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## **KIRKLEES COUNCIL**

### **HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL**

**Tuesday 19th June 2018**

Present: Councillor Elizabeth Smaje (Chair)  
Councillor Fazila Loonat  
Councillor Alison Munro

Co-optees David Rigby  
Peter Bradshaw

Apologies: Councillor Nell Griffiths  
Councillor Richard Smith  
Councillor Habiban Zaman

**1 Minutes of previous meeting**

That the Minutes of the meetings held on 13 March 2018 and 10 April 2018 be approved as a correct record.

**2 Interests**

Co-optee David Rigby declared an interest in item 5 (Financial Position of the Kirklees Health and Adult Social Care Economy) on the grounds of being a member of Locala.

**3 Admission of the public**

That all items be considered in public session.

**4 Setting the Work Programme for 2018/19**

The Panel welcomed Cathy Scott Cabinet Member for Adults and Independence and Richard Parry Strategic Director for Adults and Health to the meeting.

Mr Parry informed the Panel that he would wish to reflect on the work of the Panel that was undertaken in the previous municipal year and stated that the Adult Social Care Service had particularly appreciated the input from the Panel into its consultation work.

Mr Parry stated that the Panel's Work Programme for 2018/19 was ambitious but it did cover a useful mix of ongoing business, areas that represented potential risk to the authority and strategic forward looks where it would be helpful to have the Panel's views.

Cllr Scott informed that the Panel that her priorities were still being developed and that once complete she would look to come back to present them to the Panel.

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That Cllr Scott outlined the key areas in the Work Programme that she supported which included safeguarding and mental health.

Cllr Smaje presented each item of the work programme and invited comment from the Panel. Feedback from the discussion included:

- Confirmation that the item covering the financial position of the Kirklees Health and Adult Social Care Economy would be an ongoing discussion.
- That the level of involvement from the Panel in relation to the reconfiguration of Hyper Acute Stroke Services across West Yorks would depend on what the proposals looked like.
- The development of a protocol that would cover the role of local scrutiny and the West Yorkshire Scrutiny Committee.
- The importance on maintaining progress of the Integration of Health and Adult Social Care and the delivery of the Care Closer to Home Programme.
- The need to ensure that the Panel had a view on the Integrated Wellness Model.
- To include in the work programme a focus on looking at the ongoing challenge of obtaining information from the coroner's office in relation to suicide prevention.
- A proposal to have a themed meeting to cover mental health services.
- A suggestion that the Lead Member item on All Age Disability and Adult Pathways is looked at as a strategic piece of work and consider it in the context of the adult care offer and how it will be picked up by the Green paper.
- An agreement that the Panel should continue to maintain a focus on Diabetes in Kirklees.
- Confirmation that the refresh of the Kirklees Health and Wellbeing Plan would include a number of key priorities that would help to inform the timing of some areas of the Panel's Work Programme.
- An agreement that the item covering Primary Care in Kirklees could be combined with the discussions on Care Closer to Home.
- An agreement that the Panel should cover the issue of NHS continuing care to include input from the Council and Locals.
- In relation to the work being done on Adults Pathways an offer from Mr Parry to facilitate some panel visits to look at the changes to front door and the changed approach to safeguarding.

### **RESOLVED –**

- 1) That the Cabinet members for Adults and Independence and the Strategic Director for Adults and Health be thanked for attending the meeting.
- 2) That the Panel's Work Programme as presented be agreed subject to taking account of the comments and suggestions put forward by the Panel and attendees.

## **5 Financial Position of the Kirklees Health and Adult Social Care Economy.**

The Panel welcomed representatives from Greater Huddersfield and North Kirklees Clinical Commissioning Groups (CCGs), Calderdale and Huddersfield NHS Foundation Trust (CHFT), Mid Yorkshire Hospitals Trust (MYHT) and Kirklees Council to the meeting.

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Mr Currell outlined the financial position of Greater Huddersfield CCG and stated that the CCG had delivered a planned year end deficit of £1.2m in 2017/18 which was an improvement on the previous year of £5.4m.

Mr Currell informed the Panel that NHS England had set the CCG a target for 2018/19 of a surplus of £1.0m.

Mr Currell stated that despite an ambitious efficiency programme North Kirklees CCG ended 2017/18 with a deficit of £15.4m. The Panel heard that a financial plan had been agreed with NHS England to achieve a reduced deficit in 2018/19 of £11.0m.

