

ITEM 4

Time commenced – 6.00 pm
Time finished – 7.50pm

ADULTS AND HEALTH SCRUTINY REVIEW BOARD

16 April 2019

Present: Councillor J Khan (Chair)
Councillors Evans, McCristal, A Pegg, Webb, Wood

In Attendance: Nigel Brien, Network Management Group Manager, Communities and Place
K McMillan, Director of Integrated Services, Adults
A Parkin, Head of Finance Peoples Services
C Young, Interim Head of Commissioning, Adults
H Dillistone, Executive Director of Corporate Strategy and Delivery
NHS Derby and Derbyshire CCG
D Hayman, Chief Finance Officer NHS Derby and Derbyshire CCG
Dr S Lloyd, NHS Derby and Derbyshire CCG

31/18 Apologies for Absence

Apologies were received from Cllrs Froggatt and Raju, Andy Smith,

32/18 Late Items

There were no late items

33/18 Declarations of Interest

There were no declarations of interest

34/18 Minutes of the Previous Meeting

The Minutes from the meeting of 5 February 2019 were agreed as a correct record.

35/18 Matters Arising from the Minutes

There were no matters arising

36/18 Items Referred from the Executive Scrutiny

There were no items referred

37/18 CCG Update on Financial Plan for 2019/2020

The Board received a report from The Strategic Director of Corporate Resources which was presented by Officers from NHS Derby and Derbyshire CCG. The paper gave an update on the current position of the CCG in relation to their approach to delivering savings in 2018/2019 and how the CCG have built on this approach for 2019/2020

Councillors noted that in 2018/19 the four Derbyshire CCGs had a Quality, Innovation, Prevention and Productivity Programme (QIPP) target of £51m to support delivery of the £44m deficit control total agreed with NHS England. The 2018-2019 programme was a transactional approach and looked at how contracts and services were being purchased. Councillors noted that during 2018/2019 the 4 separate CCGs moved to one single CCG with five agreed strategic priorities:

- Reduce health inequalities by improving the physical and mental health of the people of Derbyshire
- Continue to reduce variation in the quality of care across Derbyshire
- Take the strategic lead in planning and commissioning care for the population of Derbyshire.
- Make best use of available resources, which includes achieving our statutory financial duties
- Deliver improvements in communication, including to all patients and stakeholders.

Officers explained the way in which resources would be spent over the period of financial recovery and also explained the way the current allocation of resources was spent. Councillors noted that the clinical strategy for the new CCG will support an ambitious clinical transformation programme. The Key transformation priorities for the NHS Derby and Derbyshire CCG as set out in the report were outlined by Officers. Councillors noted the report and made comments on the following priorities:

Primary Care – A strategy has been developed since the merger to one CCG. Primary Care Networks will increase investment in GP Services and out of hospital services. The new GP Contract will create an impetus for general practice to work together, be able to attract and retain more staff and also enable patients to be cared for closer to home. Moving activity out of the acute setting will release capacity in acute service provision and reduce the overall cost of care. Councillors queried whether there would be any more GPs appointed, or if the CCG was just using their existing resources in a smarter way. Officers advised there would be more primary care professionals such as nurses or foot care specialists, rather than more GPs. Councillors were also concerned that the GP premises would also be remodelled or updated to enable services to be accessed there. Officers confirmed that GPs as providers are key to unlocking these issues; the CCGs are currently looking at what is in place locally. Primary Care Networks (PCNs) give the opportunity for practices to work together to use existing buildings in a better way. PCNs will be able to employ their own ancillary staff to create a network of practices working collaboratively so that care is brought back into the community. The Ten Year Plan is the beginning of the journey of moving services back into the community areas.

Councillors suggested that Section 106 funding from new developments around the City could be available.

PLACE – Councillors noted the full implementation of the integrated care model in primary and community services through eight Places and 14 Primary Care Networks (PCNs), officers confirmed there were 8 Place areas led by GPs aligned with fourteen Primary Care Networks (PCNs), who in future could make links with local authorities and social care to explore any new ideas or concepts.

Community Services – transformation in line with the NHS 10 Year Plan by the development of community based care

Councillors queried whether there would still be a role for Patient Participation Groups (PPGs) in the new arrangements and officers confirmed that PPGs would remain in the practices. The CCG was looking to mirror some arrangements for community to have discussion with GPs; Ward Councillors would also have a role.

Councillors expressed their concerns about pressure points in accessing GPs; they sought assurance that systems were being implemented now to ensure better access. Officers highlighted the use of an NHS App which enables patients to have immediate access to their practice record and gives the ability to make appointments. Councillors were concerned that Apps and On Line Consultations would isolate people who do not have the means or ability to use new equipment. GP access by telephone still needs to be in place for people unable to use IT systems. Officers confirmed that the traditional means of access to GPs would continue but the CCG were trying to target across a whole range of age groups to access GP Services.

Resolved to note the contents of the report.

38/18 Clean Air Report

The Board received a report from the Acting Director of Planning and Transportation. The report was presented by the Network Management Group Manager, Communities and Place. The report updated the Scrutiny Board on the progress towards Derby City Council meeting its legal obligation in relation to NO₂ reduction at the roadside. This applies where government minimum modelling has identified exceedance against EU standards.

Councillors were informed that the Council submitted a Full Business Case to government on 26.03.19, as required by a Ministerial Direction on 18.12.18. This ends the feasibility stage.

The Board noted that in the Derby the modelling has established that Stafford Street was the only point of exceedance where the level of NO₂ exceeds 40 micro-grams, per cubic meter of air. To achieve compliance the Council's preferred option is a complex traffic management scheme to restrict the flow of traffic in Stafford Street and reduce the NO₂ levels to below the legal limit.

