

HEALTH SCRUTINY FORUM AGENDA



13 December 2012

at 9.00 a.m.

in the Council Chamber, Civic Centre, Hartlepool.

MEMBERS: HEALTH SCRUTINY FORUM:

Councillors S Akers-Belcher, Brash, Fisher, Hall, Hargreaves, G Lilley and Wells

All Members of the Council invited to attend for item 7.1:-

The Mayor, Stuart Drummond
Councillors Ainslie, C Akers-Belcher, Atkinson, Beck, Cook, Cranney, Dawkins,
Fleet, Gibbon, Griffin, Hill, Jackson, James, Lauderdale, A E Lilley, Loynes,
Dr. Morris, Payne, Richardson, Robinson, Shields, Simmons, Sirs, Tempest,
Thompson and Wilcox.

1. **APOLOGIES FOR ABSENCE**
2. **TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**
3. **MINUTES**
 - 3.1 To confirm the Minutes of the meeting held on 29 November 2012 (to follow)
4. **RESPONSES FROM LOCAL NHS BODIES, THE COUNCIL, EXECUTIVE OR COMMITTEES OF THE COUNCIL TO FINAL REPORTS OF THIS FORUM**

No items
5. **CONSIDERATION OF REQUEST FOR SCRUTINY REVIEWS REFERRED VIA SCRUTINY CO-ORDINATING COMMITTEE**

No items.

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

No items.

7. **ITEMS FOR DISCUSSION**

7.1 Outpatient Services:-

- (a) Covering Report – *Scrutiny Support Officer*
- (b) Additional Information – *Representatives from Hartlepool and Stockton-on-Tees Clinical Commissioning Group and North Tees and Hartlepool NHS Foundation Trust*

8. **ISSUES IDENTIFIED FROM FORWARD PLAN**

9. **MINUTES FROM THE RECENT MEETING OF THE SHADOW HEALTH AND WELLBEING BOARD**

9.1 Minutes of the meeting held on 26 October 2012 (to follow).

10. **MINUTES FROM RECENT MEETING OF TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE**

10.1 Minutes of the meeting held on 5 November 2012.

11. **REGIONAL HEALTH SCRUTINY UPDATE**

No items

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

Date of Next Meeting – 10 January 2013, 9.00am in the Council Chamber, Civic Centre, Hartlepool

HEALTH SCRUTINY FORUM

13 December 2012



Report of: Scrutiny Support Officer

Subject: OUTPATIENT SERVICES – ADDITIONAL
INFORMATION – COVERING REPORT

1. PURPOSE OF THE REPORT

- 1.1 To introduce representatives from Hartlepool and Stockton-on-Tees Clinical Commissioning Group and North Tees and Hartlepool NHS Foundation Trust who will be present at today's meeting to discuss the additional information, as requested by Members at the Health Scrutiny Forum of 18 October 2012, in relation to the proposal to relocate Outpatient Services from the University Hospital of Hartlepool to the One Life Centre.

2. BACKGROUND INFORMATION

- 2.1 At the meeting of the Health Scrutiny Forum held on 18 October 2012, Members received information in relation to the proposal to relocate Outpatient Services from the University Hospital of Hartlepool to the One Life Centre. During this meeting Members requested the following information:-
- (a) Statistical information on the viability of the hospital;
 - (b) List of current services provided in the hospital;
 - (c) A map detailing where each service is located in the hospital and where the Outpatients Clinics are located in the hospital;
 - (d) Plan detailing where the Outpatient Clinics will operate from in the One Life Centre;
 - (e) Transition to a new hospital and plans for the Holdforth Road site up until the new hospital is built and the timescale; and
 - (f) Results of the survey carried out at the One Life Centre.

2.2 Subsequently representatives from Hartlepool and Stockton-on-Tees Clinical Commissioning Group and North Tees and Hartlepool NHS Foundation Trust Tees will be present at today's meeting to present and discuss the information with Members.

3. RECOMMENDATION

3.1 That Members note the content of this report, seeking clarification on any issues from the representatives present at today's meeting.

Contact Officer:- Laura Stones – Scrutiny Support Officer
Chief Executive's Department - Corporate Strategy
Hartlepool Borough Council
Tel: 01429 523087
Email: laura.stones@hartlepool.gov.uk

BACKGROUND PAPERS

The following background papers were used in the preparation of this report:-

- (i) Report of the Scrutiny Support Officer entitled 'Service Developments and Pathway Developments' – Covering Report – 18 October 2012
- (ii) Presentation to the Health Scrutiny Forum by Representatives from the Hartlepool and Stockton-on-Tees Clinical Commissioning Group and North Tees and Hartlepool Foundation Trust - NHS Hartlepool and Stockton-on-Tees Clinical Commissioning Group and North Tees and Hartlepool NHS Foundation Trust – October 2012'
- (iii) Minutes of the Health Scrutiny Forum – 18 October 2012

Momentum: Pathways to Healthcare

Outpatients

Background

The *momentum: pathways to healthcare* programme was established to transform the local healthcare system. The programme was established by North Tees and Hartlepool NHS Foundation Trust, Stockton Teaching Primary Care Trust and Hartlepool Primary Care Trust, closely aligned with County Durham Primary Care Trust and the North East Strategic Health Authority. The programme has three elements:

Element one Transforming services – came as a result of the White Paper *our health, our care, our say* where the outcome of a national consultation showed that people wanted:

- To be kept healthy
- The health service to intervene early when things go wrong
- To only come to hospital for things which can't safely be done locally.

Element two Primary and community care capital planning project – designed to create a network of enhanced and improved community facilities to support the above changes

Element three The hospital capital planning project – building a new hospital to serve the people of Hartlepool, Stockton and parts of Easington and Sedgefield.

A condition of the outline planning permission granted by Hartlepool Borough Council was that the community facilities and services had to be in place by the time the new hospital opens. This is to ensure that all three elements of the programme fit together and are right for the future needs of the changing population while also allowing for advances in medical and surgical care. It follows that services would be moving and transforming into the lead up to the new hospital opening to enable this condition to be met.

