

HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY
COMMITTEE

23 FEBRUARY 2012

7.15pm-10.20pm

PRESENT: Councillors; Suzanne Evans (Chair) , Peter McCabe (Vice – Chair, Margaret Brierly, Nick Draper (substitute) Brenda Fraser, Maurice Groves, Logie Lohendran, Greg Udeh
Co-optees: Sheila Knight, Saleem Sheikh, Laura Johnson, Barbara Price

ALSO PRESENT: Adam Wickings, Managing Director for NHS Sutton and Merton NHS Southwest London. Dr Howard Freeman, Interim Co-chair, Merton Clinical Commissioning Group.

Chair reordered agenda as follows

1 DECLARATIONS OF INTEREST

There were no declarations of interest

2 APOLOGIES FOR ABSENCE

Apologies for absence were received from: Councillor Sam Thomas and Myrtle Agutter

3 MINUTES OF THE MEETING HELD ON 25 JANUARY

There were no comments on the minutes of the meeting held on the 25th January

4 MATTERS ARISING FROM THE MINUTES

There were no matters arising from the minutes

5 EMERGENCY ITEM – GP PRACTICES FUNDING REVIEW

The Chair announced that the Panel would consider an emergency item as an issue had arisen that could affect GP surgeries across the borough.

Councillor Oonagh Moulton had written to the Chair in advance of the meeting asking if she could put a question to Mr Adam Wickings, Managing Director, NHS Sutton and Merton, NHS South West London, on the financial implications of the GP Practices funding review.

The Chair invited Councillor Moulton to speak

Councillor Moulton reported that she was concerned about the future viability of the Vineyard Hill surgery in Wimbledon Park, both as the ward councillor and as a patient. The Surgery's Business Manager had carried out some initial calculations on how they will be affected by the review of contracts and found that it will result in a 13% cut both this year and next. There was particular concern about the key performance indicator on 'management of chronic disease in the community', if not met would lead to an additional 18% cut in funding. This could lead to up to £40,000 worth of cuts and may mean that the surgery is unsustainable in the long term. There has not been any consultation on these proposed changes and nor has the local pharmacy been involved in the process and if Vineyard Hill Road Surgery were to

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close it would have significant impact on the custom that the pharmacy will receive.

Adam Wickings responded that none of the GP practices will be under the threat of closure as a result of the review. NHS South West London will respond directly to Vineyard Hill surgery in regards to the issues that they have raised.

He further reported that the purpose of the review is to refocus budgets, support priorities and promote fairness. Historical reasons have meant that some practices receive more per head for their patients than others. The result of the review will mean that some will lose money and some will gain. The priorities in the review include immunisation, longer opening hours and more importance and support for long term conditions and frailty. The review will not result in substantial changes to services therefore a public consultation was not required, although GP groups were involved in developing the proposals.

Panel members asked a wide range of questions including, who will gain money, what will happen to the current priorities if commissioning bodies change, in age of transparency can we know how the money given to GP practices is being spent.

Dr Howard Freeman Interim Chair of Merton Clinical Commissioning Group reported that they are committed and fully signed up to the current priorities for GP practices and will continue with them subject to the agreement of the new legislation. It was also reported that GP practice are private organisations and they do not need to provide specific details about how their money is spent but must deliver objectives set out in the contract.

The Chair pointed out that this Panel should have been made aware of this review from the outset and we need to be kept updated as it develops.

Adam Wickings agreed to attend the next meeting of the Panel to provide details of GP practices, how much money they received, and how many patients that they have currently and what funding they will receive in the future

RESOLUTION

That NHS South West London attends the next meeting of this Panel to discuss the GP funding review.

6 UPDATE ON EPSOM AND ST HELIER DE-MERGER PLANS

Matthew Hopkins Chief Executive of Epsom and St Helier sought to provide reassurance to the Panel that despite the wide spread news coverage about the merger plans some of which was accurate and some not, it is business as usual at the hospital and services are still being delivered to patients. He also reported that a CQC survey found high levels of satisfaction with their outpatient's services in 2011. Also a survey of in-patient care found that they are compliant with all key standards.

John Sargent, Transaction Manager reported that St Georges had pulled out of the merger plans because of the uncertainty in the current provider landscape. The Better Services Better Value review is currently looking at health services across South West London and will have produced its proposals by the summer, this could

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have significant impact for providers. St Georges were not willing to take this risk given that they are currently applying for their own Foundation Trust status.

Epsom will continue with its own merger plans. It is recognised that St Helier cannot continue as a stand alone site. The Transaction Board are considering other options for St Helier such as a form of social enterprise. New options will be developed by July.

Adam Wickings reported that some press reporting has been unhelpful. St Georges withdrawal has not been caused by commissioning intentions or the impending new legislation. The uncertainty around Better Services Better Value has made it challenging and until that is resolved they cannot proceed.

A panel member expressed concern that the health services are operating in silos and we are moving away from a national health service.

Matthew Hopkins Chief Executive reported that St Helier has a strong working partnerships with St Georges and other local hospitals and this will remain.

A panel member asked how local residents and staff are being kept updated about the changes.

