

Item No. 9.	Classification: Open	Date: 2 December 2010	Meeting Name: Health & Social Care Board
Report title:		Changes in the NHS nationally and locally and implications for partnerships in Southwark	
Ward(s) or groups affected:		All	
From:		Chief Executive NHS Southwark and Strategic Director of Health & Community Services Southwark Council	

RECOMMENDATION

- 1 The Board is asked to note:
 - i) The response of Southwark Council to the NHS changes as set out in the Cabinet report of 23 November 2010.
 - ii) The approach of NHS Southwark to the changes as set out in the Board report of 18 November 2010.
 - iii) The agreed process of due diligence between Southwark Council and NHS Southwark.
 - iv) The joint work to develop the Health & Wellbeing Board
 - v) The confirmed support for the early development of a consortium of GPs in Southwark as a pathfinder for GP commissioning.

BACKGROUND INFORMATION

2. The White Paper *Excellence and Equity – Liberating the NHS* sets out far reaching proposals affecting health services, including the abolition of PCTs, commissioning by GPs, and a new Public Health role for councils.

MATTERS FOR CONSIDERATION

3. The Cabinet of Southwark Council, at its meeting of 23 November 2010, agreed a report and recommendations on this issue. This report is attached at Appendix 1.
4. NHS Southwark is implementing a range of measures in response to central government and NHS London guidance. These affect the long standing partnership between the two organisations.
5. The community health services of NHS Southwark – the “provider arm” are planned to merge with those of NHS Lambeth and move into Guy’s & St Thomas’s NHS Foundation Trust (GSTTFT). This is part of the separation of the commissioning and provider functions of PCTs required by the previous government and confirmed by the coalition government. The deadline for this is April 2011 and the work is on schedule. It affects many jointly provided services across adults and children’s care. The Council will need to forge new relationships directly with GSTTFT to ensure continuity of care.

6. The White Paper – *Equity & Excellence: Liberating the NHS* set out the change to GP commissioning. GPs locally have formed one consortium and have applied to become an early pathfinder. The NHS London deadline for first applications was 26 November, and an application was submitted.
7. NHS Southwark has agreed the establishment of a Clinical Commissioning Board, led by local GPs. Technically, a committee of the PCT, this Board will now start to lead commissioning decisions locally. There are 8 GP leads, two from each of the four localities in Southwark. These have been chosen by a process of selection/election.
8. The NHS has also been required to deliver significant management cost reductions over a three year period. This is 42% for NHS Southwark. NHS London set out in October 2010 that the three year timescale should be accelerated, to be achieved by April 2011.
9. Therefore, there has been a recent and rapid process to clarify how this would be achieved. NHS Southwark has been working with neighbouring PCTs in the South East London sector to share functions wherever appropriate. However, this has been in the clear context of preserving the local shared management and governance arrangements between the Council and the PCT.
10. NHS Southwark started phase 1 of staff consultation on 27 October to reduce management costs. On 22 November, a major consultation with NHS across the South East London sector, and other parts of London, was launched. This will clearly impact on the shared working arrangements. Given the close working with the Council, and the rapid development of the GP consortium locally, the approach has been to build as much sustainability and continuity into the health/care system, at a time of major organisational upheaval.
11. The Public Health White Paper is expected on 30 November. There is a jointly appointed Director of Public Health in Southwark, and a joint team located within the Council offices. There is also an existing Health and Wellbeing Board, chaired by the Cabinet Member for Health and Community Services. It would be prudent to develop from this firm base. The likelihood is that the role of the Health and Wellbeing Board would be expanded, to include amongst other responsibilities, the oversight of Joint Health and care arrangements.
12. The governance arrangements for working across the South East London sector have not yet been clarified. It is clear that these could affect the partnership arrangements described above.

RISK FACTORS

13. The rapid change in the context of a tight financial position creates risk and uncertainty in the whole healthcare system. Mitigation of the risk is the key issue of this paper.

COMMUNITY IMPACT

14. Many health gains have been achieved in Southwark in recent years, although gaps between the richest and healthiest and the poorest communities remain large. Continued focus on this throughout a time of organisational upheaval is a big consideration.

Background Papers	Held At	Contact
White Paper	NHS Southwark	Vicky Bradding 160 Tooley Street, London SE1 2TZ 020 7525 0408

APPENDICES

No.	Title
Appendix 1	Changes in the NHS and Implications for Southwark Council – Report to Cabinet

Lead Officer	Susanna White, Chief Executive, Southwark Primary Care Trust and Strategic, Director of Health & Community Services		
Report Author	Susanna White		
Version	Final		
Dated	26 November 2010		
Key Decision?	No		
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER			
Officer Title	Comments Sought	Comments included	
Strategic Director of Communities, Law and Governance	No	No	
Finance Director	No	No	
Cabinet Member	No	No	
Date final report sent to Constitutional Support Services/ PCT dispatch	29 November 2010		