Councillors were concerned that the problem would move elsewhere once Stafford Street had achieved compliance, but the officer confirmed this would not be the case.

Councillors expressed concerns that the cycling issues had been dealt with on Stafford Street. The Officer confirmed that a proposal had been put forward for a new crossing point at the end of bridge Street, but some of the bus zone and cycle lane would need to be removed to do this. Councillors also queried the single compliance point given that other local authorities are building housing estates on the edge of Derby City which will impact on the City; they were concerned that other non-compliance situations would occur. The officer confirmed that the final model had taken into account commercial and residential properties on the City's border. The officer also advised that the level of traffic use around Stafford Street must be reduced; however conditions can be relaxed once vehicle compliance improves.

The Board noted that the full Business case, with all of the required technical documents, met all the tests set by Government and following submission of the Outline Business Case on 25.02.19, the Minister made an advance grant of £4.5m to allow work to continue towards implementation of the scheme to achieve compliance. The Full Business Case also includes a bid for funding from the Clean Air Fund which provides additional health benefits such as a Mobility Credit Scheme, expansion of Electric Vehicle Charging infrastructure, and traffic management measures to encourage the use of low and zero emission vehicles. Councillors were informed that the Clean Air Fund was Treasury funding and Derby City was not expecting to get its full bid but was hopeful to get some funding.

Resolved to:

- 1. Note progress and support the Council's Full Business Case to achieve compliance**
- 2. To support the Clean Air Fund application as part of a package of beneficial measures.**

39/18 Social Care Funding

The Board received a report from the Director of Integrated and Direct Services (Adults) which was presented by the Head of Service Finance Peoples Services. The report gave an update on the current financial situation.

The Board were informed that the financial outlook for the Council continues to be extremely challenging with Government austerity measures confirmed as continuing into the medium term. At the moment there is no certainty as to government funding over the next few years following Government's commitment to a Fair Funding Review with the Spending Review scheduled for 2019.

Councillors noted the pressures which are driving demand across Adults. Within Adult services:

- the over 85s population is rising annually by 3% together with the Council supporting more adults of working age with eligible social care needs
- In 2017/2018 there was a 10% increase in the numbers of adults of working age with severe and chronic learning and/or physical disabilities supported by adult social care.

- By 2030 over one quarter of the adult population will be aged 65.
- Derby has the widest gap in life expectancy between the most and least deprived across the East Midlands.

The officer advised that the crisis in Adult Social Care Funding has been part of national debates recently and has been a feature of significant investment in recent Government Budgets; changes to Council Tax increase levels for Councils, one-off specific grants to local government and the introduction of the Improved Better Care Fund following the already established Better Care Fund of June 2013. Councillors noted that from 2020/2021 and beyond the Better Care Fund allocations are unconfirmed.

Councillors requested clarification on the implications of removal of Better Care Funding. The officer confirmed that the BCF was approximately £25m, it was funding from health given to social care and the money was not confirmed in law or in any funding formula. The Council was assuming the continuation of the BCF for 2020-2021 but not the ASC Winter Pressures or any other additional funding. The Council was not in control of funding; if it was withdrawn then some expenditure can be scaled back but other commitments such as ongoing paid care packages cannot. Councillors noted the recent investment (BCF, iBCF, ASC precept) and the risk around the temporary nature of these investments.

Resolved to:

- 1. Note the additional funding allocations made in Adult Social Care over recent years**
- 2. Note the risks to the Council's Medium Term Financial Plan in that the funding for future years is not confirmed and no sustainable model for the funding of Adult Social Care has been confirmed.**

40/18 Independent Sector Care Homes Update

The Board received a report from the Strategic Director of Corporate Resources which was presented by the Director of Integrated and Direct Services (Adults). The report provided an update on the Independent Sector Care Homes.

The Board noted that overall the Council was seeing a reduction in the number of people it places in Care Homes. The aim was rather to support people to stay and be cared for in their own homes largely due to demographic changes and individual preferences. Young adults with learning difficulties are amongst those living longer, who now experience the problems of old age, however, the service was trying not to use residential care for such people under the age of 65. Councillors noted that the numbers of people that the Council is supporting in Derby residential care are lower than in comparator authorities.

The Board noted the change in balance of the Council being a provider of care in the past with the majority of care homes in the City now being private businesses, with the council having contracts in place with them to provide care.

Councillors noted that the majority of Care Homes in the City are rated as "Good" or "Outstanding", only occasionally would a Care Home be classed as "Inadequate". The service works with the Derby Adults Safeguarding Board and the Care Quality Commission (CQC) to improve ratings.

Councillors queried how often quality checks are carried out in Care Homes by Adult Services. The officer confirmed that visits to Care Homes are carried out on a regular basis and that they are carried out more frequently if there are any concerns about the Care Home. Councillors asked if they could assist to allay any concerns. The officer confirmed that Councillors can visit Care Homes; Adult Social Care can put them in touch with CQC if they have any concerns about a Care Home or Adult Social Care could undertake an unplanned visit.

Councillors discussed the possibility of postal voting fraud in Care Homes and were advised that any suspected incidents should be reported to the Police.

Resolved to:

- 1. Consider the presentation**
- 2. To make any further comments or recommendations following on the presentation received.**

41/18 Work Programme and Topic Review

The Board considered a report of the Strategic Director of Corporate Resources presenting the proposed work programme of the Board for the remainder of the 2018/19 municipal year.

Members noted the work programme that had been undertaken in the 2018/19 municipal year.

Resolved to note the report

42/18 Items referred from the Executive Scrutiny Board

There were no items referred.

MINUTES END