

Health and Social Care Scrutiny Sub-Committee

Meeting held on Tuesday 26 September 2017 at 6.30pm
in the Council Chamber, The Town Hall, Katharine Street, Croydon CR0 1NX

MINUTES - PART A

Present: Councillor Carole Bonner (Chair)
Councillor Andy Stranack (Vice Chairman)
Councillors Sean Fitzsimons, Andrew Pelling and Margaret Mead

Dr Agnelo Fernandes, Mike Sexton, Stephen Warren
(Clinical Commissioning Group)

A47/17 Apologies for absence

Apologies were given by Non-voting Co-opted HealthWatch Croydon
Member: Gary Hickey

A48/17 Minutes of the meeting held on 18 July 2017

The minutes were approved by the Sub-Committee as an accurate
account of the meeting.

The Chair requested the information on how Outcome Based
Commissioning (OBC) for over 65's would be financed as stated in
A46/17 of the meeting minutes.

Matters Arising :Ofsted – Inspection of services for children in need of services and protection, children looked after and care leavers

The Chair Acknowledged the recent Ofsted report and stated that the
focus was now on lessons learned, with emphasis on strengthened
challenge through scrutiny work

A49/17 Disclosure of Interest

There was none.

A50/17 Urgent Business

There was none.

A51/17 Exempt items

There was none.

A52/17 Croydon CCG Priorities and Commissioning Intentions 2018/19

The following officers were in attendance for this item:

- Dr Agnelo Fernandes, Assistant Clinical Chair and Clinical Lead for urgent care
- Mike Sexton, Chief Financial Officer
- Stephen Warren, Director of Commissioning

Members were given a presentation on the overview of priorities and intentions for the next year with emphasis on strategic intervention on commissioning contracts, working in partnership, service transformation and accountable care provision to ensure a sustainable future.

Officers advised that the priorities were set under the NHS recommended guidance of 2 year planning contract with further direction on this to emerge in the next few months as a more detailed operative plan is formulated.

The officers stated that different processes had fed into this plan following engagement and 'big ideas event' in collaboration with the public. These were realised through different mediums of elected and outreach activities, engagement with different steering groups.

Officers advised that they looked at the infrastructure to support these programmes, worked with the public to look at best practice with joined up services centred on the needs of the individual.

The presentation also gave an overview of the financial context of intentions which included the following:

- 1- To deliver savings of £45-50m over 2 years (10%)
- 2- £21.2m savings identified so far
- 3- Key Risks: £8.1m in unidentified savings
- 4- The CCG is required to break even by 2018/19

Officers advised that as part of the challenge to break even they will seek to address long term programmes around Mental Health and Out of Hospital Care. They stressed that whilst attainment of targets were significant challenges, they were on track to deliver £21m through rebalance into primary care, community services and transformation of engineering systems.

The presentation included a summary of strategic approach and financial recovery in areas such as:

- 1- Joint workshops with commissioning teams around specific areas and the improvements to be made in approaching commissioning opportunities.
- 2- Dedicated team to work with GP's in addressing variation in practices
- 3- Decommissioned Croydon Referral Support Services (CReSS) which has led to a shift with GP's now retaining their own referral system through a strong and appropriate referral process.
- 4- Working collaboratively with South West London Partners.

Officers advised that the transformation of the services was based on the recommendation of the Mckinsey report which was commissioned by NHS England and NHS Improvement in May 2016. The report recommended integration of services following a whole system review of all Health and Social care commissioning and providers in Croydon.

There has been changes made in areas such as:

- 1- Guidance to nurses and parents before resorting to prescription of medicines.
- 2- Closure of Foxley Lane – which is now closed.
- 3-IVF waiting list- now frozen with no further acceptance to the list.

There are further planned savings for medicine and decommissioning in the following areas:

- 1- Infant Formula
- 2- Vitamin D
- 3- Gluten Free
- 4- Self Care

Officers stated that no complaints had been received following the changes and stressed that the changes made in the past financial year contributed to the savings being made this year.

Officers responded to members' comments on the progress by pooling of budgets as a result of integration of services adopted by other Local Authorities by advising that pool budgets were available for a number of schemes under the Best Care Funds, although Mental Health was not currently under that umbrella.

Members made reference to increase in community provision through the voluntary sector but queried whether there was an intent to withdraw funding from Mental Health Projects. Officers indicated that the focus was to readdress the balance of provision of services through retaining some voluntary sector funded services.

Members requested specific areas of funding reduction to be highlighted to which officers responded that last year there had been many alternatives discussed but the focus was now on transformation.

The Committee members sought clarification on identified and unidentified savings. Officers explained that there was some slippage on 2017/18 savings and that the shortfall this year would increase

accumulative deficit as the gap in efficiencies is currently at 12m. The challenge was to accelerate saving, unfortunately no concrete proposals were provided. Management consultants have been appointed to identify budget reductions and plan for future years.

The presentation highlighted the recommendations of integration and transformation of services made by the McKinsey report which was commissioned by NHS England and NHS Improvement which was a whole system review of Health and Social Care commissioners and providers across Croydon. Officers explained that as a result of the recommendations made, the CCG had been looking at what else could be done aside from decommissioning as this would have serious effect on services. The decision was to transform both the Health and Social care economy.

To achieve this, key issues would be addressed through a planned care vision by:

- 1- Reduction in emergency admissions with a change of focus from hospital care to advice and guidance, and outpatient care where appropriate.
- 2- Consistent care pathways with a 'holistic' non-medical approach to care.
- 3- Addressing issues of inequality of the North-South divide
- 4- New delivery model for Out of Hospital care through a focus on self-care, lifestyle management and behavioural change.

Members asserted that the McKinsey report identified a lack of long term vision and questioned how this will be improved. Officers responded that the trajectory for Croydon was to develop an accountable care system to include all providers.

This would be realised through:

- 1- Personal Independence Coordinators currently provide streamlined services for over 65s, vision is to develop and provide the same services for the wider population.
- 2- Delivery groups to improve consistency in improvement in all practices.
- 3- The roll out of Huddles – Weekly clinics.
- 4- Peer review and learning for processes to be shared among practices- This has reduced referral rates.

Members expressed concerns that the CCG had been in special measures since 2016, did not reduce the deficit last year and doubted that objectives would be met this year, but acknowledged that Croydon were not alone in this position. Assurance was sought on how the CCG would rebuild confidence in its financial stability. Officers responded that NHS England has made changes to the CCG's leadership with an expectation for the new team to deliver efficiencies. Croydon is part of the South West London Sustainability and Transformation Plan (STP), was working across different strategic areas and is advanced in outcome

based commissioning compared to other boroughs. Detailed successes of this programme would be available in months to come.

Officers were questioned on how Croydon would benefit from sharing leadership with another Local Authority. Officers stated that this had been looked at in the context of other Local Authorities who share leadership on a 20% basis whilst Croydon does on a 50% basis.

In response to members query on what had been done to engage front line staff and if they had the right staff in place to adapt to the new ways of working, officers stated that some engagement work had been done but further work needed to be done on wider engagement and developing a systematic model. It was also noted that Croydon had to work hard to attract social care staff to the borough.

Officers were thanked for their answers to member's questions.

RESOLVED that officers to provide an update for the March meeting on operating plan outcomes and dashboard following recommendations from the McKinsey report.

A53/17 Establishing Joint Health Overview Scrutiny Committee (JHOSC)

Councillor Carole Bonner and Councillor Andy Stranack were unanimously appointed to the South East London JHOSC.

The Terms of Reference (TOR) were unanimously agreed by the Sub-Committee.

A54/17 JHOSC Update

There was none

MINUTES - PART B

None

The meeting finished at 8.05pm