

The Cheshire and Wirral Councils' Joint Scrutiny Committee Agenda

Date: Monday, 30th November, 2009

Time: 2.30 pm

Venue: Council Chamber, Municipal Buildings, Earle Street, Crewe
CW1 2BJ

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and at the foot of each report.

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. Apologies for Absence

2. Declarations of Interest

To provide an opportunity for Members and Officers to declare any personal and/or prejudicial interests in any item on the agenda.

3. Minutes of previous meeting (Pages 1 - 8)

To approve the minutes of the meeting held on 8 October 2009 as a correct record.

4. Impact of the Current Financial Climate on Providers of Mental Health and Associated Services (Pages 9 - 14)

To consider a presentation of the Interim Chief Executive of the Partnership Trust.

As requested at the previous meeting, representatives of the Primary Care Trusts and the NHS North West will be in attendance to answer questions:

- Nik Khashu, Assistant Director of Finance (Strategy and Performance), NHS North West;
- Iain Crossley, Director of Finance, Economy and Market Development, NHS Western Cheshire;
- Tina Long, Director of Strategic Partnerships and Russell Favager, Director of Finance, NHS Wirral;
- Michael Pyrah, Chief Executive, Central and Eastern Cheshire PCT.

For any apologies or requests for further information, or to give notice of a question to be asked by a member of the public

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CHESHIRE EAST COUNCIL

Minutes of a meeting of the **The Cheshire and Wirral Councils' Joint Scrutiny Committee**
held on Thursday, 8th October, 2009 at Council Chamber, Cheshire West and Chester Council, County Hall, Chester, CH1 1SF

PRESENT

Councillor A Bridson (Chairman)
Councillor D Flude (Vice-Chairman)

Councillors I Coates, A Dawson, P Donovan, P Lott, D Roberts, G Smith, R Thompson, G Watt, G Baxendale, S Jones, C Beard and C Andrew

Apologies

Councillors J Grimshaw, P Reisdorf and S Clarke

5 ALSO PRESENT

Councillor R Bailey, Cheshire East Council;
Councillor R Wilkins, Wirral Council (substitute Member)

6 COUNCILLOR ALLAN RICHARDSON

The Chairman referred to the recent sad death of Councillor Allan Richardson of Cheshire East Council, who was a Member of this Committee.

Councillor D Flude paid tribute to Councillor Richardson and made particular mention of his helpful nature and dedication to the role of Overview and Scrutiny.

7 DECLARATIONS OF INTEREST

RESOLVED: That the following declarations of interest be noted:

- Councillor D Flude, Personal Interest on the grounds that she was a Member of the Alzheimers Society and Independent Advocacy;
- Councillor P Lott, Personal Interest on the grounds that she was a Member of the Local Involvement Network; and
- Councillor D Roberts, Personal Interest on the grounds that her daughter was an employee of the Cheshire and Wirral Partnership NHS Foundation Trust.

8 MINUTES OF PREVIOUS MEETING

RESOLVED: That the minutes of the meeting of the Committee held on 7 May be confirmed as a correct record.

9 PROCEDURAL RULES

The Committee considered a report setting out draft Procedural Rules for consideration.

The Procedural Rules covered various matters including membership and co-option, arrangements for Secretarial and Proper Officer support, quorum, Work Programme and urgent business. The Rules proposed that the Chair and Vice Chair should be appointed annually and the authority that did not hold either of these positions should nominate a Spokesperson.

During discussion of the item Members discussed the importance of ensuring that the Committee received regular updates outlining the impact of any proposals on service users, carers and staff. The Committee also requested an update on the impact of the Talking Therapies programme which the Committee had received an earlier briefing on. The Committee also felt that consideration should be given to changing the name of the Committee so that it was clearly understood what the Committee was scrutinising.

RESOLVED: That

- (a) the Procedural Rules as submitted be approved and adopted subject to a minor amendment under the heading of Work Programme to clarify that the Work Programme is a rolling programme;
- (b) the Procedural Rules, as amended, be submitted to the three constituent Councils;
- (c) consideration be given at the next meeting to amending the name of the Committee to reflect more clearly the role of the Committee; and
- (d) an update report be submitted to the next meeting on the Improving Access to Psychological Therapies scheme.