The hospital programme is also supported by a £10.5m transport plan to ensure the hospital is accessible to patients, visitors and staff. An accessible transport system – a section 106 agreement - was also a condition of the outline planning permission for the new hospital. In other words it was recognised at the beginning that *momentum* could not be a big bang process on the day the new hospital opens, rather a gradual process taking place

over the months and years leading up to the new hospital opening, now expected in 2017

What people expect

While this major change is underway the public, all partners in the health service – and those who scrutinise those services – quite rightly expect:

- the quality of services to continually improve
- patient satisfaction and experience to improve
- more lives to be saved and more people to make a better recovery from their illnesses
- more preventative and early intervention to prevent people from having to go into hospital
- that those organisations commissioning services and those providing them act in their best interests by either having a plan to meet or are actually meeting the requirements and guidelines from, among others, the Department of Health, the Care Quality Commission, the regulator of NHS foundation trusts Monitor and the royal colleges to ensure the (quite rightly) ever increasing standards for healthcare are met

The challenges which gave rise to *momentum*

The *momentum* programme was born out of the recognition that doing more of the same was not going to meet the changing need of the population and the availability and skills of those needs to provide services. It also recognised:

- People are, thankfully, living longer but their health and social care needs are increasing and becoming more complex
- Medicine and surgery is advancing at a pace it is difficult to keep up as new techniques and technologies become available. Some of these mean more treatment can be provided locally; some mean people need to travel to specialist centres for treatment because the specialists teams which carry out those procedures 365 days a year are concentrated in one place. This ensures patients will see someone who sees those particular illnesses or injuries often and works with a team of specialist who ensure they keep up with the highest standards of modern healthcare to give the patient the best chance of survival and recovery
- Recruiting and retaining staff is a challenge for some hospitals because doctors and other highly trained professionals prefer to work in specialist centres. The days of doctors being recruited to a hospital and staying for the whole of their career are becoming a thing of the past. However a new hospital with modern facilities in a central location will be attractive for a new generation of doctors and other health professionals
- Patients are better informed and can choose where they have their care
- While people do have to travel to specialise services it is much better to provide what can be done locally in people's own towns
- In the past a major criticism of the health service was that patients fell between the cracks of different services and organisations. Services are more efficient and better for patients if they are joined up

- Buildings are expensive to run so those who commission services as well as those who provide them must constantly look at ways to use what's available and bring separate services together

Constant principles in a changing world

While the three elements of the programme are still very crucial to the success of the programme and the challenges which resulted in the creation of the *momentum* programme are still relevant, other things in the world of healthcare have changed.

There are new and additional reasons why we need to make changes to services along the way, which have become more pressing over the last year, namely, the demand for specialist clinical care is increasing at a rate which no one could have foreseen. People are not only living longer but they are living with, commonly, five or six medical conditions. For example a person may have:

- chronic obstructive pulmonary disease
- be obese
- have type 2 diabetes
- have circulation problems
- have mobility problems

Royal Colleges issue new standards and guidelines on a regular basis as evidence emerges about patient safety and outcomes. In the current challenging economic environment the need to ensure that every pound spent will improve outcomes for patients is even greater. In addition to this, clinicians are passionate about delivering high quality, evidence based patient care in a safe environment to ensure patients achieve the best possible outcomes.

In the future the health service cannot continue to provide the type of care needed for these people with the system set up the way it is now. The health service must radically change the way it works to ensure it can meet the needs of the population both now and in the future.

Outpatients – a step on the way in the *momentum* journey

The *momentum* programme is a medium to long term programme but the principles of the three elements are still critical to its success. Outpatient services form part of the overall programme and currently the Acute Trust provides clinics in The University Hospital of Hartlepool (UHH) for the following specialties

- anaesthetics
- cardiology
- chemical pathology
- diabetes
- dietetics
- elderly care
- gastroenterology
- general medicine
- general surgery
- gynaecology
- haematology
- orthopaedics
- paediatrics
- physiotherapy
- rheumatology

- thoracic medicine
- Urology

The plan is for outpatient services to continue to be provided in the Hospital where there is a complex nature to the pathway. The proposal is to move the outpatient clinics identified in the table below to One Life Hartlepool equating to approximately nine per cent of the total outpatient clinics currently commissioned by NHS Tees and provided in University Hospital Hartlepool. This is based upon current activity analysis. If these moves go ahead it is anticipated that 3 clinic rooms could be underutilised in Hartlepool Hospital and therefore available for use by other clinical specialties.

	New Total UHH	Review Total UHH	Total UHH	Total to OLH
Diabetic	200	1693	1893	1226
General Medicine	284	1293	1577	600
Haematology	376	2845	3221	1014
Pain Management	291	667	958	712
Rheumatology	331	4454	4785	1273
Thoracic Medicine	475	2190	2665	2339
Other	18030	46160	64190	
TRUST	19987	59302	79289	7164

This a modest beginning and reflects the fact highlighted in the *momentum* documents that, by the time the new hospital is open, we could expect approximately half of outpatient appointments to take place in the community and the remainder, more complex pathways in the hospital.

Floor plan of the general outpatient area UHH



Indicates clinic rooms

Planned room scheduling for One Life



One Life Hartlepool following Outpatient moves

Room Number	Room Type	Monday		Tuesday		Wednesday		Thursday		Friday	
		AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
1100	Team room										
1101	Team room										
1102	Team room										
1103	Team room										
1104	Team room										
1105	Team room										
1106	Team room										
1107	Team room										
1108	Team room										
1109	Team room										
1110	Team room										
1111	Team room										
1112	Team room										
1113	Team room										
1114	Team room										
1115	Team room										
1116	Team room										
1117	Team room										
1118	Team room										
1119	Team room										
1120	Team room										
1121	Team room										
1122	Team room										
1123	Team room										
1124	Team room										
1125	Team room										
1126	Team room										
1127	Team room										
1128	Team room										
1129	Team room										
1130	Team room										
1131	Team room										
1132	Team room										
1133	Team room										
1134	Team room										
1135	Team room										
1136	Team room										
1137	Team room										
1138	Team room										
1139	Team room										
1140	Team room										
1141	Team room										
1142	Team room										
1143	Team room										
1144	Team room										
1145	Team room										
1146	Team room										
1147	Team room										
1148	Team room										
1149	Team room										
1150	Team room										
1151	Team room										
1152	Team room										
1153	Team room										
1154	Team room										
1155	Team room										
1156	Team room										
1157	Team room										
1158	Team room										
1159	Team room										
1160	Team room										
1161	Team room										
1162	Team room										
1163	Team room										
1164	Team room										
1165	Team room										
1166	Team room										
1167	Team room										
1168	Team room										
1169	Team room										
1170	Team room										
1171	Team room										
1172	Team room										
1173	Team room										
1174	Team room										
1175	Team room										
1176	Team room										
1177	Team room										
1178	Team room										
1179	Team room										
1180	Team room										
1181	Team room										
1182	Team room										
1183	Team room										
1184	Team room										
1185	Team room										
1186	Team room										
1187	Team room										
1188	Team room										
1189	Team room										
1190	Team room										
1191	Team room										
1192	Team room										
1193	Team room										
1194	Team room										
1195	Team room										
1196	Team room										
1197	Team room										
1198	Team room										
1199	Team room										
1200	Team room										

Key

Current Services	
U&I Screening	
Radiology	
Community Pharmacy	
Maternal Screening	
Chronic Heart Disease	
Podiatry	

