

BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL
HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE

Minutes of the Meeting held on 22 July 2019 at 6.00 pm

Present:-

Cllr L Northover – Chairman
Cllr L-J Evans – Vice-Chairman

Present: Cllr H Allen, Cllr J Edwards, Cllr C Johnson, Cllr L Lewis,
Cllr K Rampton, Cllr R Rocca, Cllr T Trent, Cllr M F Brooke and
Cllr P Hilliard

8. Apologies

Apologies were received from Councillor N Geary and Councillor C Matthews

9. Substitute Members

Councillor P Hilliard acted as substitute for Councillor N Geary

Councillor M Brooke acted as substitute for Councillor C Matthews

10. Declarations of Interests

There were no declarations of Pecuniary Interest.

For Transparency Councillor C Johnson informed the Committee she was a staff nurse at Royal Bournemouth Hospital.

For Transparency Councillor L-J Evans informed the Committee she was a bank NHS employee.

11. Public Issues

There were no public questions, statements or petitions submitted for this meeting

12. Independent Reconfiguration Panel - Dorset CCG Clinical Services Review

The Monitoring Officer presented a report, a copy of which has been circulated and appears as Appendix 'A' of these minutes in the Minute Book.

Dorset Health Scrutiny Committee sent a referral to the Secretary of State for Health. A letter of support for the referral was also sent from Poole Borough Council. The referral was sent due to concern regarding elements

of the Clinical Services Review undertaken by Dorset Clinical Commissioning Group.

The Committee received an update on the progress of the referral which had been sent by the Secretary of State to the Independent Reconfiguration Panel. This Panel would independently review the proposed reconfiguration along with the contents of the referral and any objections.

The Independent Review Panel (IRP) were waiting for a form from NHS England, which would contain detailed information from NHS England and Dorset Clinical Commissioning Group. The IRP would then consider the form and any additional information it might need from the Councils before forming a final opinion to submit to the Secretary of State. There had been no intimation of timescales, but the referral could be considered late summer/autumn. The Appendix to the report contains the associated correspondence.

RESOLVED that: -

(a) the current position be noted;

(b) a further report be provided to the Committee when additional information became available.

13. NHS Dorset Clinical Commissioning Group - An overview of the Dorset Integrated Care System

The Committee received a presentation from the BCP Council Corporate Director of Health and Adult Social Care, the Director of Public Health for Dorset and the CCG's Head of Service for Mental Health and Learning Disabilities and Director of Transformation. The presentation provided Councillors with an overview of the Dorset Integrated Care System and the Sustainability and Transformation Plan as well as updates on Primary Care and mental health and learning disabilities services.

The BCP Council Corporate Director of Health and Adult Social Care explained Integrated Care Systems were a collaboration between all local health organisations and Councils to ensure a joined-up approach to the strategic planning and delivery of local services in order to improve the health outcomes of local people and populations; to ensure the integration of services for the benefit of local people and to ensure the best use of public sector funding. The Dorset Integrated Care System included the Dorset Clinical Commissioning Group, which is responsible for commissioning local health services and all local health trusts providing services, including the three acute hospital trusts in Dorset, the Dorset Healthcare Trust and the South West Ambulance Trust.

A Sustainability and Transformation Plan for Dorset had been agreed by all partners to the Dorset Integrated Care System and approved nationally that set out the system's ambitions for the improvement of residents' health and

wellbeing and the efficient use of its resources. The system also sought to ensure services were sustainable and partners were working together effectively in order to provide the best possible quality of care to residents.

The Director of Public Health for Dorset informed the Committee of the achievements of the Sustainability and Transformation Plan and explained that a refresh of the plan would be undertaken over Summer 2019, which would lead to a new plan which was in line with the national NHS Long Term Plan published in January 2019. It was particularly highlighted that the new plan would include greater involvement from the Councils' due to a recognition that the wider determinants of good health (such as good housing and education) are core to the responsibilities of local authorities.

The CCG Director of Transformation gave an update on plans for primary care. It was explained that national plans had recognized the workforce pressures on GP's and Primary Care Networks had been introduced to improve sustainability by delivering primary care at scale. All of Dorset was covered by a network with each network covering a population of between 20,000 to 50,000 people. The networks included GP's and other professionals who could provide services closer to home.

The Primary Care Network Plan 19/20 was particularly focused on population health. This was a move away from a focus on medical aspects of health to a health and wellbeing approach. This led to greater investment into the community and included greater integration of primary and community services. There was an emphasis on collaboration between professionals and services and an aspiration to consider individuals needs in a way that allowed them to live the life they chose.

The BCP Corporate Director of Health and Adult Social Care explained that there were 18 networks across Dorset and BCP. The networks worked within local areas which allowed the Primary Care Networks membership to be tailored to meet local need. Additionally, GP networks would receive a sum of almost £1.5 million over the coming 5 years and the networks needed to develop plans to meet their local community's needs by developing a range of services such as social prescribing and recruiting professionals, including paramedics and pharmacists.

