topic would be deferred to a later meeting.

9. HEALTH SCRUTINY MEMBERS VISIT TO A&E

Dates were still awaited for this from the hospital.

10. VISIT TO BRADWELL HOSPITAL - NEW DATES

Members agreed to visit the hospital on 28th November.

11. URGENT BUSINESS

There was no urgent business.

COUNCILLOR COLIN EASTWOOD
Chair