

HEALTH SCRUTINY FORUM AGENDA



Tuesday 20 January 2009

at 3.00 pm

**in Council Chamber
Civic Centre, Hartlepool**

MEMBERS: HEALTH SCRUTINY FORUM:

Councillors: Barker, Brash, R W Cook, S Cook, A Lilley, Plant, Simmons, Sutheran and Young

Resident Representatives: Jean Kennedy, Linda Shields and Mike Ward

- 1. APOLOGIES FOR ABSENCE**
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
- 3. MINUTES**
 - 3.1 Minutes of the meeting of the Health Scrutiny Forum held on 8 January 2009
(to follow)
- 4. RESPONSES FROM LOCAL NHS BODIES, THE COUNCIL, EXECUTIVE OR COMMITTEES OF THE COUNCIL TO FINAL REPORTS OF THIS FORUM**

None
- 5. CONSIDERATION OF REQUEST FOR SCRUTINY REVIEWS REFERRED VIA SCRUTINY CO-ORDINATING COMMITTEE**

None

6. **CONSIDERATION OF PROGRESS REPORTS / BUDGET AND POLICY
FRAMEWORK DOCUMENTS**

None

7. **ITEMS FOR DISCUSSION**

Reaching Families in Need Investigation

7.1 Evidence from Westminster Council

(a) Covering Report – *Scrutiny Support Officer*; and

(b) Presentation from Tom Butler, Westminster City Council.

7.2 Community Pharmacy Minor Ailments Scheme – Consultation - *Scrutiny
Support Officer*

8. **ISSUES IDENTIFIED FROM FORWARD PLAN**

9. **FEEDBACK FROM RECENT MEETING OF TEES VALLEY HEALTH SCRUTINY
JOINT COMMITTEE**

10. **ANY OTHER ITEMS WHICH THE CHAIRMAN CONSIDERS ARE URGENT**

ITEMS FOR INFORMATION

Date of Next Meeting

**Tuesday, 10 February 2009 at 3.00 pm in the Council Chamber, Civic Centre,
Hartlepool**

HEALTH SCRUTINY FORUM

20 January 2009



Report of: Scrutiny Support Officer

Subject: REACHING FAMILIES IN NEED INVESTIGATION –
EVIDENCE FROM WESTMINSTER CITY COUNCIL
– PRESENTATION

1. PURPOSE OF THE REPORT

- 1.1 To inform Members that a representative from Westminster City Council will be in attendance at today's meeting to provide evidence of best practice in relation to the Forum's ongoing investigation into 'Reaching Families in Need'.

2. BACKGROUND INFORMATION

- 2.1 The Forum has during the course of its investigation gained an understanding of the complexity and seriousness of social exclusion. Attention has also been drawn to its implications on a small minority of families (the Government estimates around 2-3% nationally) who are failing to benefit from the rising tide of living standards and increased opportunities. These families, who exist in Hartlepool as they do all over the country, have highly complex needs, multiple problems and low aspirations. It was in recognition of the need to reach these families in Hartlepool and explore / improve ways to address their needs that the Forum began its investigation.
- 2.2 On a national basis, the Government has also placed emphasis on the importance of addressing these issues, as part of ongoing social exclusion agenda, resulting in the publication of "Think Family: Improving the Life Chances of Families at Risk" earlier this year. Emphasis has also been placed on the need for Councils to work with their local partners and offer strategic leadership for service provision across their communities. Moreover, it is clear that individual bodies acting in isolation cannot properly address the most pressing problems in society, such as social exclusion.
- 2.3 Further demonstrating the Government's commitment to dealing with this issue, the Department for Children, Schools and Families (DCSF) identified 15 Local Authority Family Pathfinders (Blackpool, Bolton, Brighton and Hove, Durham, Gateshead, Islington, Leeds, Salford, Somerset, Walsall, Warrington, Southampton, Sunderland and Westminster). The Pathfinder Programme will aim to improve outcomes for families caught in a cycle of low achievement, particularly those who are not being effectively engaged and supported by existing services, exploring what actually works and sharing

solutions that are effective on the ground. To achieve this, a total of £16 million has been committed.

