

MINUTES of the meeting of Overview and Scrutiny Committee held at The Council Chamber, Brockington, 35 Hafod Road, Hereford on Wednesday 4 July 2012 at 10.30 am

Present: Councillor A Seldon (Chairman)
Councillor JW Millar (Vice Chairman)

Councillors: AM Atkinson, PGH Cutter, PJ Edwards, EPJ Harvey, JW Hope MBE, MAF Hubbard, TM James, Brig P Jones CBE, JLV Kenyon, R Preece and PJ Watts

In attendance: Councillors RI Matthews, PM Morgan, NP Nenadich and PD Price

Officers: D Taylor (Deputy Chief Executive), Dr S Aitken (Assistant Director of Public Health (Health Improvement)), C Baird (Assistant Director People's Services Commissioning), S Burgess (Head of Transportation and Access), A Carswell (Interim Programme Director: Adult social Care), Y Clowsley (Head of Planning), M Emery (Head of Business Support), Dr D Nicholson (Head of Strategic Planning and Regeneration), P James (Governance Services) and D Penrose (Governance Services).

9. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors PL Bettington, RC Hunt and SJ Robertson.

10. NAMED SUBSTITUTES

Councillor PJ Edwards for Councillor SJ Robertson and Councillor J Hope for Councillor PL Bettington.

11. DECLARATIONS OF INTEREST

Agenda Item 11. Task and Finish Group Reports - Executive Responses.
Councillor PGH Cutter, Personal, as Chairman of the Planning Committee.

Agenda Item 11. Task and Finish Group Reports - Executive Responses.
Councillor PJ Edwards, Personal, Member of the Management Steering Group for Belmont Country Park.

12. MINUTES

RESOLVED: That the Minutes of the Meeting held on 8 June 2012 be confirmed as a correct record and signed by the Chairman.

13. SUGGESTIONS FROM MEMBERS OF THE PUBLIC ON ISSUES FOR FUTURE SCRUTINY

There were no suggestions for future scrutiny.

14. QUESTIONS FROM THE PUBLIC

The Committee noted that a number of questions had been submitted by the public, mainly relating to Agenda Item 9. These were circulated at the meeting together with written answers, where available. It was noted that the full schedule of questions and answers would be forwarded to the members and contributors in due course.

The Chairman thanked the contributors for submitting their questions.

15. OVERVIEW OF HEALTH CARE IN HEREFORDSHIRE

The Committee considered the future of healthcare in Herefordshire as part of a discussion with the Wye Valley NHS Trust, the Herefordshire Clinical Commissioning Group (HCCG) and the West Mercia PCT Cluster. The Chairman welcomed Ms C Gritzner, Chief Operating Officer Designate and Interim Accountable Officer, HCCG, Mr P Maubach, Director of Commissioning Developments West Mercia PCT Cluster and Mr H Oddy, Acting Chief Executive, Wye Valley NHS Trust.

Ms Gritzner provided a presentation, and highlighted the following areas:

- That the Governance structure for the HCCG as outlined for the Committee in the presentation had been agreed, and the organisational structure had been sent out for consultation with staff. A report would be submitted to the Board in August.
- That the HCCG had slipped from Wave 2 into Wave 3 of the authorisation application process, the legal process through which CCGs were approved as the new local statutory NHS commissioning bodies. The application would be submitted in September and assessed by an independent panel from outside the region.
- That the objectives, vision and plan of HCCG had been endorsed by the Health and Wellbeing Board, and the Joint Strategic Needs Assessment had been embedded into the planning process.

Mr Maubach provided a presentation on the structure of the National Commissioning Board (NCB). He said that there would be 8 local area teams within the Midlands and East Cluster, and they would have the same core functions around CCG development, emergency planning, quality and safety and system oversight. All Teams would have responsibility for GP, dental, pharmacy and optical services. Local Authority Directors were currently being recruited. There would be a West Midlands Cluster of 4 PCTs, and transitional risks as the present Cluster was split in two.