10 CHIEF EXECUTIVE'S UPDATE

The Committee considered a verbal update report from Dr Ian Davidson, Interim Chief Executive of the Cheshire and Wirral Partnership NHS Foundation Trust on the following matters:

Impact of the current financial climate

Ros Preen, Director of Finance, briefed on the current financial position. She explained that Foundation Trust status had been successful for the Trust for various reasons in that it had enabled investments to be made, enabled greater engagement through membership, greater focus on longer term planning and contracts that were “legally” binding.

There were a number of key financial drivers impacting on the Trust including an on-going driver for efficiencies and a reduction in resources for the Health Services. It was also important to note that Payment by Results did not apply to mental health and that the service was very staff intensive, more so than in the acute sector.

The Trust was planning efficiency savings but it would not be possible to meet these by back office savings alone. There were increasing costs in meeting continuing care needs and specialist services. Commissioners' funding issues would impact on providers who would be expected to show increasing Value for

Money with a risk that funding could be reduced. The Trust would need to respond quickly in such cases.

Dr Davidson explained that demand for the Trust's services had increased due to the growth in the older person's population, with two major mental health issues affecting older people – dementia and depression. For most people care in their own home was most appropriate with support from community services but some would need hospital provision so it was important to have the correct mix of both types of care.

He outlined that 2 of the Primary Care Trusts that were major commissioners of the Trust's services were currently in financial balance – Wirral and Western Cheshire – but Central and Eastern Cheshire PCT was predicting a financial overspend if remedial action was not taken and had devised a Sustainability Plan to address the financial situation. As a result of these difficulties the Central and Eastern Cheshire PCT had advised the Trust that they would not be able to pay £1m previously agreed and this was currently under discussion between the PCT and the Trust.

The Trust did not own buildings nor was it given rental funding. Commissioners would determine a Mental Health Programme Budget and would then commission services from the Trust and other providers.

Emergency Management Action

Dr Davidson briefed Members on a Trust Board decision to temporarily close Bollin Ward, Macclesfield Hospital. This was due to the Trust spending more on delivering mental health services in Central and Eastern Cheshire PCT than it received in income from the PCT. The level of funding from the PCT had been an issue for several years and the PCT was committed to resolving this but in the meantime the Trust could not afford to overspend alongside the efficiency savings it was required to make. The closure of Bollin Ward was seen as the safest action to take with the least impact on services to local people. There was spare capacity within Older People's Inpatient Services and was confident that high quality care could continue to be provided from a reduced number of beds. The Trust was also committed to providing community care and this was consistent with national policy. The closure would be managed carefully.#

Update on Supported Housing Network

This service, that provided supported living services for people with learning disabilities, had now been transferred to new providers:

- Macclesfield – Lifeways;
- Congleton – Choice Support;
- Central and Knutsford/Wilmslow – Alternative Futures.

The arrangements were still to be finalised due to discussions taking place between the Trust and Central and Eastern Cheshire Primary Care Trust regarding the contract value and how much funding would transfer to the Local Authority. The transfer would be cost neutral for the Trust.

Update of Respite Care Consultation

The Trust was consulting on the eligibility for and process of assessment and allocation of respite care in Cheshire and also on (on behalf of commissioners) the proposal to close the Primrose Avenue unit and operate an improved single service for central Cheshire at Crook Lane Winsford. A number of representations had been received on the order and content of the consultation resulting in delays to the consultation process which was now expected to be completed by December. All information received would then be reviewed and recommendations drafted and a report submitted to the Committee.

Update of relocation of Wirral Alcohol Services to the Stein Centre

This project was currently out to tender with an expected start on site aimed for February 2010 and move into the new building in July 2010. The service would include the alcohol harm reduction team, dependent drinker's team and engagement team, there would also be clinic facilities to enable nurse practitioners to offer health checks, blood tests etc.

Update on the Development of Older Peoples In-Patient Services from St Catherine's Hospital to Springview Hospital, Clatterbridge

This project was on target for service users to move in on 20 January 2010. An open day would be held on 22 December. All rooms would be single, en-suite and there would be a male only area, female only area and a communal area. Service users had been asked to make suggestions as to the names for the two wards.

Update on Greenways Assessment and Treatment Unit, Macclesfield

This was a purpose built 12 bed assessment and treatment unit for adults with a learning disability on a site adjacent to Macclesfield District Hospital. Patients would transfer into the Unit in November.

World Mental Health Day 10 October 2009

A family event had been planned at Winsford Lifestyle Centre to mark World Mental Health Day. There would also be the Annual Members Meeting on the same day.

Members discussed the financial issues outlined at the meeting and proposed a special meeting to hear from the Primary Care Trusts directly. It was also agreed that a visit to Greenways Unit would be helpful.