Proposed Services

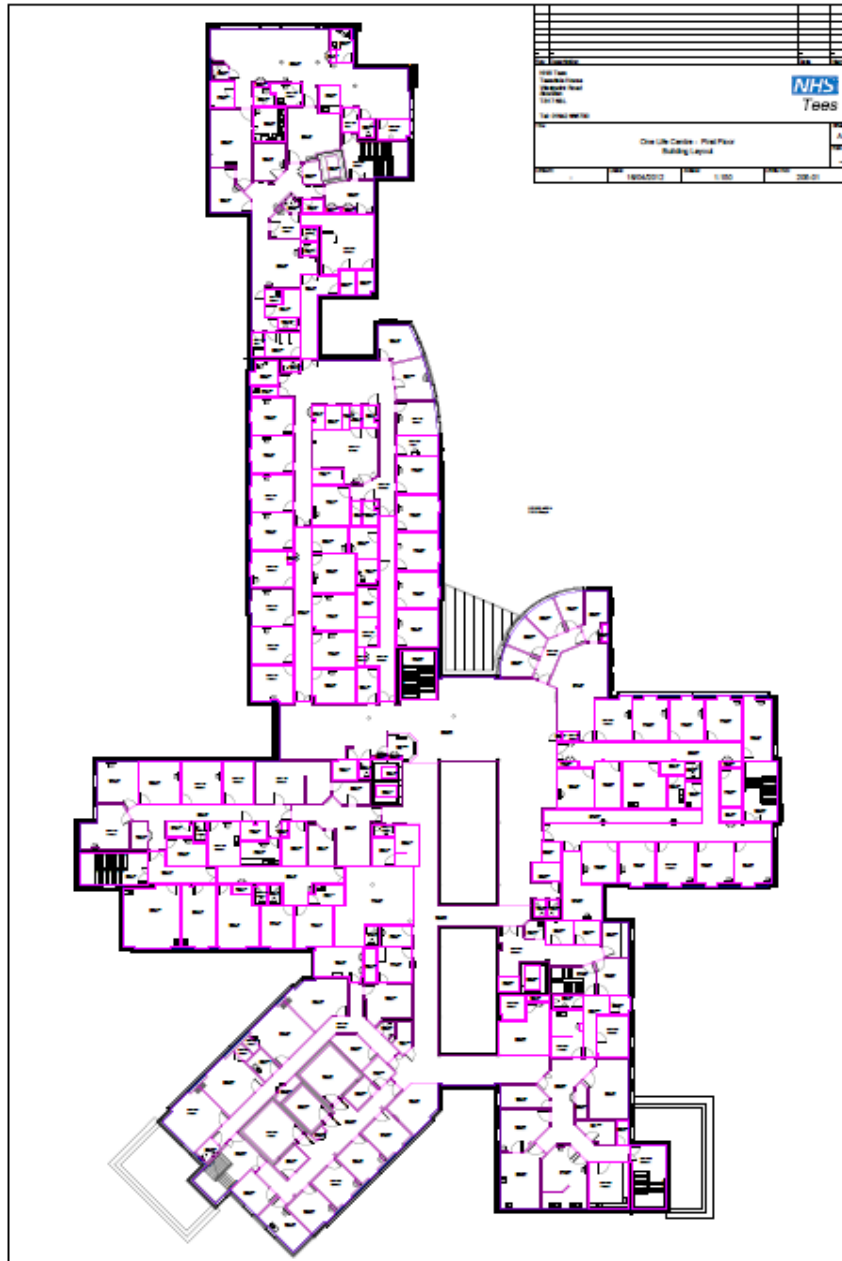
	U&I Screening
	Maternal Screening
	Podiatry
	Chronic Heart Disease
	Community Pharmacy
	Radiology
	U&I Screening
	Maternal Screening
	Podiatry
	Chronic Heart Disease
	Community Pharmacy
	Radiology



Floor plan of outpatients department in One Life Hartlepool



Floor plan of entire 1st Floor - One Life Hartlepool



One Life Hartlepool survey

Draft report
August 2012

Contents

1. Background.....	12
2. Methodology	12
3. Results	Error! Bookmark not defined.
3.1. How did you get to One Life Hartlepool?.....	13
3.2. How easy was it to get to One Life Hartlepool?	13
3.3. What service(s) have you used at One Life Hartlepool?.....	13
3.4. Overall, what do you think about One Life Hartlepool?	13
3.5. How would you rate your experience of visiting One Life Hartlepool?	13
3.6. Have your previous experiences of visiting One Life Hartlepool been similar?	13
3.7. In total, how many times have you visited One Life Hartlepool?	13
3.8. We would like to put more services into One Life Hartlepool in future, what advice would you give us to maintain or improve your experience?	13
3.9. Did you do anything else as part of your journey to One Life Hartlepool?.....	14
3.10. Have you got other comments or suggestions about One Life Hartlepool?	14
4. Conclusion	14
5. Recommendations.....	14
6. Appendix.....	16
6.1. How did you get to One Life Hartlepool today?.....	16
6.2. How easy was it to get to One Life Hartlepool today?	16
6.2.1. Please let us know if you have any further comments about getting to One Life Hartlepool	16
6.3. What service(s) have you used at One Life Hartlepool today?.....	17
6.4. Overall, what do you think about One Life Hartlepool?.....	19
6.5. How would you rate your experience of visiting One Life Hartlepool today?.....	21
6.6. Have your previous experiences of visiting One Life Hartlepool been similar to today?.....	21
6.7. In total, how many times have you visit One Life Hartlepool?	21
6.8. We would like to put more services into One Life Hartlepool in future, what advice would you give us to maintain or improve your experience?	21
6.9. Did you do anything else as part of your journey to One Life Hartlepool?.....	25
6.10. Have you got any other comments or suggestions about One Life Hartlepool ..	26

1. Background

One Life Hartlepool is part of the Momentum: Pathways to Healthcare programme and opened in May 2010. The programme aims to promote and achieve:

- Care closer to home;
- Services which are responsive to the needs of local community;
- Patient-centred services;
- Clinically-driven local NHS.

Some of the facilities available at One Life Hartlepool include a pharmacy, respiratory unit for chronic chest problems, three GP practices, and assessment area for back and leg problems, a podiatric unit, dedicated dental suites, an audiology clinic, walk-in centre, minor injuries unit, and a general clinic with day surgery facilities.

2. Methodology

Interviews were conducted during w/c 6 August 2012 at One Life Hartlepool as part of Life Store in a Box activity by NHS Tees staff.

The objective was to see how developing One Life Hartlepool as a new healthcare facility had made a difference to patients' experience of care.

The questions were designed to assist NHS Tees understand how patients use the venue and to see whether experiences can be improved in the future.