- In answer to a question, he said that the NCB would have responsibility for 20% of the commissioning spend, whilst the CCGs would be responsible for a total of 80% of spend. The local Health and Wellbeing Boards and Councils would be expected to assume the bulk of local arrangements.
- In reply to a question regarding the top down nature of the governance structure, he said that it would be necessary to secure resources in order to ensure service delivery, and that the sustainable nature of services would need to be addressed. There would be a more top down approach should the local systems not prove to be sustainable, but the onus was on local determination.
- In response to concerns that the organisational structure was too top heavy and therefore costly, Mr Maubach said that the logistical structure of the NHS Midlands and East Clinical Commissioning Board had been based on the number of CCGs and Health and Wellbeing Boards that would be under its control in

order to provide each region with a consistent number of organisations to work with. The structure had been designed to reduce bureaucracy, and was working with substantially reduced management overheads. Ms Gritzner added that the Commissioning Support Organisation (CSO) that had been appointed by Herefordshire/Shropshire/Telford & Wrekin CCGs had identified Staffordshire as the preferred supplier, and they would work with Hoople and the Council. The decision was not aligned to the Cluster structure, and was specific to those CCGs.

- In reply to concerns over management costs, Mr Maubach said that these figures would be made available to Members.
- In reply to a Member's question regarding how savings would be made by Staffordshire and Hoople, Ms Gritzner said that Herefordshire was leading the country by asking its CSO to work with another organisation. Further savings would be made around prescription service review, and the use of different mechanisms that were in place to achieve the necessary changes.

Mr Oddy provided a presentation on the Wye Valley NHS Trust. He reported that Price Waterhouse Coopers had identified £5.5m of savings within the Trust, but considered it to be a lean organisation. During his presentation, Mr Oddy highlighted the following issues:

- That there was a gap of £15m in the income and expenditure plans for 2012/13.
- Discussions were in hand with the West Mercia PCT cluster and the Strategic Health Authority regarding non-recurrent funding of £9.5m in 2012/13. Financial plans indicated a requirement for further non-recurrent support of £9.2m in 2013/14. Future years planning assumptions required savings of 5% per annum which equated to £8m per annum for the Trust.
- That whilst the Trust could be financially viable by 2014/15, changes to its structure were inevitable.
- In reply to a question from a Member regarding the impact the Trust's financial situation would have on the health and social care transformation programme, Mr Oddy went on to say that the proposed changes would be undertaken more slowly. It was in the interest of both the Trust and the Herefordshire Clinical Commissioning Group to reduce hospital admissions and to increase the role of the Neighbourhood Teams to provide care in the home rather than in high cost facilities. The reduction of patient length of stay was also important in order to reduce the pressure on beds in the hospital.
- In reply to a further question, Mr Oddy went on to say that the Trust was funded by an early example of a Private Finance Initiative, and was working to ensure that as much value as possible was extracted from the contract. A review by KPMG had found that the PFI Contract was not a major factor in the current financial difficulties facing the Trust

RESOLVED:

That:

- a) the West Mercia PCT Cluster, the Wye Valley NHS Trust and the Herefordshire Clinical Commissioning Group should be invited to attend the Committee in order to ensure that common issues were debated at the same time and that each would have a chance to respond to matters of concern;**

- b) an all Members Seminar be arranged to clarify the position in relation to Herefordshire's Healthcare provision and specifically the progress of the Herefordshire Clinical Commissioning Board and the changes to the Midlands and East Strategic Health Authority; and;
- c) West Mercia PCT Cluster performance data should be monitored by the Committee on a quarterly basis and that the Committee should regularly assess the impact that changes would have on the population

The Committee adjourned for a 10 minute break at 12.36.

16. TASK & FINISH GROUP REPORT - REVIEW OF WYE VALLEY NHS TRUST (STROKE & TRAUMA SERVICES AND THE DELAYED TRANSFER OF CARE)

The Committee considered the findings arising from the Task & Finish Review into the Wye Valley NHS Trust (Stroke & Trauma Services and delayed transfer of care).

The Vice-Chairman reported that the Group had concluded that the potential benefit of the further integration of the Adaptions Team into the Total Patient Care Pathway should be supported, as this was a logical adjunct to the Integrated Care Pathway.

The Group also recommended that the rationale for the Wye Valley NHS Trust's bid to the West Mercia PCT Cluster for funding from the Strategic Health Authority's Reserve Fund to invest in further work to improve the flow from acute care to home care be supported.

RESOLVED: That the report be noted and referred to the Wye Valley NHS Trust.