RESOLVED: That

(a) a meeting be arranged as soon as possible between the Joint Committee and representatives of the Cheshire and Wirral Partnership NHS Foundation Trust, the 3 Primary Care Trusts and the North West Strategic Health Authority to consider the financial position and future allocation of resources to the Partnership Trust at a venue located in East Cheshire;

(b) a visit to Greenways Assessment and Treatment Unit, Macclesfield be arranged.

11 CONSULTATION ON SUBSTANTIAL VARIATIONS OR DEVELOPMENTS TO SERVICES - DELIVERING EFFICIENCIES AND MODERN MENTAL HEALTH SERVICES

The Committee considered a report on a Substantial Development or Variation in Service relating to reconfiguring services in Central and East Cheshire. The reconfiguration was part of efficiencies to enable services to be provided in the most cost efficient way with no reduction in service to users and carers. The proposals were not finalised but were likely to involve reconfiguration of beds in Central and Eastern Cheshire and Wirral. However consultation would involve the whole area as any proposals would need to be considered across the whole of the Trust's patch.

At this stage the proposals involved providing a separate ward on Wirral for service users with eating disorders by taking those adult beds out of Croft Ward on Macclesfield. Currently Croft Ward had beds both for adults with eating disorders and older people with a functional mental illness, this mix was against best practice. Removing the eating disorder beds would mean Croft Ward would not be viable. There were two other small bedded wards for older patients with organic illness. This provision of three older people's wards across two sites meant there was little joint learning and development across older people's wards. It was proposed to manage all older people's services in Central/East Cheshire in Crewe using two ground floor wards. This would enable the provision of better accommodation and ensure that staff with specialist skills were co-located.

Three adult wards were proposed in Central and East Cheshire – one in Crewe and two in Macclesfield. The total number of beds in Central and East would be 84.

Alongside the reconfiguration, a new model of care was to be introduced called the Acute Care Model. This model allocated one consultant to manage all inpatients, with other consultants concentrating on the majority of service users who lived in the community. This would enable inpatients to see the consultant on a daily basis and benefit from increased access to senior clinical staff. This model was already in operation in Wirral and West Cheshire and service users and carers were pleased with the increased availability of a consultant psychiatrist.

It was proposed that the changes be consulted on alongside proposals relating to inpatient reconfiguration in Central and Eastern Cheshire and would include four public meetings.

RESOLVED: That the consultation process be endorsed and the proposals supported.

12 CONSULTATION ON SUBSTANTIAL VARIATIONS OR DEVELOPMENTS TO SERVICES - CENTRAL AND EASTERN CHESHIRE MENTAL HEALTH INPATIENT RECONFIGURATION

The Committee considered a report on a Substantial Development or Variation to Service relating to the reconfiguration of Adult and Older Persons Mental Health

Inpatient Services in Central and Eastern Cheshire. The consultation would cover three key issues:

- The need to invest to make significant improvements in the inpatient environment to meet current standards;
- The proposal to provide all Adult and Older Persons inpatient Mental Health services from a single site;
- The introduction of new ways of working which would see further investments in community based services and as a consequence a reduced requirement for inpatient beds.

The background to the proposal included:

- A need to improve environmental standards, including single bedrooms and appropriate therapeutic and day care facilities;
- Provide a specialist inpatient unit of sufficient critical mass with highly trained and well motivated staff to ensure consistent high standards of nursing and medical care;
- Develop a plan in response to the requirement to vacate the Mental Health unit at Leighton for which the Trust had been served notice to vacate by Spring 2012.

Both the Strategic Health Authority and National Clinical Advisory Team had reviewed and supported the proposals.

The Trust and Central and Eastern Cheshire Primary Care Trust were proposing to undertake a full public consultation exercise from December 2009 – March 2010. The PCT Board was to consider the consultation shortly.

RESOLVED: That the public consultation process to date be noted and endorsed, subject to the Central and Eastern Cheshire PCT Board agreeing to proceed to the next stage of public consultation, the relevant Overview and Scrutiny Committees of Cheshire East and Cheshire West and Chester Councils be requested to consider the proposals as a Substantial Development or Variation in Service – Level 3 to be dealt with, if possible, at a joint meeting.

13 TRANSFER OF THE ASSERTIVE OUTREACH FUNCTION FROM SEPARATE TEAMS TO COMMUNITY MENTAL HEALTH TEAMS

The Committee considered a report on a Substantial Development or Variation in Service regarding the transfer of the Assertive Outreach function from separate teams to within Community Mental Health Teams.