- 2.3 In exploring possible best practice, it was agreed that evidence be sought from one of the 15 Pathfinder Authorities. In accordance with this, a representative from Westminster City Council has been invited to attend today's meeting to provide evidence of best practice and further enhance the Forum's understanding of his Authority's activities / proposals in reaching families in need. This evidence will take the form of a presentation and during course of this evidence gathering session it is suggested that it could be useful for Members to seek responses to the following key questions, should they not become apparent during the course of the presentation:-

- (a) What are your activities / proposals for the provision of targeted intervention for hard to reach families in need?
- (b) Evidence considered had so far shown that crime and anti-social behaviour were often used as trigger mechanisms for the identification of hard to reach families in need. What other trigger mechanisms are there and which one(s) do you use?
- (c) When hard to reach families in need are identified, with additional issues outside your service area, where and how do you refer them? Is there a co-ordinated approach to facilitating dealing with them?
- (d) What are your views on the current multi agency approach to the provision of targeted wellbeing and prevention health services for hard to reach families?
- (e) What do you feel are the key areas of improvement (if any), necessary to reduce health inequalities and encourage hard reaching families to take up local health services?

3. RECOMMENDATION

- 3.1 That Members note the content of the presentation, seeking clarification on any relevant issues from the representatives in attendance, where felt appropriate.

Contact Officer:- Joan Wilkins – Scrutiny Support Officer
Chief Executive's Department - Corporate Strategy
Hartlepool Borough Council
Tel: 01429 284142
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BACKGROUND PAPERS

The following background paper was used in the preparation of this report:-

- (a) Report of the Scrutiny Support Officer entitled 'Reaching Families in Need – Scoping Report' Presented to the Health Scrutiny Forum on 9 September 2008.

HEALTH SCRUTINY FORUM

20 January 2009



Report of: Scrutiny Support Officer

Subject: COMMUNITY PHARMACY MINOR AILMENTS
SCHEME – CONSULTATION

1. PURPOSE OF THE REPORT

- 1.1 To seek the Forum's views and comments on the proposal to decommission of the Community Pharmacy Minor Ailments Scheme.

2. BACKGROUND INFORMATION

- 2.1 On the 29 December 2008, the Chair of the Forum received a request for Overview and Scrutiny involvement in consultations on the proposal to decommission the Community Pharmacy Minor Ailments Scheme, on the grounds that:

- There is evidence that it has not met its stated objectives;
- The new Pharmacy Contract ensures delivery of the majority of the outcomes of the scheme;
- Some interventions used as part of the Scheme are now deemed to be clinically unsafe; and
- Non-cost effective options are being used.

- 2.2 With a deadline for submission of views as part of the consultation by the 30 January 2009, the PCT's Practice Based Commissioning Account Manager will be in attendance at today's meeting to fully brief the Committee. In order to assist Members in the formulation of a view on the proposal a Briefing Paper and Communication and Engagement Plan are attached to this report at Appendix A and B respectively.

3. RECOMMENDATION

- 3.1 That Members

- (i) Note content of the Briefing Paper and formulate a view on the proposal to be relayed to the PCT in accordance with the 30 January deadline; and
- (ii) Put forward suggestions for any additional stakeholders and groups with whom the PCT should make contact regarding the proposal.

Contact Officer:- Joan Wilkins – Scrutiny Support Officer
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BACKGROUND PAPERS

There were no background papers used in the preparation of this report.



Hartlepool Primary Care Trust

Hartlepool Primary Care Trust (PCT)
Community Pharmacy Minor Ailments Scheme Review Autumn 2008

BRIEFING PAPER

INTRODUCTION

Hartlepool PCT's Minor Ailments Scheme was launched in December 2003 with the intention of providing greater access and choice to patients for advice and / or treatment for conditions that are potentially self-treatable. The Scheme enables patients who are exempt from the NHS prescription charges to access medicines at a Community Pharmacy.

