

**MINUTES
OVERVIEW AND SCRUTINY COMMITTEE**

Monday 10 March 2014

Councillor Mike Hope (Chair)

Councillor Gary Gregory	Councillor Paul Hughes
Councillor Patricia Andrews	Councillor Suzanne Prew-Smith
Councillor Emily Bailey	Councillor John Truscott
Councillor Sandra Barnes	Councillor Henry Wheeler
Councillor Krista Blair	

Apologies for absence: Councillor Steve Ainley, Councillor Stephen Poole and Councillor Colin Powell

Officers in Attendance: J Ansell and S Bray

Guests in Attendance S Walters (Chief Executive, NNE CCG)
J Hollingsworth and D Wakelin

31 APOLOGIES FOR ABSENCE.

Apologies for absence were received from Councillors Ainley, Powell and Poole.

32 TO APPROVE, AS A CORRECT RECORD, THE MINUTES OF THE MEETING HELD ON 9 DECEMBER 2013.

RESOLVED:

That the minutes of the above meeting, having been circulated, be approved as a correct record.

33 DECLARATION OF INTERESTS.

None received.

34 SCRUTINY WORK PROGRAMME 2013/14

The Chair welcomed Councillor Hollingsworth, Portfolio Holder, Health and Housing, Sam Walters, Chief Executive, Nottingham North East CCG and Dave Wakelin Corporate Director, who had been invited to respond to questions on the following areas of the Health and Housing Portfolio:

Liaison with Public Health and the Clinical Commissioning Group.

Councillor Hollingsworth and Sam Walters, Chief Executive, NNE CCG gave a presentation and responded to questions from Members as follows:

Questions put and responses received

Question: It would be helpful to receive clarification of the differing roles and responsibilities of the CCG and the Public Health Authority.

The differing roles and responsibilities between the CCGs who work in partnership with NHS England Area Team and Public Health are:

NHS England - Area Team

- To have direct responsibility for commissioning services:
 - primary care;
 - military and prison health services;
 - high secure psychiatric services; and
 - Specialised services.
- To allocate resources to clinical commissioning groups
- To support CCGs to commission services on behalf of their patients
- To work with CCGs in delivering quality in GP practices

Local Authority - Public Health

- NHS Health Checks
- Sexual Health
- National Child Measurement Programme
- Local health protection
- Tobacco control, smoking cessation, drug
- and alcohol misuse services
- Children 5-19, i.e. obesity

Both Public Health England and Local Authorities have responsibilities for population health and wellbeing, for example workplace health, behavioural and lifestyle, with Local Authorities leading the local initiatives, while Public Health England manages national campaigns and shares research and best practice guidance with Local Authority teams.

Upper tier Local Authorities have formal accountability but 2nd tier Local Authorities also have a responsibility and role in delivering local Public Health initiatives and local services that impact on health and wellbeing. There is a long list of Local Authority responsibilities which include:

- Public health services for children and young people aged 5-19
- Interventions to tackle **obesity** such as community lifestyle and weight management services
- Locally-led **nutrition** initiatives
- Increasing levels of **physical activity** in the local population
- Public **mental health** services

- **Dental** public health services
- **Accidental injury prevention**
- Population level interventions to **reduce and prevent birth defects**
- Behavioural and lifestyle **campaigns to prevent cancer and long-term conditions**
- Supporting, reviewing and challenging delivery of key public health funded and NHS delivered services such as **immunisation and screening** programmes
- Public health aspects of promotion of **community safety, violence prevention** and response
- Public health aspects of local initiatives to tackle **social exclusion**
- Local initiatives that reduce public health impacts of **environmental risks**

The CCG commission services on behalf of member practices for our local population for example; acute services, mental health services, community services, continuing health care, enhanced services and prescribing.

Question: What is the availability in the Borough of free health checks and who are they available to i.e. priority groups?

Health checks are offered through GP practices once every five years to individuals aged between 40 and 74, this is a *national programme commissioned by local authorities* following their newly devolved responsibility for public health. Learning disability health checks are also offered through GP practices and these are commissioned by NHS England – there are new directed enhanced services which have just been released, these have expanded the age range to include a larger cohort of individuals. There is triangulation between NHS England, GP Practices and the CCG, plus working in partnership with Gedling Borough Council.

Question: What input has the CCG had to the Calverton master plan?

The CCG input focuses on delivery of quality services and ensuring appropriate access for the local population. NNE has actively supported the Calverton master plan.

Question: How are targets for GP caseloads arrived at and are they realistic, given the difficulties in getting a GP appointment that are being reported by patients i.e. the target in Calverton is 1800 against a current caseload of 1200 in the master plan?

Caseloads are not a target but they are an indicator of the GP and nursing resource required, also included with the number of patients are other criteria such as, level of deprivation and long term conditions

incidence. Patient's access is important to the CCG and this is where we are piloting the Same Day Urgent Care Model at two of our Practices, we are also working with the Area Team on future primary care delivery models in pressured areas and supporting practices in considering federated models, this is for managing practices more efficiently and therefore access and care for patients.

Question: What influence does the CCG have over the provision of dentistry services in the Borough?

Provision of dentistry services comes under NHS England and any influence would be through experiences and feedback through GP practices.

Question: Could members have an update on the development of the Arnold Health Centre?

