Agenda Item 3

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HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

5 NOVEMBER 2019

(7.15 pm - 8.17 pm)

PRESENT: Councillors Peter McCabe (in the Chair), Thomas Barlow,

Rebecca Lanning, Dave Ward, Carl Quilliam, Nigel Benbow and

Mary Curtin, Joan Henry

Co-opted Members Diane Griffin and Saleem Sheikh

ALSO PRESENT: Councillor Mark Allison (Deputy Leader and Cabinet Member for

Finance) and Tobin Byers (Cabinet Member for Adult Social

Care, Health and the Environment)

Stella Akintan (Democratic Services Officer), Karla Finikin (Service Manager - SEN & Disabilities Integrated Service), Roger Kershaw (Assistant Director of Resources), John Morgan (Assistant Director, Adult Social Care) and Dr Dagmar Zeuner (Director, Public Health), James Blythe, Managing Director for Merton and Wandsworth CCG, Dr Andrew Murray, Chair Merton,

CCG.

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Apologies for absence were received from Councillor Pauline Cowper. Councillor Joan Henry attended as a substitute.

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of pecuniary interests

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

The minutes of the previous meeting were agreed

4 SOUTH WEST LONDON CLINICAL COMMISSIONING GROUP MERGER PROPOSALS (Agenda Item 4)

The Managing Director of Merton and Wandsworth CCG's said the merger had been agreed with new structure in place from April 2020. In response to questions it was reported that the team would be based in Wimbledon and the Merton local committee would be chaired by a local GP.

Panel Members asked what savings will be made as a result of the merger and the associated risks if it is not achieved. It was reported that all CCG's are required to

achieve a 20% saving in management costs. The greatest risk would have been if the merger did not take place. The CCG annual reports will demonstrate that running costs will be reduced over time.

A Panel member said they want to see improved joint working between the providers across South West London and recognition that residents travel between the four hospitals and not necessarily their nearest one. It was reported that the new proposals will strengthen links between the hospitals and co-ordinate the back office functions.

5 SOUTH WEST LONDON CLINICAL COMMISSIONING GROUP FIVE YEAR STRATEGY (Agenda Item 5)

The South West London Five Year Strategy is not due to be published on the 15th November. Therefore the Chair has asked for this item to be deferred until the next meeting to allow full scrutiny in a Panel setting.

6 BUSINESS PLAN UPDATE 2020-2024 (Agenda Item 6)

The Assistant Director of Resources gave an overview of the report stating that there is a period of uncertainty in local government finances in the medium term. This report contains the first set of savings and pressures. The Gap is £2.8 million for 2020- 2021 rising to £16.2 million for 2022-2024.

Panel members expressed concern that it is difficult to forecast given that we do not know who the government will be by the end of the year or what the settlement is likely to be.

The Assistant Director of Resources said they are working on the basis that the numbers will remain the same.

The Director of Community and Housing said previously agreed savings are on track to be delivered on within the agreed timescale. Further work is on-going to determine if any savings can be brought forward. Panel members asked what savings will be difficult to deliver, it was reported that 2021-2022 will be the period of harder savings looking at ways to address this by frontline teams working more efficiently. Adult Social care is focussing on partnership working with health and the voluntary sector. Work is taking place to renegotiate block contracts and high cost out of area placements.

A panel member asked how much the public health grant has been cut since 2013. The Director of Public Health said there had been a 10% reduction. Partnerships working including with health partners is one way to ensure the limited grant goes furthest for the benefit of local residents.

7 MERTON JOINT SEXUAL HEALTH STRATEGY (Agenda Item 7)

The Director of Public Health gave an overview of the report and stated that the Strategy has already been discussed with stakeholders and this is an opportunity for the Panel to comment before it goes to the Health and Wellbeing Board.

The Panel sought to understand how much cross cutting and intersectionality exists between groups most affected by sexual health issues. The Director of Public Health said there is some overlap and they had listened to groups who do not traditionally engage with services. Work is on-going to destigmatise sexual health issues amongst different groups.

In response to questions the Panel were informed that social and economic disadvantage means that it can result in people presenting at services at a late stage.

Panel members queried if there are any services to support those who are frequent attenders at clinics. The Director of Public Health said there are around 30,000 attendances at sexual health clinics per year. It is a high volume service. There is a focus on vulnerable groups through outreach and there is training for staff.

8 TRANSITIONS FOR SEND PUPILS TASK GROUP REVIEW - ACTION PLAN (Agenda Item 8)

Cllr Lanning, Task Group Chair thanked officers for their work on the recommendations and said she was pleased to see them translated into promising actions.

The Head of Integrated Learning Disabilities Services gave an overview of the report and stated that a multi-agency group had convened to improve transitions and implement the findings from the report.

The Head of Special Educational Needs and Disabilities Integrated Service said there had been a commitment from the partners to implement the recommendations.

Panel members said they are pleased to see early planning for Transitions and sought reassurance that the support continues and is not suddenly withdrawn. It was reported that the support continues until age 25 and beyond as long as the young person needs the support.

9 WORK PROGRAMME (Agenda Item 9)

The Work Programme was noted.

