Cumbria Joint Health Scrutiny

There are some fundamental problems which face the future of the body known as the Cumbria Joint Health Scrutiny committee. When I was appointed as SLDC’s representative to that committee some years ago it was assumed it would be concerned with the public health of the whole of Cumbria, but not further. It has become increasingly obvious that this does not conform to the reality of the situation. There are fundamental differences between North and South Cumbria. The North, West and East have connections with facilities and strategies associated with Newcastle University Hospitals and the North East whilst South Cumbria is closely linked to the University Hospitals of Morecambe Bay, and its interests extend into Lancashire.

For SLDC, therefore, our focus is increasingly on this southern area. The good news is the success of the Better Care Together programme, which has been awarded Vanguard status and a substantial amount of money. This has, up to now, been concentrated entirely on urban areas. Our representations have led to a regular update on progress and a realisation by the leaders of the team that so far they have virtually ignored the rural areas so a more pro-active policy is required. We have highlighted the current pressures faced by rural GPs and pharmacies. We have been promised that policies will change and that money and modern technology will be used to improve access to consultants for those living in rural areas. It also makes sense for some of the services which have been cut in recent years to be returned to rural health centres. Minor surgery is a good example of this.

One aspect affecting the division into North Cumbria and a South Cumbria associated with Lancashire is that the responsibility for mental health was regarded as a purely Cumbrian matter and administered through the Cumbrian Partnership Trust which is based largely in North Cumbria. However in early 2018 the Morecambe Bay CCG advised that from April 2019 all services in South Cumbria currently delivered by the Cumbrian Partnership Trust would be transferred to Lancashire Care Foundation Trust’s integrated health and care system. A significant amount of work has already been done to develop proposals which promise to transform the delivery of mental health provision in the south, including for young people.

A consultation and engagement plan for the whole of Cumbria is being developed and the committee was assured that it would be informed of any developments on both the potential merger of trusts in the north and the future of mental health services in both north and south.

The two recent meetings of the Cumbria Health Scrutiny committee were in fact joint meetings with Lancashire County Council. The first was on September 28th; it began with a discussion of the terms of reference for the committee, followed by an update from the Better Care Together group and led to decisions about the work programme for the committee. On 8th October the Director of Public Health Cumbria County council outlined the council’s Joint Health and Well being strategy for members to comment.

The committee received other updates including the proposal to transfer the DEXA (bone density) scanner from Royal Lancaster infirmary to Westmorland General hospital.

Financial cuts, increased demands and problems with recruitment have created problems but a great deal of hard work has been done, particularly by the clinicians, in attempting to ensure that the public health of our communities will be secured for the future.

Vivienne Rees, October 2018