



HEALTH AND ADULT SOCIAL CARE SCRUTINY SUB-COMMITTEE

MINUTES of the Health and Adult Social Care Scrutiny Sub-Committee held on Wednesday 23 March 2011 at 7.00 pm at Town Hall, Peckham Road, London SE5 8UB

PRESENT: Councillor Neil Coyle (Chair)
Councillor David Noakes
Councillor Michael Bukola
Councillor Victoria Mills
Councillor Darren Merrill
Councillor the Right Revd Emmanuel Oyewole

**OTHER MEMBERS
PRESENT:**

OFFICER Shelley Burke, Head of Overview & Scrutiny
SUPPORT: Susanna White, Chief Executive of NHS Southwark
Dr Jane Fryer, Medical Director
Andrew Brand, Director of Primary Care, NHS Southwark
Malcolm Hines, Director of Resources, NHS Southwark

1. APOLOGIES

1.1 There were none.

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

2.1 The Chair agreed to accept additional items.

2.2 Enquiry to the sub-committee from Michelle Bahrier, chief Executive, Cooltan Arts. Ms Bahrier shared a letter dated 23 March 2011 setting out the cessation of a service level agreement between the South London and Maudsley NHS Foundation Trust and CoolTan Arts, and the potential impact on users, and potential users, of CoolTan Arts services in the absence of any existing transitional arrangements. The key issue is a perceived lack of service provision for CoolTan

Arts clients given that personal health care budgets will not be in place by April 2011 as originally anticipated.

During conversation between members, Ms Bahrier and Susanna White, it was revealed that there is an ongoing review of mental health services which will address the issue of a plurality of providers. The review is part of the Council's budgetary plan, taking a strategic approach to exploring how to spend money more flexibility.

- 2.3 A letter has been received from St Thomas's Hospital about further developing the site. It seems that, if anything, the suggestions will result in an improvement in service delivery. Members enquiries or concerns are to be directed to the Chair or Vice Chair, or to Shelley Burke.
- 2.4 In relation to the national reconfiguration of Children's Heart Services, there is a meeting for Southwark and Lambeth members at Guy's Hospital on 29 March, at 4.30pm. There is a further meeting of scrutiny committee Chairs and lead officers at the London Borough of Waltham Forest on 5 April. The scrutiny meeting will explore the possibility of a Londonwide joint scrutiny project being formulated to consider the proposals.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

- 3.1 There were no disclosures of interests or dispensations.

4. MINUTES

That the minutes from the meeting on 29th November 2010 be agreed as an accurate record.

5. NHS SOUTHWARK SAVINGS PROGRAMME (QIPP PROGRAMME)

- 5.1 Susanna White, Malcolm Hines and Dr Jane Fryer introduced a series of min-presentations covering:
 - a) QIPP programme for 2011/12.
 - b) QIPP programme – clinical leadership.
 - c) QIPP – programme – financial outlook 2011/12.
 - d) Provider productivity.
 - e) Redesigned planned and urgent care – polysystems.
 - f) Efficiency measures (Estates and management cost).
 - g) Mental health commissioning.
 - h) QIPP programme – engagement in improving services.
- 5.2 Susanna White commented on the context of the QIPP being to achieve improvements in quality and to drive down costs. The current NHS Southwark budget is approximately £500m. The shape of future NHS healthcare services

will be influenced by GP commissioners.

5.3 Malcolm Hines provided some financial information, including:

- a) 2010.11 – NHS is forecasting a £1.3m surplus.
- b) For 2011/12, NHS Southwark has been asked by the Department of Health to make a 1% surplus, i.e. about £5m.
- c) Further Sir David Nicholson, NHS Chief Executive, has called on a further 2% (£11m) to be shared with NHS London as a 'recurrent pressures' budget towards healthcare such as flu provision, or a particular capital funding need. After 2012, this 'top slice' would be taken by the South-East London PCT cluster since strategic health authorities, such as NHS London, will cease in 2012. After 2013, it is possible that the 'top slice' will be directed towards GP commissioning consortia in some way, perhaps through the NHS Commissioning Board.
- d) The restructuring of the commissioning and management of Community Services, with NHS Lambeth, will result in a further £2.2m efficiency saving.
- e) Redundancy costs associated with management restructuring will not be known until May 2011, and will be published in the accounts in June 2011. This information will be shared with the Committee when it is available.
- f) Current section 106 funds will remain ring-fenced to certain areas of Southwark as per the original provision / agreement.
- g) Intermediate care beds. The focus is on commissioning and delivering 'home based services' rather than care in 'hospital beds'. Home care services are more affordable, particularly in the current financial climate.
- h) In response to a question about some home-based services being preferred over hospital based services, members were reminded that commissioning will be clinically-led in the new arrangements.
- i) Dr Jane Fryer agreed to gather some information relating to GP training provided by Marina House, and to share it with members.

