

Joint Health Overview and Scrutiny Committee - 23 October 2017

Subject: BNSSG STP

Question PS01 submitted by: Mike Campbell

I am sure that members are mindful of the questions from, and responses to, members of the public at the last JHOSC meeting in December 2016, when this committee resolved “to receive the [STP] report: this would not indicate acceptance of the STP proposals as presented”.

I welcome the fact that item 7, Sustainability & Transformation Plan (STP) for Bristol, North Somerset and South Gloucestershire is being presented with the purpose of updating the JHOSC on progress with the BNSSG STP plans. Does this mean that the committee now accepts the plans?

Bristol CCG recently said, “we have a significant gap in our finances across Bristol, North Somerset and South Gloucestershire and we are looking at a number of ways to help us balance our budgets”. But the STP report contains no information about how this will be done.

My reading of the STP report is that it is rather selective in what areas it covers. For example, there is no mention of proposed changes to and consultations on reproductive medicine issues, no mention of post-cancer breast reconstruction policy issues, no mention of proposals to reduce the prescribing of ‘Over the Counter’ medicines and no mention of changes to urgent care provisions.

Are consultations on such matters taking place with elected members?

Reply from the Joint Health Overview and Scrutiny Committee

- The Joint Health Overview and Scrutiny Committee first formally met on 23 October 2017 and have not been asked to ‘sign off’ or accept any plans. The Joint Committee will continue to receive regular updates as the BNSSG Sustainability and Transformation Partnership plans emerge so that the Joint Committee has the opportunity to comment and provide input at the appropriate points.

Reply from the Chief Executive, BNSSG CCGs

- The proposed changes referred to which have been subject to recent consultation are part of the work to implement the CCGs’ operational plan for 2017/19 and are not directly part of the programme of work relating to the STP. The feedback from each of consultations will inform decisions by the CCG Governing Body about whether to proceed with the proposed changes.
- Details of the CCGs’ operational plan are available on each of the CCG websites - this is a combined operational plan for the three current CCGs
- For each of the consultations a ‘you said, we did’ report will be published summarising the feedback received in each case and the actions being taken in response to this.

- Decisions in relation to the each of the proposals will be taken by the CCG Governing Bodies via the regular public meetings.
- As part of the consultation process briefing material was provided to the members of each of the local authority involved in the overview and scrutiny of health matters.

Joint Health Overview and Scrutiny Committee - 23 October 2017

Subject: Care Needs Assessments

Question PQ01 submitted by: Daphne Havercroft

1. For each council - Bristol, North Somerset and South Gloucestershire, what are the target timescales for carrying out care needs assessments and what are the achievements against the target?
2. For each council - Bristol, North Somerset and South Gloucestershire, what are the target timescales for issuing written decisions following a care needs assessment and what are the achievements against the target? !
3. Are there any national timescales for conducting care needs assessments and issuing written decisions? If so, what are they? (According to Age UK, the Local Government Ombudsman has said that a reasonable time for an assessment should normally be between four and six weeks from the date of the first request).

Reply from Bristol City Council, North Somerset Council and South Gloucestershire Council

- There is no target timescale for carrying out an assessment. When we are contacted by someone, a member of our social care team will have an immediate conversation to help identify what sort of help they need and how to access it. If the person requires a more detailed assessment from a Social worker this is passed on to one our area teams who will arrange this with the person. We would prioritise this depending on the circumstances or potential risk.
- We do not have a target timescale for issuing a written decision following a care needs assessment, but we would expect the assessment to be shared quickly, as soon as the assessment is completed.
- The Care Act:
The Care Act specifies steps that the local authority must take for the purpose of ensuring that the assessment is carried out in an appropriate and proportionate manner;
- Statutory Guidance:
6.29 An assessment should be carried out over an appropriate and reasonable timescale taking into account the urgency of needs and a consideration of any fluctuation in those needs. Local authorities should inform the individual of an indicative timescale over which their assessment will be conducted and keep the person informed throughout the assessment process.

Joint Health Overview and Scrutiny Committee - 23 October 2017

Subject: STP Financial Savings

Question PQ02 submitted by: Shaun Murphy

The papers before the Committee today do not appear to contain any financial details. Is the immediate financial aim of the STP to make savings of £83million in 2017-18 as reported in a recent article in the Health Service Journal, and does the longer-term aim remain that expenditure in the BNSSG area should be capped by 2020/21 to £305 million less than is required to maintain current services?

Nor do the papers contain details of current proposed cuts to health services such as the fertility service and breast reconstruction procedures after cancer, details of which can be found on the website of Bristol CCG. These and other proposed cuts, and the many which will follow in the coming months, are driven by the aim of capping the local NHS budget at a level at which it is not possible to provide the current level of service.

Will the Scrutiny Committee have a standing item on its agenda starting at the next meeting for which the NHS will provide a current list of proposed cuts to health services and a financial report showing the extent of NHS budget cuts within year in the BNSSG area?

Reply from BNSSG STP Programme Director

- Papers submitted to the JHOSC meeting explained the work that is ongoing on our BNSSG case for change. Initial work has been undertaken to understand the finance and efficiency aspects and this will be further developed over the coming months.
- NHS budgets across the UK are determined centrally. It is understood that there is a current financial gap of £92.8m across the BNSSG area which is estimated to reach £324.8m in four years if nothing changes. Overall levels of funding for the NHS in BNSSG will continue to grow (approx. 3% per year) in line with a growing population and to cover some cost increases, but spending is predicted to grow at a faster rate which we cannot afford (approx. 7% per year).
- There are opportunities to provide services in a way that will reduce waste and improve care – for example, more joined up care approaches. Working together we are trying to identify ways to improve care and treatment to make sure it is efficient, high quality and designed around the people who use the services. Proposals are being worked on, based on firm evidence and evaluation to ensure best possible value in terms of outcomes and results for patients as well as financial investment.

Reply from the Joint Health Overview and Scrutiny Committee

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Joint Health Overview and Scrutiny Committee - 23 October 2017

Subject: Sustainable Transformation Plans (STP)

Question PQ03 submitted by: Viran Patel

1) Present unmet need and demand in local services e.g. ADHD waiting list of 18 months and Autism waiting list of 6 months for adults, the figures are not registered anywhere and not included in the STPs plans. Neither are they included in the JSNA.

This goes beyond the 18 weeks promised for Secondary Mental Health Services by NHS England. What will the Joint Committee do to hold to account the CCGs and Councils, around this matter within the STP plans ?

2) Following on from number 2, there is no inequality information, as shown above on services, under the Equality Act and or Impact study. That highlights the financial underinvestment, in presently commissioned services vs the savings impact likely ?

What will the Joint Committee do to hold to account the CCGs and Councils, around this matter within the STP plans ?

3) The lack of informed patient choice available through the present STP plans based on NICE guidelines evidence based approaches.

What will the Joint Committee do to hold to account the CCGs and Councils, around this matter within the STP plans ?

4) What will the Joint Committee do to hold to account the CCGs, Councils and NHS England, DOH, with patients and service users, both past and present, the issues of lack of services and cuts in services, since they have not been informed ? How do they plan to reject the plans and when with the scrutiny end since the plans are already being implemented ? Therefore is the committee complicit in the below statement ?

Reply from the Joint Health Overview and Scrutiny Committee

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