

**Coventry City Council**  
**Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 10.00**  
**am on Wednesday, 10 July 2019**

Present:

Members: Councillor J Clifford (Chair)  
Councillor M Ali  
Councillor J Blundell  
Councillor L Harvard  
Councillor R Lancaster  
Councillor E Ruane  
Councillor D Skinner

Co-Opted Members: David Spurgeon

Other Representatives: Rachael Danter, Better Health Better Care Better Value  
Andrea Green, Coventry and Rugby CCG  
Dr Sarah Raistrick, Coventry and Rugby CCG

Employees:

V Castree, Place Directorate  
J Fowles, People Directorate  
L Knight, Place Directorate

Apologies: Councillors J Innes and H Sweet  
Councillor M Mutton, Cabinet Member for Adult Services

## **Public Business**

### **1. Declarations of Interest**

There were no declarations of interest.

### **2. Minutes**

The minutes of the meeting held on 10<sup>th</sup> April, 2019 were signed as a true record.  
There were no matters arising.

### **3. NHS Long Term Plan**

The Scrutiny Board considered a report of Rachael Danter, System Transformation Director, Better Health Better Care Better Value concerning the NHS Long Plan. Health and care leaders had come together to develop the Long Term Plan to make the NHS fit for the future and to get the most value for patients out of the available funding. Rachael Danter, Andrea Green and Dr Sarah Raistrick, Coventry and Rugby CCG attended the meeting for the consideration of this item.

The report indicated that the plan had been drawn up by frontline health and care staff, patient groups and other experts. They had benefitted from hearing a wide

range of views from 200 events and receiving 2,500 submissions from individuals and groups representing the opinions and interests of 3.5m people.

The Board were informed of the key things that local NHS organisations would be working on with their partners to turn the ambitions in the plan into improvements in services in Coventry and Warwickshire which included:

- Making sure everyone gets the best start in life
- Delivering world class care for major health problems
- Supporting people to age well.

To ensure that the NHS could achieve the ambitious improvements for their patients, the Long Term Plan also set out how some of the challenges facing the NHS, such as staff shortages and growing demand for services, could be overcome. These included:

- Doing things differently
- Preventing illness and tackling health inequalities
- Backing the workforce
- Making better use of data and digital technology
- Getting the most out of taxpayers' investment in the NHS.

The report informed that Sustainability and Transformation Partnerships and Integrated Care Systems were now being asked to develop and implement their own strategies for the next five years. The strategy for Coventry and Warwickshire needed to set out how it was intended to take the ambitions from the Long Term Plan and working in partnership to turn them into local action to improve service and the health and wellbeing of the local communities, building on the work already undertaken. It was the intention to consult with employees, patients and local residents providing them with the opportunity to help shape what the NHS Long Term Plan means for the area and how services needed to change and improve.

The Board noted that between March and April Healthwatch Coventry and Healthwatch Warwickshire had undertaken a programme of engagement activity via online surveys, face to face meetings and focus groups, which sought the views of 795 local people about the provision of the services/ care currently provided. The output from this work along with other engagement activity undertaken by local authorities and the CCGs would be used to inform the production of the response to the NHS Long Term Plan - the next Coventry and Warwickshire Five year Plan. The report set out the time line which included production of the draft plan during the summer, engagement from September with publication of the Five Year Plan in November 2019. Members were offered the opportunity for a workshop session late September/ early October to be involved in the development stage of the Plan.

Members raised a number of issues in response to the report and responses were provided, matters raised included:

- The inclusion of young girls and pregnancy within the plan
- Further details about the proposed engagement with the public
- A request for financial information including details of the progress made to date in relation to the required savings of £276m

- Details of how the initial savings reported had been achieved including if services had ceased and if work had been outsourced
- The level of flexibility allowed to ensure the Plan was relevant to Coventry and the future monitoring arrangements
- How would the plan be able to address the current problems facing the NHS i.e. recruitment and retention of staff, childhood obesity, waiting times for cancer diagnosis and treatment etc
- Clarification about the additional funding being made available to the NHS
- The accountability for the new Five Year Plan
- Concerns about the delays in assessments for autism and, in particular, the lack of support for young adults aged 18-20
- A suggestion to provide young carers with opportunities to progress to a career in nursing which could help with the current staffing issues
- What the City Council could do to support the Plan.