Questions included:

- How did you get to One Life Hartlepool today?
- How easy was it to get to One Life Hartlepool?
- What service(s) have you used at One Life Hartlepool today?
- Overall, what do you think about One Life Hartlepool?
- How would you rate your experience of visiting One Life Hartlepool?
- Have your previous experiences of visiting One Life Hartlepool been similar to today?
- In total, how many times have you visited One Life Hartlepool?
- We would like to put more services into One Life Hartlepool in future, what advice would you give us to maintain or improve your experience?
- Did you do anything else as part of your journey to One Life Hartlepool?
- Have you got any other comments or suggestions about One Life Hartlepool?

3. Summary

3.1. How did you get to One Life Hartlepool?

50% of the respondents travelled to One Life Hartlepool by car.

3.2. How easy was it to get to One Life Hartlepool?

90% of respondents stated that One Life Hartlepool is easy to get to. Respondents also commented that it was difficult to park and the inability to turn right from Park Road, which they felt caused problems.

3.3. What service(s) have you used at One Life Hartlepool?

55% of respondents used their GP Practice whilst at One Life Hartlepool. 26% of respondents used another service. The most popular alternative services used include family planning/sexual health followed by musculoskeletal.

3.4. Overall, what do you think about One Life Hartlepool?

36% of respondents felt that One Life Hartlepool is easy to use, 27% stated that is a nice building/venue, and 18% stated that it is easy to find where they need to be in the building.

3.5. How would you rate your experience of visiting One Life Hartlepool?

91% of respondents rated their experience of visiting One Life Hartlepool as good or above. This includes 43% of respondents who rated their experience as excellent.

3.6. Have your previous experiences of visiting One Life Hartlepool been similar?

76% of respondents felt that their previous experiences had been the same/very similar.

3.7. In total, how many times have you visited One Life Hartlepool?

47% of respondents had visited One Life Hartlepool more than four times. Only 6% of respondents said it was their first visit.

3.8. We would like to put more services into One Life Hartlepool in future, what advice would you give us to maintain or improve your experience?

The most common advice by respondents to maintain or improve experiences included:

- Everything has been fine/ok as it is;
- Improve parking;

- They would rather go to A&E/go to the hospital;
- Long waiting times.

3.9. Did you do anything else as part of your journey to One Life Hartlepool?

54% didn't do anything else as part of their journey to One Life Hartlepool. 32% of people went shopping as part of their journey.

3.10. Have you got other comments or suggestions about One Life Hartlepool?

The frequent comments and suggestions about One Life Hartlepool included:

- Feel satisfied/pleased;
- More parking;
- Prefer to use A&E/the hospital;
- Need to improve walk-in centre and urgent care.

4. Conclusion

A high proportion of respondents felt satisfied and pleased about the service they receive at One Life Hartlepool. Most notable, 91% of respondents rated their experiences of visiting One Life Hartlepool as good as above.

50% of respondents travel to One Life Hartlepool by car, and there was a high percentage stating that car parking was an issue.

Many people stated that they would rather go to A&E or the hospital. However, it should be noted that some of the negative comments around the urgent care/walk-in centre were because of what people had heard. Specific examples of comments include:

- "Not sure if using emergency would be happy because of bad publicity, need to promote themselves better and stop making mistakes. Feel much better going to A&E hospital."
- "Excellent, central, open. Heard bad comments about emergency so would use it."
- "Really concerned about urgent care not being able to deal with emergency and me being sent away. Many people have told me this has happened."

5. Recommendations

It is recommended that a review of parking arrangements at One Life Hartlepool is performed and also clarify what the current parking arrangements are. Recommendations from respondents for parking included:

- "Booking a disabled place in the car park."
- "Eden Street should having parking available for half an hour on the west side."

Additionally, the promotion of the services that are available at One Life Hartlepool should be undertaken along with some positive case studies (where available), in an attempt to overcome the negativity about the walk-in centre/urgent care.

6. Appendix

6.1. How did you get to One Life Hartlepool today?

Options	Nos	%
By car	160	50%
On foot	79	25%
By bus	51	16%
By taxi	22	7%
Another way	5	2%
TOTAL	317	100%

Another way

- Bike;
- Cycled;
- Dropped off;
- Mobility scooter;
- Motorcycle

6.2. How easy was it to get to One Life Hartlepool today?

Options	Nos	%
Very easy	172	55%
Quite easy	112	35%
Not very easy	16	5%
Very difficult	7	2%
Quite difficult	6	2%
Prefer not to say	4	1%
TOTAL	317	100%

6.2.1. Please let us know if you have any further comments about getting to One Life Hartlepool

- Bigger car park.
- Bit of a walk here from the bus stop.
- Bus stop around the corner.
- Can't turn right from Park Road.
- Car parking - lack of space/prices/personal mobility/shortage of time.
- Car parking needs to be improved.
- Crossings that need to use and multiple buses.
- Difficult from the town.
- Difficult if you do not have a car.
- Difficult to get parked. Can't turn right into here.
- Difficult when you are a bad walker.
- Don't have a bus service.
- Due to limited parking/disabled.
- Free parking.
- Had to park in shopping centre as there were no spaces in the disabled bays.
- Had to walk from the bus.
- Inability to turn right on road - traffic issues.

- It's central.
- Lack of parking spaces.
- Need to sort out the layout, car park and entrance.
- Need to use taxi's all the time.
- No free parking.
- No parking spaces available.
- No problem getting here.
- No right turn into building.
- One way only can cause problems.
- Parking a disgrace.
- Parking a nightmare and expensive.
- Parking can be an issue.
- Parking is rubbish and 70p is expensive.
- Parking is terrible.
- Parking is too busy.
- Parking not good.
- Parking not very good.
- Parking poor.
- Parking poor.
- Parking really bad, also entrance not good.
- Parking, everything is blocked up in terms of traffic.
- Personal reasons, suffer from acrophobia.
- Quite easy when the bus is on time.
- Road layout not good, have to double back.
- Road so busy, not very safe.
- Roads leading into hospital dangerous.
- Traffic lights cause problems/roundabouts from York Road.
- Traffic problems.
- Usually ok but trouble with bus as traffic is bad at Oxford Road due to road works.

6.3. What service(s) have you used at One Life Hartlepool today?

Options	Nos	%
GP Practice	174	55%
Another service, please state	84	26%
Walk-in Centre	28	9%
X-Ray/Ultrasound	19	6%
Minor Injuries Unit (MIU)	12	4%
TOTAL	317	100%

Other comments include:

- Also Walk-in Centre.
- Appointment cancelled.
- Audiology.
- Audiology.
- Blood pressure taken.
- Boots.
- Came with a friend.
- Came with a friend.