However, upon review in October 2008 and the agreement of the Prescribing Sub-Committee, it is proposed to decommission the service. There is evidence that it has not met its stated objectives and the new Pharmacy Contract ensures delivery of the majority of the outcomes of the scheme. Patients can also continue to access services through their GP Practice. In addition, some interventions used as part of the Scheme are now deemed to be clinically unsafe and non-cost effective options are being used.

PROCESS

It is proposed that the Hartlepool Minor Ailments Scheme is decommissioned with a three month notice period to all community pharmacies providing this service on the basis that:

- The service has little or no impact on access to GP Practices
- Community pharmacy is now required to provide support to patients to self-care as part of their contract
- The changes to national guidance show that some treatments within the scheme are clinically unsafe
- Community pharmacies are failing to follow guidance for first line treatment in some clinical areas

It is proposed to issue three month Notice of termination of contract to Community Pharmacies in January 2009. This would mean that the Minor Ailments Scheme would cease to operate on 1st April 2009.

The views of participating pharmacists have been sought via the Pharmaceutical Needs Assessment. The feedback was that pharmacists felt the scheme added very little value to current patient services whilst creating abuse potential around supply of medication.

Patients currently making use of the scheme will be able to access services at their Pharmacy through the New Pharmacy Contract (2005) and through their GP Practice or other primary care facility.

PROPOSALS

Background - Evaluation

One of the aims of the Scheme was to reduce 'inappropriate' consultations for GPs and Nurses, however the increase in treatments provided by the community pharmacies is not proportional to the reduction in scripts provided by GP practices. In addition, the majority of minor ailment consultations would not have resulted in a GP consultation as evidenced by no rapid referral resulting from participants in the scheme. A breakdown of the scheme is shown below:

Ailment	No. of Treatments Provided	%
Haemorrhoids	237.00	0.88
Mouth Ulcers	254.00	0.94
Athletes Foot	254.00	0.94
Nappy Rash	781.00	2.89
Insect Bites & Stings	76.00	0.28
Indigestion/Heartburn/Tummy Upset	1,663.00	6.16
Diarrhoea	-	0.00
Constipation	296.00	1.10
Sore Throat	59.00	0.22
Cough	3,190.00	11.82
Nasal Congestion	681.00	2.52
Threadworm	1,785.00	6.61
Hayfever	1,072.00	3.97
Vaginal Thrush	1,910.00	7.08
Minor Pain / Temperature	8,932.00	33.09
Head Lice	5,806.00	21.51
Total	26,996.00	100

From the above it can be seen that over 60% of consultations occur for three symptom areas: Cough, Minor Pain / Temperature and Head Lice.

Due to changes in National Guidance the scheme conflicts with current evidence bases for the treatment of Temperature and Nasal Congestion making these interventions clinically unsafe.

Evidence of treatments provided also show non-cost effective options being used to treat Head Lice rather than the schemes recommended first line product choices.

National legislation also changed with the new Pharmacy Contract (2005) which means that the majority of intended outcomes of the scheme can now

be met by delivery of community pharmacies' contractual requirements e.g. signposting, support for self-care, medicine use reviews.

Impact on Access to Services

Between July 2007 and May 2008, 26,996 treatments were provided under the Scheme, 19,464 consultations were made and 46,424 items were supplied. 62 consultations resulted in no treatment being supplied and no consultations resulted in rapid referrals. However, it is not clear how many individuals accessed the Scheme and the increase in treatments provided by community pharmacies did not equate to a reduction in scripts provided by GP Practices.

The decommissioning of the service can be expected to have the highest impact on those areas where a greater number of exempt prescriptions are issued.