Mr Currell outlined how the CCGs worked with other NHS organisations to develop savings plans across Kirklees as a place and also with the two acute hospital trusts.

Mr Matthews outlined details of the financial position of MYHT that included confirmation of a £25.8m deficit in 2017/18 and a planned deficit for 2018/19 of £19.7m which reduced to a net figure of £5.4m when taking account of the Sustainability and Transformation Funding income.

Ms Archer outlined details of the financial position of CHFT that included a reported year end deficit in 2017/18 of £28.4m against a target of £15.9m.

Ms Archer stated that the planned deficit for 2018/19 was £43.1m which assumed a delivery of £18.0m in new savings schemes which when combined with the full year effect of 2017/18 savings represented 5.6% of operating costs.

Ms Archer explained that the Trust was operating under the Aligned Incentive Contract with Calderdale CCG and Greater Huddersfield CCG which meant that they were all operating to achieve the same aims in terms of what was best for patients and what was most efficient for the whole system.

Mr Parry outlined the financial position of Kirklees Adults Social Care and explained that the Council could not set a deficit budget and had to set a balanced budget.

Mr Parry provided details of the savings that the Council had required to make and explained in detail the context to the financial challenges that faced Adults Social Care.

Mr Parry stated that Adults Social Care had a £4m savings target for 2018/19 and a further £3.6m target for 2019/20.

A question and answer session ensued that covered a number of issues that included:

- A question on whether discussions took place between providers in Wakefield, Kirklees and Calderdale to discuss what was needed for Kirklees as a whole.
- An explanation of how the two Kirklees CCGs were working together and that a key aim was to develop place based services in Kirklees.
- Details of the work being done in the West Yorkshire forum that included examples of the collaborative work that had been developed.

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- Clarification that the two CCGs operated on independent financial budgets.
- Confirmation that the CCGs were aware of the need to provide equity of services across Kirklees.
- An explanation of the Aligned Incentive Contract and the differences between the block contract and payment by results.
- A question on whether NHS and the Council monitored the impact that the requirement to make significant savings had on the extent and quality of services.
- An explanation of the quality impact assessment that was undertaken on savings schemes to ensure that there was no adverse impact on the quality of care.
- An overview of the various mechanisms that were used to monitor the ongoing quality of care delivered by the NHS.
- An explanation of the work done in social care to evaluate the impact on services.
- Details of the funding position for social care over the next two years and the budget survey published by the association of directors of adult social care services.
- An explanation of the reason why CHFT would not be eligible for the £14.2 Provider Sustainability Funding in 2018/19 and the implications on borrowing costs.
- The higher costs incurred by the Trust as a result of the current configuration of services that were delivered across two sites.
- A question on how the individual organisations were planning to recover their financial positions.
- An overview of the various cost improvement schemes.
- Details of the approach taken by CHFT to managing its PFI.
- The work being done across the system to tackle delayed discharge.
- Details of the work that was being done to look at the impact of winter across the system.
- The role of the Kirklees Health and Wellbeing Plan in identifying the high impact changes and the implications for the whole system.
- Further details of the quality impact assessment process.
- A query regarding the timeline for taking the report on winter pressures to the health and wellbeing board.
- A question on whether there was any work taking place at a West Yorks level to tackle the issue of agency costs.
- Details of the work being done by the West Yorkshire Association of Acute Trusts on HR, Staff and agency workers.
- Details of the common areas in the CCGs recovery plans and the focus on integrated delivery of care.
- An overview of the work being carried out on the integration agenda.
- An overview of the governance arrangements of the Kirklees Integrated Commissioning Board.

### **RESOLVED –**

- 1) That attendees be thanked for attending the meeting.
- 2) That the Panel's Supporting Officer arrange for the Cost Improvement Plans from NHS partners and the Council to be submitted to the Panel.
- 3) That the Panel would wish to see more discussions taking place across CCG and Acute Trust areas to better support the work of place in Kirklees.
- 4) That the Panel receive a copy of the Kirklees Integrated Commissioning

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Boards work plan.

5) That the Panel would wish to receive a copy of the Winter Pressures report that will be submitted to the Kirklees Health and Wellbeing Board.

### **6 Dates of Meetings for 2018/19**

**RESOLVED** - That the dates of the meetings as circulated are agreed.