- Came with my mum.
- Came with my son.
- Came with my son.
- Came with my wife.
- CCG Meeting.
- Chemist.
- Chemist.
- Clinic.
- Diabetes.
- Diabetes.
- Diabetic check.
- Diabetic clinic.
- Diabetics.
- Ears.
- Family Planning Clinic.
- Family Planning.
- Family planning.
- Family Planning.
- Feet.
- Foot doctor.
- Hearing department.
- Hearing.
- Help desk.
- Made appointment.
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal (came with my daughter).
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal.
- Musculoskeletal.
- Nurse.
- Nurse.
- Podiatry.
- Podiatry.
- Podiatry.
- Podiatry.
- Podiatry.
- Physio.
- Physio.
- Podiatry and musculoskeletal.
- Podiatry.
- Podiatry.
- Podiatry.
- Pregnancy test.

- Prescription/hearing batteries renewal.
- Prescription.
- Prescription.
- Prescription.
- Prescription.
- Prescription.
- Prescription.
- Respiratory clinic long way to walk from car park.
- Respiratory clinic long way to walk from car park.
- Retinal.
- Sexual Health Clinic.
- Sexual Health Teesside.
- Sexual health.
- Sexual Health.
- Sexual Health.
- Sexual health.
- Sexual health.
- Sexual Health.
- Sexual health.
- Sexual health.
- Speech therapy.
- Speech therapy.
- Warfarin.
- With Mum.
- Work in respiratory service.

6.4. Overall, what do you think about One Life Hartlepool (multiple choice)?

Options	Nos	%
It is easy to use	229	36%
It is a nice building/venue	175	27%
It is easy to find where I need to be in the building	115	18%
Other, please state	55	9%
I would like to be able to use more services here	30	5%
I would prefer to be seen somewhere else	15	2%
It is difficult to use	7	1%
It is difficult to find where I need to be in the building	6	1%
I don't like the building/venue	5	1%
TOTAL	637	100%

Other comments include:

- 5 week wait, very hard to get appointments.
- Access really bad for drivers and pedestrians.
- Air-con issues as it's too warm.
- Appointment system.
- Bit too bright and open.
- Brilliant.
- Brilliant, nice atmosphere.
- Clean and tidy.

- Confusing as to what services offered here out of hours.
- Could be better. Daughter had to go to North Tees, why not Hartlepool?
- Difficult to get pre-booked appointment.
- Do not like it - like Victoria Road.
- Do not like it.
- Do not like it.
- Doctors good. Urgent Care not good.
- Don't like distances between facilities.
- Don't like it.
- Don't like Walk-in Centre.
- Everything under one roof.
- Expensive car parking.
- Fantastic idea. Appointment system hard.
- Few more doctors.
- Filthy outside.
- I do not like the Urgent Care Centre, prefer the Hospital.
- It's brilliant.
- It's good.
- It's ok, just a surgery.
- It's the first time I've been
- Layout is wrong. Disability access lacking.
- Layout is wrong. Disability access lacking.
- Makes you wait too long.
- Mixture of all sorts - not in the right place. Access is rubbish.
- Nice and clean.
- Nice that there is one but not much experience yet.
- Not as good as A & E at the hospital, but good enough.
- Not necessary, Victoria Road was good.
- Not signposted enough.
- Nothing wrong.
- Nurse very nice (Bank House Surgery).
- People in the building.
- Pharmacy close to doctors.
- Prefer A & E (hospital).
- Prefer A & E.
- Prefer the 'old way'.
- Prefer Victoria Road.
- Prefer Victoria Road.
- Rubbish - people have been sent away.
- Rubbish.
- Rubbish.
- See comments below.
- Should be more car parking spaces.
- The respiratory service has no windows.
- Upstairs it's too hot.
- Very pleasant.
- Vision not very good so find it difficult to access services without help.
- Waiting time is too long.

- Walk-in Centre difficult to use.
- Wonderful.

6.5. How would you rate your experience of visiting One Life Hartlepool today?

Options	Nos	%
Excellent	136	43%
Good	85	27%
Very good	68	21%
Fair	13	4%
Poor	9	3%
Prefer not to say	6	2%
TOTAL	317	100%

6.6. Have your previous experiences of visiting One Life Hartlepool been similar to today?

Options	Nos	%
Yes, the same/very similar	252	79%
This is my first visit	18	6%
They have been much worse	16	5%
They have been a bit better	12	4%
They have been much better	12	4%
They have not been as good	7	2%
TOTAL	317	100%

6.7. In total, how many times have you visit One Life Hartlepool?

Options	Nos	%
More than 10 times	149	47%
3-4 times	53	17%
5-6 times	40	13%
Twice	28	9%
6-10 times	27	9%
This is my first visit	20	6%
TOTAL	317	100%

6.8. We would like to put more services into One Life Hartlepool in future, what advice would you give us to maintain or improve your experience?

- A & E Service.
- A & E should be capable of dealing with issues.
- Able to get appointments as soon as possible. Shorter waiting times.
- Access availability needs to be clearly explained.
- All services we've been to are very good.
- Alright as is.

- Better appointment system.
- Better Audiology department. C a drop in system not appointments.
- Better car parking facilities.
- Better car parking.
- Better car parking.
- Better care in Urgent Care Centre and free parking.
- Better parking if moving other services here.
- Better website.
- Bigger car park, amenities, cafe.
- Booking a disabled place in the car park.
- Bring A & E back, knew that you could be treated there.
- Building and service is pretty good. Fantastic that everything is under one roof.
- Cafe area/coffee shop.
- Cafe facilities.
- Can't get into doctors until 8.30am and there isn't enough seating.
- Car parking an issue.
- Car parking.
- Car parking.
- Carry on as normal.
- Change traffic light system and need arrow to turn right safely.
- Chemist doesn't have medication needed.
- Close this down put money back into the hospital.
- Coffee shop would be good.
- Cup of tea.
- Customer service skills training for Receptionists (attitude not always good).
- Dental services, sedation like Billingham.
- Dental services.
- Depends what you're coming for. Upstairs notices need to improve for where to go.
- Do not give patient doctors number to ring - small children hanging around in early hours.
- Doctors to listen more and not miss diagnosing patients.
- Doesn't need improving. Waiting times need to be quicker.
- Don't know.
- Don't put anymore services into here.
- Don't take services away from Hartlepool General.
- Don't think you can, you do a good job.
- Drop-in chiropody.
- Easier booking system to make an appointment.
- Easier to get here than hospital. Many services no longer at the hospital.
- Everything has been fine.
- Everything is ok, haven't had any problems.
- Everything is ok.
- Everything is ok.
- Everything is ok/very good. Coffee machine.
- Everything ok as it is.

- Everything still new.
- Everything to be back at hospital as it is more accessible.
- Exercising room.
- Exit out not very good, traffic light systems not right.
- Faster Chemist system.
- Fine as it is.
- Found it quite easy.
- Free parking.
- Free parking/free coffee/free biscuits.
- Get looked after well.
- Get more in here instead of services being dotted about.
- Get rid of it.
- Get services in as quickly as possible at it might stop people worrying about losing the hospital.
- Happy to go to my GP.
- If services from the hospital do not agree with it, keep hospital open.
- Improve car park.
- Improve Walk-in Centre, waiting times, treatments (have to go to North Tees) easier when we had Hartlepool A & E.
- Improving waiting times. Additional staff required in Walk-in Centre.
- In A & E should have facilities to treat people e.g. asthma attacks. Help people straight away.
- In doctors a quicker service.
- Issues with going to North Tees instead of using A & E at hospital. Expense of getting to visit relative.
- It's handy having it in the town.
- It's ok as it is.
- It's ok as it is.
- It's ok.
- Just don't like the place.
- Keep as you are.
- Keep doing the same.
- Keep doing what you are doing.
- Keep it as it is.
- Keep it as it is.
- Keep it as it is.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep it the same.
- Keep the Hospital open.
- Keep up the good work.
- Keep up the good work.
- Keep up what you're doing. Want more services here.
- Leave in hospital.
- Leave services at hospital.

- Let the general public know about services still in hospital and in here.
- Like to see the hospital back.
- Long time waiting. More staff required.
- Maintain. Coffee shop and car park needs to be bigger.
- Make it bigger like the hospital.
- MIS - nose bleed and couldn't do anything. No hospital A & E.
- More car parking, better access and better appointment system.
- More clarity on which service that you should use. More so since A & E closed.
- More parking spaces.
- More parking. Can't turn right from Park Road, traffic is a problem.
- More services should be here. good location and new build. Congestion can be bad for urgent care.
- More staff as waiting times are ridiculous.
- More staff in the Walk-in Centre.
- Move emergency centre back to the hospital.
- Move it to a more accessible place with parking!
- Need more staff. Waiting times are too long. Better appointment system.
- Need the A & E back where you know you would get seen.
- Needed x-ray department, now installed.
- New staff. Don't get notice when appointments are cancelled/moved. Appointment but no time available.
- No children ward here.
- No improvement.
- No more services needed.
- No more, leave them in the hospital.
- No, leave it as it is, keep hospital open.
- None - am satisfied.
- None.
- Not fully aware of what other services are on offer.
- Not very happy with MIU. Waiting time seemed to be better at the hospital A & E.
- Nothing.
- Nothing.
- Open the hospital again. Phone issues when cancelling, can't get through.
- Opposed to transferring services here from hospital.
- Ophthalmic Optician.
- Optician.
- Optician.
- Parking - more spaces needed and free parking.
- Parking (need change, needs to be prepared).
- Parking and walking if people have difficulties.
- Parking facilities and improve disabled parking.
- Parking is already really bad. If more services were here, it would make it even worse.
- Parking is difficult.
- Parking needs to be improved.

- Parking.
- Parking.
- Podiatry is rubbish.
- Physios would be a good idea.
- Pretty good anyway.
- Question 6 - excellent for the main part, poor for the walk-in centre. A & E in hospital.
- Quicker/better service.
- Quite happy with services.
- Quite helpful.
- Quite satisfied.
- Rather go to the hospital.
- Reduce the waiting time.
- Refreshments, e.g. water coolers.
- Safe, being easy to talk to.
- Satisfied with services.
- See people quicker.
- Services have been there that I've needed.
- Shops.
- Shorter waiting time, more experienced staff.
- Some services would be handy here. Parking in Hartlepool Hospitals is very expensive.
- Sufficient services.
- Surgeries open on Saturday and longer opening hours.
- They've got enough in there. Parking an issue.
- Think its ok.
- To find places in building needs to be permanent member of staff.
- To get into appointments on time.
- To get referred here and not somewhere else.
- Wait times for emergency needs to be improved.
- Waiting times to be improved.
- Walk-in Centre needs doctors, not just nurses, especially on an evening.
- Want to keep hospital open and not move services here.
- Was informed that the Urgent Care Centre had no trained doctors.
- Where is there room for new services?
- Why can't we use podiatry here in OLH - have to go to Stockton.
- Would like to see heart scans.
- You seem to know what you are doing.

6.9. Did you do anything else as part of your journey to One Life Hartlepool?

Options	Nos	%
No	169	54%
Shopping	101	32%
Something else, please state	19	6%
Visited friends/family	17	5%

Used another health service	5	3%
TOTAL	311	100%

Something else:

- Back to work.
- Changing marital name.
- College.
- College.
- Dentist.
- Going for a meal.
- Had my lunch.
- Library.
- Pick up prescription.
- Prescription.
- Prescription.
- Something to eat.
- Sort rent out.
- Visited Job Centre.
- With partner to doctors at Hart Lodge.
- Work.
- Work.
- Work.

6.10. Have you got any other comments or suggestions about One Life Hartlepool

- A long wait for appointment - had to queue for an appointment.
- Air conditioning needed. Kids play area in waiting room.
- All fine.
- All of the staff are nice and you are treat well.
- Appointment system for booking needs to be improved.
- Appointment system needs to be looked at, Car parking facility very poor.
- Appointment system not good.
- Bad experience in Urgent Care Centre told to go away - said go to GP.
- Bankhouse Surgery first class service.
- Better appointment system. Urgent Care Centre not good - prefer the hospital.
- Bit more information on the website about the services.
- Brilliant.
- Bring A & E and other services back to general. People do not always have transport to get to North Tees or South Tees. Wynyard not a good location and only major road to get there.
- Car parking spaces limited. Would rather visit hospital which is just round the corner from where I live.
- Car parking spaces.
- Car parking, there's not enough. Can't turn right, 4 way lights.
- Close it. Open the hospital back up.

- Confusing still about which bit to go to for emergency/walk-in.
- Cost of parking is very expensive. The litter is also an issue.
- Didn't like it when it first opened, but opinion changed because of services. Hates decor.
- Difficult parking - disabled bays limited.
- Do not rate the Urgent Care Centre. Turned away, could not help. Not long before there will be a serious incident/death because of it.
- Drs part is really good. Parking is bad. Don't like emergency part at One Life.
- Easy to find, great service, helpful staff.
- Eden Street should have parking available for half an hour on the west side.
- Equal treatment for all. Down to earth staff needed. When came to Urgent Care they have not been able to deal with the problem and have sent me to the hospital.
- Everything fine - no complaints.
- Everything fine.
- Everything marvellous - spot on.
- Everything seems ok - compact.
- Everything seems ok/fine.
- Every time I come here, they send me somewhere else.
- Excellent GP - Havelock Surgery. New building at One Life, good for staff but care just as good as old building.
- Excellent service.
- Excellent, central, open. Heard bad comments about emergency so wouldn't use it.
- Excellent.
- Experiences really good.
- Feels homely/welcoming - good place.
- Find it excellent for me.
- For A & E over at the general hospital to open up again.
- Free parking.
- Free parking/more parking.
- Friendly staff.
- Happy with it.
- Happy with it.
- Happy with One Life.
- Happy with the service.
- Hartlepool One Life is part of the right way forward for NHS provision.
- Have a self-referral service.
- Have another pharmacy instead of just Boots.
- Have to phone Stockton for an appointment for Chiropody at Hartlepool - why?
- Haven't had any problems but the parking is terrible.
- Hospital better, long waiting times.
- How much do the GP's pay to rent the spaces here?
- I find everything fine in my experience.
- I prefer the hospital.
- I think the doctors need to listen more, sometimes patients have history of medical problems and that is not taken into consideration at times.