Number of Consultations by Pharmacy and Ward

Pharmacy	Number of Consultations (July to May - 11months)	Ave Monthly	%
Boots Middleton Grange	2,209	201	11%
Boots Marina	1,314	119	7%
Chambers	405	37	2%
Clayfields	1,311	119	7%
Co-op York Road	1,519	138	8%
Co-op Fens	1,545	140	8%
Fursewood (Brus Corner)	1,351	123	7%
Healthways	1,569	143	8%
Lloyds Kendal	1,157	105	6%
Lloyds Wiltshire	539	49	3%
Lloyds Winterbottom	743	68	4%
Lloyds Wynyard	2,105	191	11%
Lloyds York	544	49	3%
M&J	366	33	2%
Superdrug	372	34	2%
Tesco	1,678	153	9%
Victoria	233	21	1%
Whitfield	504	46	3%
Total	19,464	1769	100%

Ward	Number of Consultations (July to May - 11months)	Ave Monthly	%
Stranton	8,264	751	42%
Headland	405	37	2%
Furze	4,146	377	21%
Fens	1,545	140	8%
Brus	2,094	190	11%
Owton	2,105	191	11%
Throston	539	49	3%
Seaton	366	33	2%
Total	19,464	1769	100%

Patients who are exempt from NHS prescription charges will continue to be able to access treatments through their registered GP Practice or via an alternative primary care facility such as a walk-in centre. GP Practices will be informed of the decommissioning of the Minor Ailments Scheme and recommended action to be taken to minimise any capacity issues, although this is felt to be unlikely.

The PCT are seeking to improve access to primary care through the GP Extended Hours contracts in which participating Practices open for an additional ten hours per week over and above normal 'office' hours.

Further, following the recent consultation on Improving Access and Choice in Primary Care Services the new GP Practices planned for the Fens and Throston Wards, plus the GP led Health Centre in the Stranton Ward, are intended to provide patients with greater choice and more convenient access - both in location and in opening times.

In addition, the outcomes of the Momentum: Pathways to Healthcare developments will mean a new integrated health and care facility in Hartlepool town centre.

INVOLVING LOCAL PEOPLE

The PCT wishes to engage with local people in Hartlepool to ensure that they continue to have access to those treatments and services which they would have received under the Minor Ailments Scheme.

A communication and engagement plan has been drawn up and is appended to this briefing.

It is proposed that activity to inform and engage with identified stakeholders and patients, carers and the public take place during January 2009.

Information regarding the decommissioning of the Scheme and alternative means of accessing services will be made available and views will be sought on how to mitigate the impact of the changes.

The engagement will include the following groups:

- Health Overview and Scrutiny Committee
- Local stakeholder and residents' groups
- Patients, Carers and Community
- Voluntary / community groups
- Staff

Action for Overview and Scrutiny

Overview and Scrutiny are asked to note the content of this briefing and highlight any additional issues that they feel may need addressing in informing and involving the local community and how they wish to be involved.

Communication and Engagement Plan**Hartlepool Primary Care Trust (PCT)**
Community Pharmacy Minor Ailments Scheme Review

Date	Audience	Activity	Lead
October 2008	Prescribing Sub-Committee	Discussion of Paper at meeting	RH
December 2008	Community Pharmacists	Letters to Community Pharmacists regarding forth-coming notice	RH
December 2008	Hartlepool Health OSC	Briefing and information letter including offer to attend meeting, and seeking suggestions of groups to engage with	SM
January 2009	Cleveland Local Medical Committee (CLMC) & GPs	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	GP Practices (GPs / Staff / Patients / PPGs)	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	PCT and Provider Staff	Information in staff newsletters Need2Know / Business Brief (North)	MB
January 2009	Independent Contractors	Updates in newly established Independent Contractor Bulletin	MB

January 2009	All local Media	Proactive Press Release	MB / PS
January 2009	Hartlepool LINK – <i>Patient Representatives</i>	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Local MP	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Ward Councillors	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Voluntary / Community Groups in Hartlepool – <i>Patients, Carers, Public</i>	Contact HVDA for links to voluntary / community groups in Hartlepool – Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Hartlepool Patient Experience Stakeholder Database Members – <i>Patients, Carers, Public</i>	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Area Partnership Board (North, South, Central)	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM
January 2009	Residents / Community Groups	Letter outlining proposals & inviting ideas on how to reduce impact on patients	SM