The Trust currently had four Assertive Outreach Teams who provided a service for service users who were hard to engage. They were separate from Community Mental Health Teams (CMHTs) who were the cornerstone of community based mental health services and acted as a single point of access for secondary care. Low use of hospital beds was seen as a measure of good CMHTs - within the Trust inpatient admissions were managed successfully in fewer than the national average beds. Service users who required intensive case management were referred from CMHTs to Assertive Outreach Teams. This transfer could cause disruption and uncertainty to service users and carers at a time of increased risk and was an inefficient way of working with duplication of assessment and paperwork.

It was therefore proposed to integrate the Assertive Outreach function into CMHTs, detailed work had been undertaken to ensure capacity and resource would be available to support service users.

Consultation would be undertaken with a range of stakeholders and including any service users or carers directly involved with the current service. Subject to the results of the consultation, the change would be implemented in December 2009.

RESOLVED: That

- (a) the proposal be confirmed as a Level 2 change;
- (b) the proposals and consultation process be supported: and
- (c) a report be submitted to the Committee early in the new year with initial feedback on the impact of the proposals and the outcome of the consultation and a further report be submitted approximately six months after implementation listing financial impact and impact on service users and carers.

14 PROPOSED DEVELOPMENT OF SOSS MOSS SITE, NETHER ALDERLEY, MACCLESFIELD

The Committee considered a report on the development of the Soss Moss site, Nether Alderley, near Macclesfield. The proposal was to build an additional 15 bed low secure unit for mental health or learning disability services as a first stage to the redevelopment of the whole site. The proposals had been shared with local residents and the Parish Council who supported the proposals.

RESOLVED: That:

- (a) the proposals be confirmed as a Level 2 change; and
- (b) the proposed redevelopment be supported.

The meeting commenced at 2.00 pm and concluded at 4.50 pm

Councillor Bridson (Chairman)

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Impact of the Current Financial Climate on Providers of Mental Health and Associated Services

**Briefing for the Cheshire and Wirral
Council's Joint Scrutiny Committee**

November 2009

Care • Well-being • Partnership



Context: Efficiency Agenda

- NHS requires ongoing efficiency – An in-house management issue for CWP.
- Levels range between 3.5% and 5%+ over the next 3 years.
- Same volume of service, less cost – options align to service redesign, finding different ways to manage our costs etc

Progress on Efficiency Targets

- Deadline for comprehensive plans for current year to deliver end of Sept '09 which has not been met.
- Balance still outstanding for 09/10 circa £1.5 m – a shortfall seriously impacts on the Trust's financial performance which then has knock on impact on its financial risk rating, ability to borrow and long term financial strategy
- Areas of shortfall are in AOPS and Estates and Facilities – some further assurance needed for Drugs and Alcohol Services.

Context : Local Health Economy Positions

- CWP has three main commissioners (PCT's);
 - **NHS Wirral** = current balanced financial position but projections are deficit unless serious system changes are brought about
 - **NHS Western Cheshire** = dealing with legacy issues re previous financial deficits and their projections are the same as NHS Wirral, and
 - **Central and Eastern Cheshire PCT** = forecasting a £18m deficit in 09/10 and a £30m deficit in 10/11 with this projected to get worse unless serious system changes are brought about

CONCLUSION : SERIOUS SYSTEM CHANGE IS REQUIRED ACROSS THE PIECE OVER THE NEXT 2 – 3 YEARS !!!!

Impact of Local Economy Positions on CWP

- **NHS Wirral** = working with stakeholders on Mental Health Services work stream. PCT have indicated they do not want to reduce spend on MH services.
- **NHS Western Cheshire** = working with stakeholders on a few work streams including dementia and alcohol services. No indication of reduction in spend on MH services.
- **Central and Eastern Cheshire** = indicated in September they wish to reduce payment to the Trust by the year end by £1m. Half of this may be found through technical adjustments. Circa £500,000 is under discussion and could have a service impact, yet to be defined.
- This PCT have also indicated that they will be looking to reduce its spend on MH services on a recurrent basis and this is likely to be a figure greater than £1m.

Conclusion . . .

- CWP's efficiency targets mean service change via re-design.
- Local Economy Agenda will mean further additional service re-design but will have the scope to streamline and improve service user experience etc across health sectors.
- Local Economy Deficits will mean service reductions – and is a tangible reality in Central and Eastern Cheshire PCT's economy.