17. CONSULTATION IN RESPECT OF THE LOCAL DEVELOPMENT FRAMEWORK AND LOCAL TRANSPORT PLAN

The Committee considered a report outlining how and when it should be consulted in respect of the programmes for adopting the Local Development Framework (LDF) and Local Transport Plan (LTP) as set out in the report to Cabinet of 12 July 2012. It was noted that a number of public questions had been received for this item, and would be submitted to Officers for a written response.

The Head of Transportation and Access and the Head of Strategic Planning and Regeneration presented the report and outlined the respective timetables for consultation on the LTP and LDF. In view of the timetable changes proposed, work should proceed on an LTP covering the period to 2014/15 with key long term linkages between the two strategies being maintained.

During the discussion, the following principal points were raised:

- That whilst the possibility of an Eastern Link Road had been raised to link Holme Lacey Road and Ledbury Road, the feasibility study had yet to be completed
- That whilst there were differences of opinion regarding the summary of results of the Revised Preferred Option consultation undertaken in the Autumn of 2011, the results were a matter of public record as part of the consultation process.
- That the LTP and LDF were of such weight, that a broader discussion was required, perhaps as a series of one off meetings that would allow for a wide ranging discussion of the issues.

- A Member suggested that the Committee should be advised when each area of evidence was nearing completion and should then be briefed on its contents. He asked that non-technical summaries to help explain the evidence base should also be produced as a matter of course in order to help the Committee ensure that the evidence base was adequate. The evidence base should include a refreshed Community Strategy, as the LDF was required to have this as part of the National Planning Policy Framework (NPPF).
- He went on to say that under the NPPF, paragraph 49 of the report would allow any developers to put forward plans for development on greenfield rather than brownfield sites. He suggested that identified brownfield sites should be given development priority over greenfield sites for the first five years of the land bank. This would provide protection for the first five years in order to allow greenfield sites to be identified in an appropriate manner.

RESOLVED:

That Cabinet be recommended that:

- a) subject to outstanding issues being resolved, the proposed scale and distribution of development and strategic housing, employment and infrastructure proposals, as set out in paragraph 49 of the Draft report to Cabinet of the 12 July 2012, should form the basis of the consultation process.**
- b) as a result of the possibility that a Western Relief Road should not come to fruition for planning or cost reasons, it would be inappropriate to approve large scale developments for inclusion within the draft Core Strategy until the necessary infrastructure had been similarly approved;**
- c) under Paragraph 18 of the Draft report to Cabinet, the Committee requested that a copy of the package of necessary infrastructure improvements should be made available;**
- d) under Paragraph 24 of the Draft report to Cabinet, the Committee requested a copy of the commissioning document to Amey to assess the environmental and amenity issues associated with the many changes which had taken place directly adjacent to the old Southern bypass route in recent years;**
- e) under Paragraph 26 of the Draft report to Cabinet, the Committee requested that the staged assessments should be made publicly available;**
- f) under Paragraph 49 of the Draft report to Cabinet, the Committee requested that consideration should be given to an alternative plan for the 2,300 proposed houses in Leominster if water phosphate levels could not be satisfactorily improved;**
- g) under Paragraph 49 of the Draft report to Cabinet, the Committee strongly recommends that Cabinet should include identified brownfield sites for inclusion in the Draft Core Strategy and agrees that these sites should be given priority over greenfield sites for the first five years of the Land Bank Supply; and**
- h) under Paragraph 53 of the Draft report to Cabinet, the Committee requested that Cabinet should take note of where community consultation has noted significant negative community impact.**

18. STRATEGIC DELIVERY PLAN FOR TRANSFORMING ADULT SERVICES 2012-2015

The Committee noted the final draft of the Strategic Delivery Plan for Transforming Adult Services 2012-2015. The Cabinet Support Member (Adult Social Care) introduced the report and highlighted the following principal areas:

- a) That the Strategic Delivery Plan had been developed to take account of national policy direction, the demographic profile of Herefordshire and to build on the vision of encouraging people to take responsibility for their own lives and access formal health and social care services only when necessary. It provided a single document setting out the overall approach for adults over the next three years and contributed to the Joint Delivery Plan, the strategic aims of the council and its partners, and was a key part of achieving a balanced budget position.
- b) All Councils and Health communities were facing significant challenges due to reduced budgets and increased demographics. There was a need to have sustainable systems and services and which offered value for money. This was a national as well as local issue and the strategic delivery plan set out a transformation programme over three years;
- c) Various Council services, NHS Herefordshire, Herefordshire Clinical Commissioning Group, Wye Valley NHS Trust and 2gether Foundation Trust had been involved in the development of the plan, which had been approved by the Health and Wellbeing Board.