Arnold Health Centre building will be complete by end of March 2014 with a view to the staff being fully in by mid April 2014. County Health Partnership (CHP) will be offering services for phlebotomy and podiatry. CHP have not yet confirmed whether the District Nurses will be based there.

Question: Has there been any review of the positive impact and are there any plans for further development of the Park House health centre in Carlton? Is there capacity at the site to provide more services?

A diagnostic service is required in the community and there is a lead lined room at Park House which would offer the facility for x-rays to be done but equipment is required. The site has limited capacity for parking which has been an on-going problem for some time but options are being sought.

Question: In the light of the Teal Close housing development, the Ashwell St GP practice in Netherfield has expressed a wish to expand their site and provision. This has support from the community – in what ways would the CCG work in support of that proposal?

The CCG do not have a GP practice on Ashwell Street, however the Trentside Medical Practice in Netherfield have found land but a decision is to be made on how to fund the build. The CCG are very supportive of the practice's development and expansion plans and will be required to formally state that when the approval stage with NHS England is required.

Question: What are the likely developments to GP Practices across the Borough in general?

The likely developments in Gedling relate to Calverton Practice and Trentside Medical Group. The developments in Gedling, namely Papplewick, will impact on developments in Hucknall.

Question: Nottingham City CCG recently issued a statement saying that smoking, alcohol and obesity were the three major problems that they had to confront.

- To tackle smoking, they claimed that ‘they have smoking cessation services out there that are successful.’
- On the alcohol problem, they said they ‘needed to crack down more on under age sales’
- On obesity, they said the answer was ‘getting more cycle lanes’.
- Do you consider these to be adequate responses, and what would be your plan of action?

Our plan of action is supporting Public Health and Local Authorities in promoting, take up and delivery of services. One of the major issues is with smoking illegal tobacco, which collectively we are all trying to tackle and likewise with the alcohol problem we are addressing culturally the practise of ‘front loading’ where by youngsters get drunk before they go on a night out.

Our strategy supports delivery of the Health & Wellbeing Strategy. The Local Authorities Partnership Group brings together Gedling Borough Council, Broxtowe District Council, Newark and Sherwood District Council, Ashfield District Councils, Public Health and the CCG. Through this group the Local Authorities and the CCG have signed up to the 11 tobacco pledges and all have signed up to support Dementia Friendly Communities. This Group raises the opportunity to learn.

Question: E- cigarettes - a pathway away from tobacco or a gateway to addiction?

E-cigarettes appear to be a controversial subject but it was recently discussed in the Local Authorities Partnership Group where the 11 tobacco pledges were agreed and highlighted the complexity of the subject and the possibility to form a discussion/meeting of its own.

The Chair thanked all guests for their presentation and responses. Guests reported that further information to be circulated following the meeting.

Summary of Quarter 3 Performance

Stephen Bray, Corporate Director, gave an overview of Q3 performance.

The Chair asked Members for comments.

A number of questions were put and responded to by the Corporate Director.

In Depth Scrutiny

The Chair updated Members of progress with in depth scrutiny reviews Homelessness and Hardship in the Borough and Reducing Unemployment in the Borough, and informed Members that a third review, Transport Links to the Borough would commence in June.

Responses to Scrutiny Recommendations

The Chair reported the responses of Portfolio Holders and the Council Solicitor and Monitoring Officer to the recommendations of the Localism, Planning and Housing Scrutiny Review.

RESOLVED:

- i) To thank the Portfolio Holder for Health and Housing, the Chief Executive, Nottingham North East CCG and Council officers for their presentation and responses to Members' questions.
- ii) To note the Quarter 3 2013/14 performance information.
- iii) To note the responses of Portfolio Holders and the Council Solicitor and Monitoring Officer to the Localism, Planning and Housing Scrutiny Review.

35 REPORTS AND NOTICES RECEIVED BY THE CHAIR OF OVERVIEW AS REQUIRED UNDER CONSTITUTIONAL LAW

Members considered a list of items referred to the Chair of Overview and Scrutiny Committee under the Constitution or Law.

These included:

1. Items referred to the Chair of Overview and Scrutiny Committee under Contract Standing orders and Standing orders for dealing with Land

Notifications received where it has not been possible to obtain 3 quotations for a contract estimated to be between £10,000 and £50,000.

- Contract for Boiler Replacement Scheme (Stephen Bray, Corporate Director)

- Contract for the Installation of Voltage Optimisation Equipment (Stephen Bray, Corporate Director)
- Contract for the provision of Employment and Skills Support (Paula Darlington, Corporate Director)

Notification of decision to dispose of land or property other than the sale of council houses to sitting tenants pursuant to the right to buy.

- Gift of Land on Rutland Road to Nottinghamshire Community Housing Association for development (Alison Bennett, Service Manager, Housing and Localities)

2. Items referred to Scrutiny under the Budget and Policy Framework

- Prudential and Treasury Indicators and Treasury Strategy 2014/15 (Mark Kimberley, Corporate Director.)

RESOLVED:

To note the items referred to the Chair of Overview and Scrutiny Committee under the Constitution or Law.

36

ANY OTHER ITEM WHICH THE CHAIR CONSIDERS URGENT.

The Chair informed Members that an additional Overview and Scrutiny Committee had been scheduled on Tuesday 29th April to consider the outcomes of the recent Peer Challenge.

The meeting finished at 7.45pm

Signed by Chair:
Date: