

Healthy Communities Scrutiny Sub-Committee

MINUTES of the OPEN section of the Healthy Communities Scrutiny Sub-Committee held on Tuesday 28 November 2017 at 7.00 pm at Ground Floor Meeting Room G02B - 160 Tooley Street, London SE1 2QH

PRESENT: Councillor Rebecca Lury (Chair)

Councillor David Noakes Councillor Helen Dennis Councillor Sunny Lambe Councillor Leo Pollak Councillor Bill Williams

OTHER MEMBERS PRESENT:

OFFICER Dawn Brodrick, Executive Director of Workforce Development SUPPORT: Peter Absalom, Associate Director of Workforce Operations

Alan Goldsman, Director of Financial Improvement, KCH Caroline Gilmartin, Director of Integrated Commissioning, NHS

Southwark CCG

Kevin Fenton, Director of Health and Wellbeing

Gillian Bradford, Assistant Director for Joint Commissioning

Julie Timbrell, Scrutiny Project Manager

1. APOLOGIES

1.1 There were apologies for absence from Councillor Maria Linforth-Hall.

2. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT

2.1 There were no urgent items of business.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

3.1 There were the following disclosures of interests:

- Councillor Lamb's wife works for the NHS.
- Councillor Williams is a governor for Guy's & St Thomas' Foundation Trust.
- Councillor Noakes sits on the Health and Well-being Board (HWB) so he will be conflicted if and when the committee discuses any work where the HWB has an executive role, for example approves a plan. Cllr Noakes recused himself for the Better Care Fund item, which the HWB formally agreed.
- The chair, Councillor Lury, said the KCH chief executive sits on the guiding board
 of the company she has recently joined. She reported she has been advised this is
 not a conflict, as a precaution will recuse herself for the KCH item and join the
 audience.

4. MINUTES

RESOLVED:

The minutes of the following meetings were agreed as a correct record:

- a) Full minutes of 13 September 2017 (the decisions were agreed at the previous meeting).
- b) Full minutes of the last meeting on 17 October 2017

VIDEO - OPENING THE MEETING

https://www.youtube.com/watch?v=jsyDlsRyYYM&list=PL_maFEOk7e9h0GWmMyjrH49SxRDCnUOp3

5. KING'S COLLEGE HOSPITAL UPDATE

The following King's College Hospital (KCH) Foundation Trust and CCG representatives attended:

- Dawn Brodrick, Executive Director of Workforce Development, KCH
- Peter Absalom, Associate Director of Workforce Operations, KCH
- Alan Goldsman, Director of Financial Improvement, KCH
- Caroline Gilmartin, Director of Integrated Commissioning, NHS Southwark CCG

Trust plans to improve KCH's financial position

The Director of Financial Improvement presented the finance report. The following questions and comments were made:

 Can a Foundation Trust run a deficit? The Director explained that the Trust receive distress funding in the form of Treasury borrowing.

- Could assets be sold to fund the gap? No, there is a lock on assets.
- How are KCH going to live within their means? There is Trust plans to make savings and increase productivity. KCH is also part of a health system where solutions also lie. The CCG Director of Integrated Commissioning also agreed that solutions lie here and the STP will enable some of these issues to be better addressed. The KCH Director said KCH funding is over a billion pounds a year and raising each year by a small amount, however KCH costs are rising at a greater amount. The deficit is a relatively small fraction of KCH overall spend.
- How does the Trust fund deficit compare to other Trusts? It is substantial and high;
 however the KCH financial envelope is also big to compare to other Trusts.
- Can you raise more by increasing private patents? There are limited opportunities
 here as there is not much physical capacity; there are some opportunities in
 research.
- A member noted that the deficit reduction had gone better in previous years, however now it is on an upward trend; why is this? In part because early savings are easier to make. There are other issues such as higher drug costs. There are many challenges. The main aim is to become more productive (efficient).
- What about winter planning? KCH have tried to think about as this as much as possible - but they will have to see. It will be very demanding, KCH know this.
- How does this impact on the CCG? The Director of Integrated Commissioning said they are anxious, the CCG are working with the Trust to enable a good and robust relationship; it's not good if Southwark have a Trust which struggles to get nurses and doctors. The CCG try and set a contract which fully covers Southwark patients. Is there is a direct cost impact? The CCG might have to react if there was a big demand for example a very difficult winter. We cannot allow hospitals to fail that was learning from Mid Staffordshire [when care plummeted partly as a result of budget pressures].
- How many users of KCH are local patients? One 1/3 are from Southwark / Lambeth/ Bromley, with Southwark about 10%. There is block contract with local CCGs and dialogue is ongoing and positive with local CCGs..

