

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Health and Adult Social Care and Communities Overview and Scrutiny Committee**
held on Thursday, 12th January, 2017 at Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor J Saunders (Chairman)
Councillor B Dooley (Vice-Chairman)

Councillors Rhoda Bailey, G Baxendale, S Brookfield, E Brooks, C Chapman,
S Edgar, L Jeuda, G Merry, A Moran, S Pochin, J Rhodes and L Smetham

48 APOLOGIES FOR ABSENCE

Councillor Mick Warren.

49 MINUTES OF PREVIOUS MEETING

RESOLVED- That the minutes of the meeting held on the 1 December 2016 be confirmed as a correct record and signed by the Chairman.

50 DECLARATIONS OF INTEREST

There were no declarations of interest.

51 DECLARATION OF PARTY WHIP

There were no declarations of the existence of a party whip.

52 PUBLIC SPEAKING TIME/OPEN SESSION

There were no members of the public present who wished to speak.

53 CCG RECOVERY PLANS

Simon Whitehouse, Chief Executive of South Cheshire Clinical Commissioning Group (CCG) attended the meeting to provide a recovery plan update.

In July 2016 Simon had reported on a proposed financial recovery and improvement plan for Central Cheshire which included the CCG's for South Cheshire Vale Royal.

By 2020/21 Central Cheshire would face a combined financial deficit of £90.5 million. Currently over half of the budget would be spent on hospital services. Other services included mental health, community services, prescribing and continuing health care (CHC).

South Cheshire CCG was currently in the process of consulting with GP's, consultants and the public about the future of service delivery.

Simon reminded the committee of the ongoing work at the sub-regional level in response to the Sustainability and Transformation Plan (STP) which was aimed at:

- clearly planning for the future including support for GP practises,
- reducing waste in prescribing (e.g. repeat prescriptions),
- evaluating corporate and management costs and ensuring the right level of care is in place for CHC.

In response to the presentation the committee questioned Simon about duplications in all areas of the health service, whilst acknowledging that the current system was complex, difficult, not easy to navigate and had built in delays.

The overarching issue was the scale of the financial gap which required the CCG to consider reducing waste across the whole of commissioned services.

One particular area highlighted to illustrate inefficiency related to paper records. CCG's were working with hospitals to introduce electronic storage of records. The cost of paper notes was inefficient and caused delays and blockages for patients if not all the records were in one place.

Jerry Hawker, Chief Executive of Eastern Cheshire Clinical Commissioning Group (CCG) attended the meeting to provide a recovery plan update.

Eastern Cheshire shared a similar geographical area and size of population with South Cheshire. Eastern Cheshire CCG received a total income of £274.6million. To illustrate the level of financial pressure currently faced by the CCG, Jerry explained that the budget for the current financial year was expected to show a deficit of £15.2million of which £3.4million had been agreed with NHS England.

The main areas of expenditure for Eastern Cheshire CCG were:

- over 50% of its overall budget to Hospital Services between East Cheshire Trust, South Manchester (University Hospital), Stepping Hill and North Staffordshire;
- prescribing medicines;
- CHC which included funded nursing support (FNS), mental health care and community health services; and
- £4.2million CCG operating costs, 80% attributed to staff costs.

Jerry highlighted three specific areas of activity:

- where the CCG had successfully delivered: prescription of Primary Care medicines, non recurrent investment in services, contractual efficiencies, reduced hospital activity and reduced CCG operating costs. This combined area of work has recovered £6.16million.
- where savings had not accrued against the plan: CHC, FNS, a lower reduction in hospital care activity and slow progression on system transformation.

- where costs had exceeded the plan: CHC, FNC cost of living, disproportionate costs against the reduction of hospital care activity and the cost of recommissioning Stroke services.

RESOLVED-

- (a) That the presentations be noted and Simon and Jerry be thanked for their attendance and contributions.

54 BUDGET CONSULTATION 2017-2020

The Committee considered the Pre-Budget Consultation 2017/20 relating to Health & Adult Social Care & Communities, specifically outcome 1 (Our local communities are strong and supportive), outcome 5 (People live well and for longer) and outcome 6 (A responsible effective and efficient organisation) of the Council's Corporate plan.

The Committee questioned the Chief Operating Officer and portfolio holders on each numbered proposal in the budget book relating to the responsibilities covered by the Committee.

RESOLVED- That the report be received and noted.

55 NEW PORTFOLIO HOLDER RESPONSIBILITIES

The list of responsibilities relating to the Communities and Health and Adult Care and Integration Portfolio Holders were submitted for information which now included additional matters relating to the communities.

RESOLVED- That the new Portfolio Responsibilities be noted and received.

56 WORK PROGRAMME

The Committee reviewed the recent revisions to its work programme, taking into account the additional community responsibilities.

RESOLVED –

- (a) That the report be received and noted;
- (b) That an item be included in the work programme to scrutinise the Safer Cheshire East Partnership (SCEP) against its priorities in relation to the Community Safety Partnership Plan and Performance in April 2017.

57 **FORWARD PLAN**

The Committee reviewed the forward plan.

RESOLVED- that the forward plan be received and noted.

The meeting commenced at 10.00 am and concluded at 12.33 pm

Councillor J Saunders (Chairman)