In the ensuing discussion the following principal points were made:

- The Assistant Director People's Services Commissioning said that an Adult Social Care Forum would be set up for the Health and Wellbeing Board, and that a progress report on the Delivery Plan would be provided to Cabinet on an annual basis. It was important that the Plan was delivered through the Localities, and their active engagement was being sought.
- The Cabinet Support Member said that whilst the Locality System was not perfect, he had visited three Locality Teams, and had been impressed by the commitment they had shown. Problems that had existed between the Panel and the Locality Teams were being worked through.
- The Assistant Director People's Services Commissioning said that the initial issues that had faced the Service with the introduction of the Framework software were being sorted out, and the process was being slimmed down. The Agresso software had been introduced in April 2011, and work was in hand to further reduce the complexity of the system.
- A Member said that the needs of full time carers should be focussed on. He expressed concern at the cost of the service, and suggested that greater efficiencies should be possible using technology based care.
- A Member asked how this Plan would help to deliver the £8m of savings that were required, and asked that a report be provided that gave clarity to the performance and progress of the transformation programme.

RESOLVED:

That:

- a) as part of the Delivery Plan there should be sufficient support for full time carers in order to ensure that they were in a position to continue their caring role effectively;
- b) a report be brought to the next meeting on the progress that has been made and the benefits that have been accrued as a result of the integration of the Frameworki and Agresso software systems since April 2011.
- c) a schedule of performance reports outlining the savings that were being achieved through the Strategic Plan for Delivering Adult Services be brought to the Committee on a quarterly basis.
- d) an emphasis should be put on rolling out the lessons in healthy living received by school children in Herefordshire in order to promote healthy eating in older people.

The Committee adjourned at 13.34 for a lunch break, and resumed at 14.03.

19. TASK AND FINISH GROUP REPORTS - EXECUTIVE RESPONSES

The Committee noted a report to consider the Executive's response to the recommendations made to it in the following Task and Finish Group Scrutiny Reviews: Adult Safeguarding in Herefordshire, Planning System Review – Development Control and the Operation of the Constitution, Council Procurement Policy and Local Business and Local Employment, Income and Charging and Tourist and Temporary Event Signage.

RESOLVED:

That:

- (a) the Executive's response to the findings of the reviews be noted; and;
- (b) a further report on progress in response to the Review be made after six months with consideration then being given to the need for any further reports to be made.

20. OVERVIEW AND SCRUTINY WORK PROGRAMME

The Committee considered its Work Programme. During the discussion, the following points were made:

- That, in future, the Clinical Commissioning Group, the West Mercia Cluster and the Wye Valley NHS Trust should be invited to attend the Committee at the same time to ensure that common issues were debated and each would have a chance to respond to matters of concern.
- That the Review of GPs and Out of Hours Services should be undertaken during Autumn 2012.
- Information was sought regarding the latest position concerning:
 - The development of Park and Ride sites particularly as the new Local Transport Plan had been delayed.

- Any current developments concerning cycle way routes – particularly in view of the ‘Destination Hereford’ package of integrated transport improvements.
- The position regarding the Connect2 Greenway project. How the Greenway is to integrate with the Enterprise Zone. Will there be a car park or a Park and Ride site at the Zone end of the route and was this in the original design.

The Committee agreed that the above information be provided in a briefing note to the Committee.

- Following the increase in academies and various education based services being commissioned through service level agreements, questions were asked regarding the level of activity within the education section of the People’s Services Directorate. The Committee agreed that the above information be provided in a briefing note to the Committee.
- The Committee agreed that consideration of the Root & Branch reviews needed to be scheduled appropriately into the work programme.
- As requested earlier in Minute No.18, a report should be scheduled into the work programme regarding the progress and benefits accrued following the integration of the Frameworki and Agresso software systems.
- The Committee noted that the Vice-Chairman was to attend a meeting to discuss Healthwatch and he would be focusing on the Centre for Public Scrutiny’s ‘10 Questions to Ask’. If there were any issues of concern, these would be reported back to Committee.

RESOLVED: That the two briefing notes be requested and the work programme be amended to reflect the above.

The meeting ended at 15.20

CHAIRMAN