The CCG Head of Service for Mental Health and Learning Disabilities provided an update on mental health and learning disabilities. The importance of affording the same value to mental health as physical health was expressed to the Committee and a desire to work together to achieve the best outcomes for the person. Key Pieces of work were highlighted including work on the Mental Health Acute Care Pathway, the new Retreat facilities and community front rooms, recovery beds and Safe Stop.

It was explained that important work around the mental health of children and young people was underway, particularly in regard to their access to services. A Joint Steering Group, that included Public Health and the Council's Children's Services professionals, had developed a

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Transformation Plan in order to improve the offer and services available to this group. Successes included Kooth online counseling and the provision of mental health support teams in schools. A business case had been provided to NHS England for a crisis and home treatment team specifically for young people.

Additional initiatives included annual physical health checks and follow up treatment for people with a serious mental illness, 24/7 Psychiatric liaison around acute hospitals, a mental health rehabilitation and a dementia service review and the improvement of access to psychological therapies. Additionally, there was a Transforming Care Program that sought to bring people receiving care outside of the area back into their own accommodation where appropriate.

It was explained to the Committee that the work set the background and context of the Sustainability and Transformation Plan and the Integrated Care Plan. The Committee were then asked to consider the NHS Long Term Plan and the plans key emerging themes. It was highlighted that the NHS Long Term Plan should include collaboration across services, care across the life course and a personalized care approach.

It was highlighted that to deliver the ambitions of the plan there needed to be a focus on doing things differently, tackling prevention and understanding health inequalities, backing the workforce, making better use of data and digital technology and getting the most out of taxpayers' investment in the NHS Investment. The emerging themes for the ICS Plan were around individuals, communities, living well, wellbeing, the workforce and digital innovation.

The Plan was out for public consultation and could be accessed through the Our Dorset website. It was also highlighted that the engagement team were out talking to members of the public. The 1st draft of the plan would be signed off in September by local Health Trust Boards and the BCP and Dorset Health and Well-Being Boards. The Final submission would be in November.

A number of questions were raised and discussed by members including

- The Integrated Care System and the integration of budgets and ensuring there were no excluded population groups;
- The need for future presentations to have BCP specific information;
- The use of the word 'system' and reassurance that individual needs are not lost in the jargon;
- Reassurance that professionals have the right training to ensure individuals get the right treatment and there isn't a global approach to health and wellbeing;
- A recognition that Healthwatch is a key stakeholder and the importance of being fully engaged with them;
- That it was too early to tell whether the available services were decreasing the number of people with mental health issues in crisis;

- That no particular age group was presenting in crisis and that children, young people, adults and elderly people's needs were being considered;
- That the retreat is a café style partnership between the statutory and voluntary sector where people can come if they're in crisis;
- That a report would be preferred in the future so the committee could have time to digest the information and ask more detailed questions;
- Details of the number of people with mental health and learning disabilities who are currently out of area and some considerations related to moving them back into the area;
- The impact of additional house building on health and social care services and the importance of working collaboratively to ensure sustainability;
- That personal health budgets were available and publicized on the NHS and CCG websites;
- That the survey for The Dementia Review would be circulated to the Committee after the meeting;
- The importance of being proactive in order to engage hard to reach groups;
- Reassurance that Dorset Integrated Care System isn't a cost cutting exercise and its focus is on the quality of outcomes;
- The challenge for the integrated care system of bringing together providers of homelessness services. An expression of interest had been submitted to Public Health England's Rough Sleepers Grant Scheme.

14. Forward Plan

The Overview and Scrutiny Specialist introduced the Committees Forward Plan, a copy of which had been circulated and appears as Appendix 'C' to these minutes in the minute book.

The Overview and Scrutiny Specialist also introduced a scoping report that recommended the establishment of a focus group to consider the new Charging Policy for Adult Social Care for BCP Council. A copy of the report had been circulated and appears as an Appendix to the Forward Plan in the minute book.

Before being put to the vote, it was proposed and seconded that the Charging Policy Working Group membership should include three Alliance Group members and three conservative members.

Upon being put to the vote, the recommendation was lost via casting vote.

Voting: For: 5; Against: 6

RESOLVED that: -

- (a) the Committee agreed the items on the Forward Plan at Appendix 'C' subject to the inclusion of an additional item on the Councils Safeguarding Strategy**

- (b) the Committee agreed to establish a working group to focus on the Charging Policy Project. It was agreed that the working group would consist of three Alliance Group members, 2 Conservative members and a representative from Healthwatch.**

Voting: For: 7; Against: 4

15. Future Meeting Dates

For Councillors to note the meeting dates of the committee, as listed below:

Monday 18 November 2019 – Christchurch Civic Centre

Monday 20 January 2020 – Bournemouth Town Hall

Monday 2 March 2020 – Christchurch Civic Centre

The meeting ended at 8.08 am

CHAIRMAN