5.4 It was confirmed that there would be greater public engagement in the healthcare planning process than there is now, and that they may not necessarily be fewer delegations to scrutiny since new ways of doing things often cause tensions, and so lead to more representations.

6. LOCAL NHS STRUCTURES (TRANSITIONAL PCT GOVERNANCE ARRANGEMENTS)

6.1 Susanna White shared a paper outlining future primary care trust arrangements in Southwark, as well as South-East London. Jane Fryer and Andrew Bland joined with Susanna White in adding some further detail to the paper. In particular, the paper outlines some key issues arising from the current Health and Social Care Bill, focusing on new Board arrangements, including GP commissioning and how it may impact in Southwark.

6.2 GP commissioning arrangements are due to come into operation in April 2013. A main focus for GP commissioners will be the need to get a firm grip on quality and costs.

6.3 Currently, Primary Care Trusts (PCTs) will merge into small groups or clusters. In

South-East London, arrangements for the cluster PCT are underway, and it will cover six PCT areas. The 'statutory body' remains NHS Southwark, and each former PCT area will continue to have a 'business support unit' managing local commissioning and other ancillary services. The South-East London arrangements, including the new business support units, come into operation on 4 April 2011. Andrew Bland will be the Managing Director for the Southwark Business Unit, and Malcolm Hines will be the Finance Director. Jane Fryer will be the Medical Director across the South-East London cluster. Over the next two years, general practitioners (GPs) will take on commissioning roles, though responsibility rests with NHS Southwark until April 2013.

- 6.4 In Southwark, there will be one GP commissioning consortium covering all GP practices. Following a formal recruitment process, eight GPs, two from each of four localities across Southwark, have been appointed to lead the consortium. The new GP board will be functional from 1 April 2011, though no commissioning arrangements have been delegated to the board yet. A main priority is to draft and agree a constitution, through involvement with all Southwark GP practices.
- 6.5 Historically, locally there has been a lot of involvement by GPs in health scrutiny, and that is expected to continue in the future. The key contacts will be the eight GP leads. In particular, Drs Patrick Holden (north of the Borough) and Mark Ashworth (south of the Borough) will have links into the social care agenda.
- 6.6 Susannah White and Andrew Bland answered a number of members' enquires:
- 6.7 Given the potential for overlap between the planned Health and Well-being Board (under the Health and Social Care Bill) and Southwark's existing Health and Well-Being Board, discussions are taking place between senior Council managers as to future arrangements for the existing Board.
- 6.8 The GP commissioning consortium's decision-making committee meetings will be held in public. Initially, this committee will exist as a NHS Southwark sub-committee.
- 6.9 Andrew Bland, as Managing Director of the Southwark Business Support Unit will continue to attend the Health and Social Care Scrutiny Sub-Committee meetings.
- 6.10 The Southwark Business Support Unit will continue to provide a commissioning framework, for example using the NHS commissioning cycle and Joint Strategic Needs Assessment.
- 6.11 The new PCT configuration is designed to reduce management costs by up to 50% – though it will be up to GPs as what they want to 'buy'. During the transition period to April 2013, a Transition Board led by the Chief Executive of NHS Lewisham will oversee progress.
- 6.12 The GP new commissioning system is about harnessing GPs skills and experience in terms of a patient's gateway to accessing health services. The eight GPs in the leadership group will have a strategic overview, but for others their focus will be on normal day-to-day surgeries.

CHAIR:

DATED:

[EXEC ONLY]

DEADLINE FOR NOTIFICATION OF CALL-IN UNDER SECTION 18 OF THE OVERVIEW AND SCRUTINY PROCEDURE RULES IS MIDNIGHT, [DATE].

THE ABOVE DECISIONS WILL NOT BE IMPLEMENTABLE UNTIL AFTER THAT DATE. SHOULD A DECISION OF THE EXECUTIVE BE CALLED-IN FOR SCRUTINY, THEN THE RELEVANT DECISION WILL BE HELD IN ABEYANCE PENDING THE OUTCOME OF SCRUTINY CONSIDERATION.