**RESOLVED that:**

**(1) The contents of the report be noted**

**(2) A further report on the NHS Long Term Plan be submitted to a future meeting of the Board with particular reference to the £139m of savings already achieved including how these had been secured; the impact on current services; any services that had been discontinued; details of anything that had been outsourced and staffing levels**

**(3) Arrangements be put in place for workshop for Board members and any other appropriate Councillors at the end of September/ early October to provide the opportunity for members to be involved at the development stage of the Long Term Plan for Coventry and Warwickshire, with Warwickshire County and Warwickshire District Health Scrutiny Councillors being invited to attend.**

**(4) A briefing note detailing the engagement activity on the Long Term Plan be circulated to Board members.**

**(5) A request be made for Autism Services, and in particular the service for young adults, to be considered as a priority for inclusion in the Coventry and Warwickshire Long Term Plan.**

**4. Response to NHS Long Term Plan in Respect of Streamlining Commissioning**

The Scrutiny Board considered a report of Dr Sarah Raistrick, Coventry and Rugby Clinical Commissioning Group (CCG) which provided an update on the implementation of the NHS Long Term Plan in relation to the commissioning function of the CCG within Coventry and Warwickshire. Dr Raistrick attended the meeting for the consideration of this item along with Andrea Green, Chief Accountable Officer.

The report indicated that The NHS Long Term Plan, published in January 2019 set out how the NHS would move to a new service model in which patients would get

more options, better support and properly joined up care at the right time in the optimal care setting. It set out:

- How the NHS would strengthen its contribution to prevention and health inequalities
- The NHS's priorities for care quality and outcomes improvement for the decade ahead
- How current workforce pressures would be tackled and staff supported
- A wide-ranging programme to upgrade technology and digitally enabled care across the NHS
- How to return the NHS onto a sustainable financial path.

The Plan stated that local NHS organisations would increasingly focus on population health, moving everywhere to Integrated Care Systems (ICSs) each covering a population of c1m by April 2021 growing out of the current network of Sustainability and Transformation Partnerships. These would have a key role in working with Local Authorities at 'place' level and through them commissioners would make shared decisions with providers on how to use resources, design services and improve population health.

Every ICS would need streamlined commissioning arrangements to enable a single set of commissioning decisions at system level. This would typically involve a single CCG for each ICS area. CCGs would become leaner, more strategic organisations that supported providers to partner with local government and other community organisations on population health, service redesign and LTP implementation.

The Board were informed that Coventry and Warwickshire were on a journey towards becoming an ICS by 2021. The CCGs had set out to determine their response to achieving 'streamlined commissioning' with a 20% administration cost reduction during 2020. The governing bodies had asked for a transitional case for change to be developed. Initial consultation including briefings and engagement events for staff, GP members and governing body members had been held since December 2018. Other events were held with key stakeholders between March and May, 2019. The purpose of this activity had been to bring together a wide range of stakeholder views from across the locality.

The CCG had considered the transitional case for change at their meeting in May. In their discussions they were clear that, with the development of a single strategic commissioner, about 80% of the current CCG work would be aligned with 'place'. (4 places – Coventry, Warwickshire North, South Warwickshire and Rugby). 20% of the current CCG activity would align with commissioning at a Coventry and Warwickshire level. The governing body made a recommendation to GP members that the strategic direction would be a merger of the three local CCGs subject to the development of a full case for change.

Following an additional briefing, GP members voted for the CCG to explore two options: firstly, a single management team working for each of the three CCGs and secondly, a merger of the three CCGs with a single management team. The Board noted that a considerable amount of work would now be required with colleagues and stakeholders across the system throughout the process of development.

Members raised a number of issues in response to the report and responses were provided, matters raised included:

- Further information about other CCG's financial deficits and, in the light of these, the impact for Coventry of the potential merger
- The areas where savings would be targeted
- The optimum size of the model which allows for efficient working
- Did all GP practices in the city engage in networking arrangements
- What would happen if one CCG was against the merger
- Details about the university GP practices
- A suggestion that consideration be given to a regional health commissioning system which could result in increased financial savings
- Details of the required 20% savings

**RESOLVED that:**

**(1) Report received for information and assurance and the requirements for engagement of stakeholders during the development phase be noted.**

**(2) A copy of the GP cluster map be sent to Board members.**

**(3) The Chair, Councillor Clifford, on behalf of the Board, to write to WMCA Mayor Andy Street requesting that, in light of all the potential financial savings, consideration be given to having a regional health commissioning system which would still allow the opportunity for localism, resulting in more financial resource being available for front line health services.**

**5. Work Programme 2019-20 and Outstanding Issues**

The Board considered their work programme for the new municipal year.

**RESOLVED that the initial work programme for 2019/20 be approved.**

**6. Any other items of Public Business - Andrea Green**

The Chair, Councillor Clifford, informed the Board that Andrea Green, Chief Accountable Officer, Coventry and Rugby Clinical Commissioning Group (CCG) was leaving her current position in August to take on a new role in Stockport. The Board placed on record their thanks and appreciation for all work undertaken by Andrea over the past few years. They wished her well in her new job.

(Meeting closed at 11.40 am)