Matthew Hopkins reported that he had held a meeting with staff and ensured they were informed before the news appeared in the local press. Anthony Tiernan Head of Communications at Epsom and St Helier reported that the team worked with the local media to ensure that reports were accurate. They also met with LINK representatives to give them update to date information. Another round of public meetings will be held from April to outline next steps.

Panel members asked about the progress with the St Helier new build development.

Matthew Hopkins reported that they have received six million in this financial year and NHS London and the Department for Health will release the next thirteen million subject to agreement. There is strong support from NHS London and work to develop the site is on-going.

7 UPDATE ON DEVELOPING MERTON CLINICAL COMMISSIONING GROUP

Dr Howard Freeman gave some background to the new role of the Merton Clinical Commissioning Group (MGGC). He reported that MCGC is small, serving a population of under 170,000. This would rise to 200,000 without weighting. The government has not made a final decision on weighting in Merton which will have a big impact on funding. Sutton and Merton PCT received £30 million in funding. MCGC will receive £4.5million if weighted and £3 million if not weighted.

It must be remembered that MCGC will not commission community primary care services or specialised services. So MCGC will be a much smaller organisation and smaller support structure. The MCGC will have its biggest acute contract with St Georges, followed by Kingston. The MCGC will aim to get authorisation for shadow Clinical Commissioning Group Status in October 2012. They will work closely with

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Wandsworth, Richmond and Kingston as they have the same acute provider focus.

The Chair asked if GP's welcome this change and whether there may be a conflict of interest in commissioning services with the council. It was reported that GP's have been actively engaged in the commissioning process and have embraced the process, and as far as conflicts of interest are concerned, these exist in many public sector partnerships and it is important to build relationships and trust.

8 UPDATE ON MERTON LINK

The Community and Engagement Manager reported that there were two elements to this update, Merton LINK and transition to HealthWatch. It was reported that there were currently 17 pathfinders running to pilot HealthWatch and share learning. HealthWatch will not have a host organisation but will be a corporate body independent of the council

A co-opted member of the Panel reported that as a member of Sutton Link, there had been the opportunity to meet with other South West London LINK organisations. All other South West London LINK organisations have pathfinder status. She raised her concern that this scrutiny panel has a statutory responsibility to monitor the LINK but has not been given that opportunity. There are also concerns about the independence of the recently appointed Chair of LINK given her role as Chief Executive of South Thames Crossroads.

The Chair recognised that this has been a contentious issue. However having seen a confidential report on the problems between Link Merton and the former steering group she was satisfied that all due process has been followed. However, she said she shared panel members' concerns that they had not seen the final report of the link review and therefore could not satisfy themselves that the issue had been properly resolved. However, comments were made from the public gallery by members of the former LINK steering group, who said they would not prevent the document being put before the panel, and it is anticipated this will now happen.

RESOLVED

Investigate the duty of Scrutiny to monitor performance of LINK and, if appropriate, to consider this issue again at the earliest opportunity.

9 SUPPORTED HOUSING FOR PEOPLE WITH MENTAL HEALTH
PROBLEMS TASK GROUP REVIEW

The Sutton & Merton Service Director, from the South West London Mental Health Trust provided an update on the implementation of the recommendations that are set out in the report

A panel member expressed concerns that one of the issues in the review was that people in supported housing need more activities. It was reported that specifications on activities for clients are being built into the contracts. If they do not meet the criteria the contract will not be renewed.

The Chair said she was pleased that some of the recommendations are being clearly

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implemented such as identifying those under section 117 of the Mental Health Act on the housing register. However she was concerned that recommendations relating to smoking and being supported in gaining skills to cook were not being implemented and that there did not seem to be the will to implement them.

The Sutton & Merton Service Director, from the South West London Mental Health Trust reported putting these requirements in contracts is the best way to ensure that they are implemented. In smoking, the issue will be around enforcement if it is in people's own homes. Using the cessation service will ensure that we fulfil our responsibility to ensure that people have access to these services. The Chair again expressed concern that this was not addressing the problem and that a smoking ban could be implemented if there was the will to impose such as ban, as the task group had recommended.

A panel member asked how much funding was available to implement recommendations and it was reported that it had to be delivered within existing resources.

10 COMMUNITY TRANSPORT TASK GROUP REVIEW

Member reviewed the progress with implementing the recommendations and asked for clarification regarding;

Ensuring that mobile phones were hands free

Clarification that the following recommendation 13 had been implemented;

That the review report be forwarded to Merton Link, with a request that the link considers engaging with local hospitals' non-urgent patient transport units, in order to develop to develop channels of communication and develop closer working.

11 SCRUTINY OF DRAFT SERVICE PLANS

The Panel looked at the service plan and asked the Community and Housing Department to comment on the following issues.

0% inflation uplift - The Panel rejected this saving during the budget discussions and have on-going concerns about it, especially as it scores highly in being difficult to deliver in the longer term.

Telecare – it was reported that increased costs has meant that some people are returning their telecare equipment. Are the service department aware of this and dealing with any implications that may arise.

In regards to day centre costs – we need to know who is not receiving a service because of cost and not because their health has improved.

In the revenue budgets other reimbursements section – The Panel would like clarification on the rise from 4 million- 7.7 million.

12 WORK PROGRAMME

There were no comments on the work programme