- I'm satisfied.
- Improving the emergency side.
- Improving the Urgent Care Centre. If haven't got an A & E then we need to do something.
- It was built in the wrong location. Bring back A & E. Traffic is a major problem.
- It will never replace the A & E.
- It's a decent place.
- It's a good centre, happy with it.
- It's alright.
- It's been fine for me.
- Its better doctors.
- It's doing a good job. We've always been satisfied.
- It's fine for everything I've wanted.
- It's good as it is.
- It's good.
- It's good.
- It's great, fit for purpose. As times goes on I think it will be accepted by the town's people.
- It's ok.
- It's ok/good.
- I've had no problems, it's nice.
- Keep our own hospital - not fair that people have to travel to other hospitals (costly).
- Keep up the good work.
- Like it as it is so close.
- Like it but wish the A & E (hospital) hadn't closed. Good idea to have A & E.
- Limited time with the doctor. Find it very good/had no trouble yet.
- Lovely place got everything you need. Clean atmosphere. Centre of town.
- MIU - ok but outside political issue is a different ball game. By bringing services together don't have the car parking. Should have A & E. Not better than the hospital and never will be.
- Mixed feelings. Waiting times can be too long.
- Money wasted here, should have been used to save our hospital.
- More car parking spaces.
- More disabled parking bays and more parking bays generally.
- More parking and free parking. Feel we have been mis-lead as when we told the GP was moving, he said that there would be ample parking. Seriously thinking about moving GP practice because of it.
- More shops/cafe/place for the children to go.
- More than satisfied with what I've seen. Waiting rooms are really nice, better than we've had before.
- Music, magazines needed more friendly approach.
- Need hospital back running again.
- Nice place.
- No faith or trust in place. Granddaughter came with chest pains, no facility to check them here, sent to North Tees.
- No, carry on as you are.
- No, could not care less about the place.
- No, could not care less about the place.
- No, just keep up the good work.

- No.
- Nobody wanted it in the first place, the hospital is closer.
- None.
- Not enough car parking for disabled. A lot of walking is required and husband has problems walking.
- Not enough car parking spaces.
- Not enough parking.
- Not happy with the length of time you have to wait.
- Not sure if using emergency would be happy, because of bad publicity need to promote themselves and stop making mistakes. Feel much better going to A & E Hospital
- Not sure what services are in here and what services remain in the hospital. Bad experience with Audiology.
- Nothing wrong with it.
- OK for minor injuries, but should have hospital with A & E.
- Only the parking. Excellent that Chemist on site.
- Parking a nightmare.
- Parking better here than at the hospital as have a blue badge.
- Parking is an issue but got no criticism.
- Parking is an issue.
- Parking is an issue.
- Parking needs improving.
- Parking needs improving.
- Parking not very good. Brought granddaughter late one night - no space available. Granddaughter had to wait on own in dark while I found somewhere else to park.
- Parking spaces limited.
- Parking spaces limited.
- Perfectly satisfied.
- Poor parking, not enough spaces especially for disabled people. Good x-ray department.
- Potential parking issues.
- Prefer the general hospital, should improve it. Do not have to pay using blue badge here but do elsewhere.
- Prefer the hospital - why should people (especially children) have to travel to North Tees.
- Prefer the hospital.
- Preferred where the GP (Victoria Road Centre) used to be.
- Prescription not ready when stated. Car parking limited.
- Quality.
- Quite happy with experience.
- Quite happy.
- Quite like it, it's ok.
- Quite pleased.
- Quite satisfied, pleasant surroundings.
- Really concerned about urgent care not being able to deal with an emergency and me being sent away. Many people have told me this has happened.
- Really good with elderly mother when she needed an x-ray. Staff are brilliant. It's a lovely centre.

- Really good.
- Really like it.
- Reception staff are pleasant in the doctors side.
- Reduce waiting time.
- Respiratory clinic needs to be improved. Signage. Think it's brilliant.
- Response time is poor e.g. x-ray results took 3 weeks. Pretty ok.
- Rubbish (Urgent Care Centre). Doctors really good.
- Rubbish outside is awful.
- Saying that nothing wrong but later found out there was.
- See comment above, people are worried about losing the hospital.
- Service is first class, very quick.
- Service is good.
- Service is good. Ridiculous that the hospital is being closed.
- Services from hospital here instead of out of town.
- Should have an open day and take people round so they know what's there.
- Should have built it somewhere else.
- Should never have been built. Not easy to get to. Even people who work here agree with me and it's not easy to park.
- Should never have been built.
- Something I just don't like about it - put a bomb under it.
- Spent ages on phone to get an appointment, but then they said there was not any.
- Staff are fantastic, great with children.
- Staff very helpful and pleasant.
- Staff very lackadaisical. Waiting in urgent care too long and sometimes no other people being seen or waiting.
- The £20m that has been spent on this could have been spent on the hospital. Have the space to upgrade it. Cost of artwork is unknown and probably expensive.
- The mess outside.
- The waiting times could do with being shorter.
- There needs to be more parking spaces.
- Thought One Life Hartlepool was the Urgent Care side, not GP side.
- Time to see doctor (10 minutes) is not enough.
- To make it more knowledgeable that you can get hearing aid batteries from information desk on ground floor.
- Urgent Care Centre should not have been built, should have kept A & E at hospital.
- Very good, everything in the same building, not doctors in one place and other staff elsewhere.
- Very good.
- Very happy with services.
- Waiting time. Some of the staff's attitude.
- Walk-in Centre is a shambles. Seen the doctor 4 times (only used for emergency) for walk-in.
- We are ok, but if there's anything serious we are not sure what would happen.

- We should still have the A & E. More experienced doctors.
- Why waste money on this and new hospital when have a perfectly good hospital in Hartlepool?
- Wish you would leave the hospital alone. Prefer Hartlepool Hospital over the others in the area.
- Would prefer A & E in hospital. Not clear which part of building.
- Would prefer Consultant to have clinic here rather than in hospital.
- Would prefer to be seen at local hospital.
- X-rays longer service and available at weekends.

ITEM 4**TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE**5th November, 2012**PRESENT:-****Representing Darlington Borough Council:**

Councillors Newall (in the Chair) and J. Taylor.

Representing Hartlepool Borough Council:

Councillors Fisher and Hall.

Representing Redcar and Cleveland Borough Council:

Councillors Carling, Goddard (as Substitute for Councillor Mrs Wall) and Kay.