Staffing and recruitment

Dawn Brodrick, Executive Director of Workforce Development, KCH and Peter Absalom, Associate Director of Workforce Operations, KCH presented and then the following questions and comments were made:

- How is Brexit impacting on recruitment? Europe dose provide staff with scores from Spain and Romania but international recruitment yields people in the hundreds.
- Do the exit questionnaires identify housing? We are looking at prioritising housing for key groups. People will more say they want promotion or career development. It's more about not joining because of housing costs.

- Has Brexit has impacted on KCH medical workforce? There is an article in the New York Times on KCH and the impact of Brexit, particularly around research.
- How many are agency staff? About 200. We are aiming to reduce it and this is going down. Some will be an odd day; KCH do need to retain some flexibility. There is a constant month on months focus on this issue as there is a 27% on-cost for agency workers.
- Are you looking at research? Yes, we also look at career development and rotation across the STP.
- How does the international recruitment go? They are less likely to go. We provide
 assistance on relocation and also support here. KCH have got 16 years of
 experience and are able to add the human touch, offering bespoke support as
 some nationalities may stay for different periods.
- What about mental health recruitment? This is more led by SLaM. It's fair to say
 the issues in ED mental health issues are increasing as we have an increase in
 need as a society.
- Should we feel guilty about recruiting from Philippines? Yes and no. It is a chief form of economic income in Philippines and KCH work closely with the overseas development agency. Should we be recruiting from local communities? KCH are looking for a diverse staff community to reflect the local community and making are making recruitment films about KCH. Do you have specific targets for the local community? That would need to be linked to an apprenticeship programme.
- What about using the Denmark Hill site and possibilities for offering housing to doctors and students? There could be possibilities for attracting and retaining staff with the emerging master plan; this is linked to realising capital to invest and anyway would not come online for ten years or so. KCH are presently focused more on immediate things they can do.

Members congratulated the team on the significant improvements to staff recruitment and retention.

VIDEO - KING'S COLLEGE HOSPITAL UPDATE

https://www.youtube.com/watch?v=Rr08LKyzA8k&list=PL_maFEOk7e9h0GWmMyjrH49SxRDCnUOp3&index=2

https://www.youtube.com/watch?v=a5JC3_dArPU&list=PL_maFEOk7e9h0GWmMyjrH49SxRDCnUOp3&index=5

6. BETTER CARE FUND

Gillian Bradford, Assistant Director for Joint Commissioning, Children's and Adults' Services presented and members particularly focused on care home provision and on

intermediate care and step down care.

VIDEO - BETTER CARE FUND

https://www.youtube.com/watch?v=YpnLUuVpKoM&list=PL_maFEOk7e9h0GWmMyjrH49 SxRDCnUOp3&index=4

7. PUBLIC HEALTH PRIORITIES

Kevin Fenton, Director of Health and Wellbeing, and consultants presented the reports enclosed with the agenda and addressed the following issues:

- Waits for Sexual Health clinic appointments
- Return rate for online/ home testing kits
- PREP trails (HIV prophylactic)
- Combined substance & sexual health commissioned services for young people
- Waiting list and process to meet demand for residential treatment for alcohol & drug misuse services
- Communities that are most affected by high levels of suicide, teenage pregnancy, STI and alcohol & drug misuse and how does that link to deprivation and regeneration (report to follow)
- The proportion of services that are used and accessed by Southwark residents and local services
- TB is it rising, where is it most prevalent and reasons (report to follow)
- Social regeneration and plans to embed health & wellbeing in regeneration master plans (e.g. Peckham, Old Kent Road & Canada Water), high street shops, and through warm dry housing.
- A challenge on the lack of ambition of a suicide rate reduction target of 10% and also reductions to self harm (from a resident) and rational from officers.

RESOLVED

Officers will return with a report on:

- i) socio economic data (including ethnicity) and prevalence rates of suicide, teenage conception, STI and alcohol & drug misuse
- ii) TB is this rising, where is this prevalent and the reasons.

VIDEO - PUBLIC HEALTH PRIORITIES

https://www.youtube.com/watch?v=qZKgSXczKbo&list=PL_maFEOk7e9h0GWmMyjrH49SxRDCnUOp3&index=3

8.	WORK-PLAN	
	The work-plan was noted.	
	CHAIR:	