



Dorset Health Scrutiny Committee

Minutes of the meeting held at County Hall, Colliton Park,
Dorchester, Dorset, DT1 1XJ on Wednesday, 21 December
2016.

Present:

Ronald Coatsworth (Chairman)
Bill Batty-Smith, Ros Kayes, Paul Kimber, William Trite, David Jones, Peter Shorland,
Alison Reed and Peter Ogglesby.

Members Attending

Jill Haynes (Cabinet Member for Adult Health, Care and Independence).

Officer Attending:

Jason Read (Democratic Services Officer), Ann Harris (Health Partnerships Officer) and Helen Coombes (Interim Director for Adult and Community Services).

Others in Attendace:

Dr Anu Dhir, Dr Karen Kirham, Sally Sandcraft, Tim Goodson (NHS Dorset Clinical Commissioning Group).

(Notes: These minutes have been prepared by officers as a record of the meeting and of any decisions reached. They are to be considered and confirmed at the next meeting of the Committee to be held on **Thursday, 9 March 2017**).

Apologies for Absence

56 Apologies for absence were received from Mike Lovell and Tim Morris.

Code of Conduct

57 There were no declarations by members of disclosable pecuniary interests under the Code of Conduct.

A general interest was declared by Cllr Alison Reed, that she was an employed by Dorset Healthcare University Foundation Trust. As this was not a disclosable pecuniary interest Cllr Alison Reed remained in the meeting and took part in the debate.

Minutes

58 The minutes of the meeting held on 14 November 2016 were confirmed and signed.

Public Participation

Public Speaking

59 Eight public questions were received at the meeting in accordance with Standing Order 21(1) and are included as an annexure to these minutes. The Interim Director of Adult and Community Services read out a statement on behalf of the Chairman which clarified some of the points raised in the public questions. The statement is also attached as an annexure to these minutes.

There were no public statements received at the meeting in accordance with Standing Order 21(2).

Petitions

There were no petitions received at the meeting in accordance with the County

Draft Primary Care Commissioning Strategy and Plan

60 The Committee received a presentation by Dr Anu Dhir (NHS Dorset Clinical Commissioning Group) that outlined the Draft Primary Care Commissioning Strategy and the reasons behind it.

The Strategy had been developed as a response to increasing pressures on Primary Care across Dorset. General Practitioners (GPs) were beginning to struggle with patient need due to a lack of workforce which had resulted in staff working longer hours and having to deal with increased responsibility and as a result the current model of working was no longer sustainable.

The key focus of the Strategy was to look at the areas where Primary care was being delivered efficiently and successfully and incorporate those ways of working in to the areas that were struggling. The first phase of the Strategy had involved discussions with GPs and Primary Care staff as well as seeking the views of stakeholders and others that would potentially be affected by any changes made. The second phase was ongoing engagement which would include wider stakeholder consultation.

It was emphasised that the current model of working was no longer sustainable, and GPs no longer had the resources or staff to deliver services to an acceptable standard under the current arrangements. The Strategy outlined blueprints for how a new model might work and how this would help ease some of the pressure GPs were facing.

Following questions from councillors, the Chief Officer for the CCG clarified a number of points. Any legal advice being sought by the CCG in relation to the Strategy and the outlined proposals had a very minimal cost associated with it. The suggested merging of certain practices outlined in the Strategy were a reflection of how GPs across the country were beginning to work. Having multiple practices in close proximity was not the most efficient use of resources, and having different health professionals in centralised hubs would enable a higher standard of service delivery.

It was noted that if GPs were working in close proximity with mental health professionals and physiotherapists among other healthcare professionals, GPs workloads would be significantly reduced. The current workload for GPs in county was not an attractive prospect which was impacting the recruitment and retention of GPs in Dorset. The Strategy helped to improve the workload of GPs which would improve retention and recruitment.

It was clarified that all GPs across Dorset had been involved in the development of the Strategy. It was acknowledged that many GPs had expressed concerns that they could not sustain the current model of working and valued the change proposals in the Strategy.

The Primary Care Strategy provided a strategic framework and direction of travel. The CCG informed the Committee that the next steps would be consulting on the Strategy. Councillors suggested that a 'bottom up' approach with the staff delivering the care would be beneficial.

Some concerns were raised over transport arrangements for residents of the more rural parts of the county. It was clarified that practices might chose to merge if there was duplication in an area, and that this was more likely to happen in urban than rural areas. The strategy aimed to provide accessible services to all parts of the county. Creating GP hubs would allow different healthcare professionals to work in the same building, which would allow residents to visit one place for multiple medical needs rather than travelling to different locations for different services.

The Strategy highlighted the use of technology to mitigate the amount of face to face consultations required. Video calls and emails could be used to liaise with patients. Whilst it was acknowledged that not all patients would be comfortable with that approach, it was noted that the younger population and those who work full time would embrace it, allowing them to have electronic consultations and removing the need to take time off work to see a GP.

The CCG were currently developing their engagement plan and offered to return to the Committee to provide a further update report. It was noted that the consultation for changes to Dorset County Council's Adult Services in Bridport had been largely successful and this would be an excellent model to replicate.

Resolved

That the Dorset Health Scrutiny Committee, after consideration of the presentation from the NHS Dorset Clinical Commissioning Group;

1. Accepts the need for the provision of GP services to be modified but states that this change must be in such a way that will maintain the quality of provision of services.
2. Accepts the need for widening the range of services provided at local level .
3. Notes with concern the possibility that reduction of surgeries may have implications for increasing difficulty of access and believes that there is a need to incorporate this in all plans.
4. Believes also that the principle of equalisation must be at the highest level.
5. The committee therefore reminds the CCG MUST ensure that at all stages in the process there must be the fullest possible genuine consultation with the public.
6. Asks the CCG to bring any plans to the Dorset Health Scrutiny Committee at the earliest possible stage.

Briefings for Information / Noting

- 61 The Committee considered a report by the Interim Director for Adult and Community Services which contained update briefings on the following;
- Changes to the provision of health services for individuals with Cystic Fibrosis (commissioned by NHS England).
 - Changes to the provision of Vascular Services (commissioned by NHS England).
 - Dorset Health Scrutiny Committee Forward Plan.

The Committee requested that representatives of NHS England be invited to the next meeting of the Committee to elaborate on the changes to the provision of Vascular Services.

Resolved

1. That representatives of NHS England be invited to the Dorset health Scrutiny Committee meeting being held in March 2017 to present a report on the changes to the provision of Vascular Services.

Questions from County Councillors

- 62 No questions were asked by members under standing order 20(2).

Meeting Duration: 10.00 am - 12.05 pm.