Representing Stockton-On-Tees Borough Council:

Councillors Cunningham (as substitute for Councillor Wilburn), Javed and Mrs M. Womphrey.

APOLOGIES – Councillor H. Scott (Darlington Borough Council), Councillor S. Akers - Belcher (Hartlepool Borough Council), Councillor Dryden (Middlesbrough Council), Mrs Wall (Redcar and Cleveland Borough Council) and Councillor Wilburn (Stockton-On-Tees Borough Council).

OFFICERS IN ATTENDANCE – A. Metcalfe (Darlington Borough Council), L. Stones (Hartlepool Borough Council), M. Ameen (Redcar and Cleveland Council) and P. Mennear (Stockton-On-Tees Borough Council).

EXTERNAL REPRESENTATIVES –

Miriam Davidson, Director of Public Health for Darlington;
Edward Kunonga, Director of Public Health for Middlesbrough; and
Louise Wallace, Director of Public Health for Hartlepool.

Due to there not being a representative present from each of the Tees Valley Local Authorities, the meeting was inquorate and an informal meeting was held.

20. DECLARATIONS OF INTEREST – There were no declarations of interest reported at the meeting.

21. NOTES – Submitted – The Notes (previously circulated) of the informal meeting of the Tees Valley Health Scrutiny Joint Committee held on 8th October 2012.

AGREED – That the Notes be approved as a correct record.

22. DIRECTORS OF PUBLIC HEALTH FROM ACROSS THE TEES VALLEY - The Directors of Public Health from across the Tees Valley submitted information (previously circulated) in respect of Public Health Transition Self-Assessment Documents, Health and Well Being Strategies and Annual Reports. Three Directors of Public Health from Darlington, Hartlepool and Middlesbrough attended the meeting and

provided Members with assurance of the Public Health Transition period, an update on the respective Health and Well Being Strategies and Annual Reports.

Miriam Davidson, Director of Public Health for Darlington reported that the Darlington Transitional Plan details the intention to work collaboratively across the Local Authority and describes the process of moving responsibilities and staff into the Local Authority and includes indicators monitoring the progression of change. The self-assessment document is based on the Local Government Authority model and is also being led by them. It was acknowledged that the biggest challenge was that there are still some uncertainties such as public health grant, HR guidance and staff accommodation. Other challenges include compatibility of IT systems, sharing data and ensuring the Caldecott principles are adhered too. Ms Davidson advised that she was confident that the partnerships arrangements in place and work streams described within the self-assessment would ensure smooth transitional arrangements.

Louise Wallace, Director of Public Health for Hartlepool acknowledged that it will be helpful for public health teams to sit within the Local Authority and commented that it was nothing new as Local Authorities and NHS colleagues have been working together for a number of years, although, by public health coming into the Local Authority this would enable relationships to strengthen and build upon a strong foundation. Ms Wallace reported that the Directors are committed to commissioning across the Tees Valley and have taken a pragmatic approach to considering what could be commissioned jointly. For example, there is a Tees Valley shared public health service which should be cost effective and hosted by Redcar and Cleveland.

Edward Kunonga, Director of Public Health for Middlesbrough added that there has been lots of shared transactional work and that the move into the Local Authority should be seen as an opportunity to work closer with departments such as children, housing and adult social care, in order to influence the wider determinates of health.

Understanding the relationship between the Local Authority and the Clinical Commissioning Groups (CCG) and the process they are undertaking is key for public health teams together with quality improvements, maintaining safe services, prevention and other commissioning relationships with the NHS Commissioning Board. There needs to be a strong relationship with the Health and Well Being Boards and strong networks to share the responsibility for commissioning services.

Raising the profile of health inequalities would be more easily achieved through public health becoming into the Local Authority it will enable focus to be around basic human needs. Support from Councillors will be welcomed, together with the services required to support those needs and reduce the gap in health inequality. Mr Kunonga reported that the change presented a number of opportunities and welcomed the Health and Well Being Board as a formal forum to bring the right people together in one place. He believed that there was greater influence by working together to tackle health inequalities and look to building and local system and develop crucial relationships to achieve the same goal.

Members expressed concerns about the limited funding available, expressing that funds were not going to be increased. Ms Wallace advised that the research and evidence

will be crucial to ascertain how funding will be spent. Directors must ensure that there is a sound evidence base to prepare a case for the Local Authority to decide what to spend the ring fenced budget on. Directors are keen to take a systematic approach to invest in a whole system project to address a multitude of needs for example, fuel poverty. Developing emerging Health and Well Being Strategies will detail what can be delivered under the current constraints and the Joint Strategic Needs Assessment will be key to all of this. Mr Kunonga expressed his gratitude to Members for responding to the consultation in respect of the formula used for the public health funding.

Particular reference was made to the take up of the whooping cough vaccination and whether there has been a decline in recent years. Ms Davidson reported that she had not seen any evidence to suggest that there was community resistance to immunisations for whooping cough specifically. She added that it was crucial that such schemes including immunisations and vaccinations continue through the transition together with emergency planning and infection control initiatives. She stressed it is imperative to continue to make progress against the National and North East averages as rates vary across the Tees Valley. Mr Kunonga echoed the sentiments suggesting that it is the people that need the immunisations the most who don't take them up, further advised the work must continue to increase uptake and for uptake to be focused around engagement programme and not an attempt to allay myths.

It was noted that individual Health and Well Being Strategies are at different stages but all will be in place by the 2013 deadline. Ms Wallace updated the meeting on emergency planning procedures in place advising that as Category one responders the NHS would continue to respond until public health has completely transferred to the Local Authority and provide resilience assurance. Ms Wallace reported that Local Health Resilience Partnerships (LHRP) have been established as she was Co-chair of the Group, alongside Cameron Ward in his position as Director of Local Area Team (LAT). The LAT covers Durham, Darlington and Tees Valley and the LHRP brings all the right partners together to establish a firm emergency response plan.

Ms Davidson introduced the final Joint Annual Report of the Directors of Public Health for County Durham and Darlington 'Back to the Future'. Members were intrigued about the comparisons made when public health was previously a Local Authority responsibility and were pleased that report looks forward identifying the further work needed to continue to improve the health and wellbeing of people in Darlington. It was noted that the final NHS Tees Joint Directors of Public Health Annual Report would be produced towards the end of March 2013 and be shared with Members in due course.

Councillor Newall added that Darlington Borough Council were making public health training mandatory for all Members of Council to ensure that all Members understand and are aware of the public health issues that need to be addressed.

AGREED – (a) That the Directors of Public Health be thanked for their attendance at the meeting;

(b) That the update and discussion be noted; and

(c) That Members give some thought to how the Joint Committee might want to scrutinise Directors of Public Health in the future and feedback their thoughts via individual Scrutiny Officers.