JOINT OVERVIEW AND SCRUTINY COMMITTEE - 30th AUGUST 2017

MINUTES

Present: Solihull: Cllrs Mrs G Sleigh, (Chairman), A Rebeiro, A Mackenzie, M Hewings, F Nash, K Macnaugton Birmingham: Cllr J Cotton, A Hardie,

Witnesses: Paul Jennings, Interim Chief Executive, Birmingham and Solihull CCGs Rhod Mitchell, Chair, Birmingham and Solihull Health Commissioning Board
Paul Sheriff, Director of Operations, Cross City CCG
Gemma Cauldicott, Senior Communication and Engagement Manager, Cross-City CCG
Natalie Penrose, Head of Performance, NHS England
John Short, Chief Executive, Birmingham and Solihull Mental Health
Foundation Trust (BSMHFT)
Sue Hartley, Director of Nursing, BSMHFT
Elaine Murrey, Lead Officer, Solar

1. APOLOGIES

Apologies were received from Cllr M McCarthy (Solihull) and Cllrs R Pocock, S Jevon and M Brown (Birmingham)

2. DECLARATIONS OF PRECUNIARY / CONFLICTS OF INTEREST

Cllr A Rebeiro declared an interest in agenda item 6 as he was a stakeholder governor at the Birmingham and Solihull Mental Health Trust.

3. QUESTIONS AND DEPUTATIONS

The Scrutiny Officer advised that there were no questions or deputations received in accordance with Solihull MBC's Standing Orders.

4. MINUTES -27^{th} JULY 2017

The Committee considered the minutes of the last meeting that was held on Thursday 27th July 2017

RESOLVED

That the minutes of the Joint Scrutiny Committee meetings held on 27th July were approved as accurate record of the meeting.

5. OUTCOME OF CONSULTATION ON THE PROPOSED MERGER BETWEEN BIRMINGHAM AND SOLIHULL CCGs

In introducing the agenda item, the Chairman explained the background and context to this agenda item and the fact that the Scrutiny Board had been informed about this consultation on the future of Birmingham and Solihull CCGs

at the start of the Municipal Year. The Scrutiny Board had provided quite a lot of challenge on ensuring that consultation was transparent, relevant and meaningful. The Chairman advised that the Board would have the opportunity to scrutinize the feedback/outcomes of the consultation at this meeting.

The Interim Chief Executive introduced himself to the Scrutiny Committee and outlined his professional background. He highlighted that the principal intention behind the consultation was to provide clarity and transparency in obtaining the views of the public and a wide range of stakeholders on the three options that have been put forward. He also advised that the Consultation Institute had provided advice on the way the CCG had carried out the consultation process. Key messages from his presentation were as follows;

- Over a six-week period from 10th July to 18th August, the consultation has reached approximately 44,000 recipients from wide-ranging backgrounds and diverse communities across Birmingham and Solihull.
- The feedback showed that option 1 federation of the existing CCGs was the least favorable, option 2, a CCG for Birmingham and a CCG for Solihull was more finely balanced and option 3, a full-scale merger between Birmingham and Solihull CCGs was the most favorable and received the majority of support.
- It was highlighted that the reasons why people had preferred option 3 was because this option would deliver more effective and sustainable systemwide change and that there was a possibility to maximize the commissioning potential across the designated Birmingham and Solihull Sustainability and Transformation Partnership (STP) footprint. Within this structure and framework, there was scope for identifiable 'places' to exist such as Solihull who had a distinct identity through having its own local authority, governance arrangements and work of Solihull Together.
- It was indicated that the discussions about West Birmingham position had been going well and in recent weeks, it had resulted in decision from Sandwell and West Birmingham to make all funding for the West Birmingham area available to Birmingham CCGs, so they could commission for the whole of Birmingham and Solihull. The aim was to maintain equality of access and consistency but at the same time, responsiveness to the diversity of local need.
- In terms of next steps, the outcomes of the consultation would be presented to the Health Commissioning Board on 5th September and the application for a full scale merger would be made by NHS England in late September/early October.

The Board was asked to comment on the consultation and its outcomes.

The Chairman and Members of the Scrutiny Committee inquired further about how the proposed merger would impact the finances and funding arrangements for the CCGs across Birmingham and Solihull and how would a newly merged organisation ensure that identifiable places such as Solihull continued to receive a balanced share of the resources. In response, the Interim Chief Executive indicated that the QUIP efficiency process would be applied across Birmingham and Solihull to ensure that there were appropriate levels of funding being channeled in the right areas taking into consideration the analysis undertaken in the Joint Strategic Needs Assessment (JNSA) for both the Birmingham and Solihull areas. The current deficit position in Solihull would be written off and the newly merged organisation would operate on a surplus with a clear action plan on managing and balancing resources. There would be a single financial pot across Birmingham and Solihull and the focus would be on making services fair and accessible but also taking account of different needs across the different areas. The Interim Chief Executive undertook to make available a recently published due diligence report produced by KPMG on financial challenges facing Solihull CCG to the Scrutiny Committee.

A number of Members from Solihull expressed concern due to the nature of the consultation and engagement exercise, in particular how the feedback received by Solihull residents would be resolved and what lessons from the process would be learnt. Members were concerned on whether this was true Public Consultation and whether enough had been done to explain what the merger may mean in practise to patients/carers/service-users. A Member also commented that this was a stakeholder consultation rather than a pure Public consultation. The results showed that this was stakeholders rather than members of the public who had taken the time to respond to this consultation. In response, the Interim Chief Executive indicated that it was not the best point in the year to carry out public consultation but they were constrained by the timescales. There had been more respondents from Solihull residents than Birmingham residents and there were some obvious lessons that could be learnt from this experience. The Communications and Engagement Manager highlighted that for the size, scale and timescales of this consultation, receiving 400 individual responses was seen as good response rate.

Members from Birmingham felt assured by the process had been taken and by the proposed direction for the merger but they felt that there needed to be greater clarify on how funding for 'place-based' areas would be managed and monitored. A member also enquired further about the governance arrangements and how the closer relationship with Sandwell and West Birmingham CCG would work in practice. In response, it was advised that there would be a clear plan on how place-shaping and aligned resources would work in practice, shaped by information in the JSNA. Members acknowledged that the impending merger of UHB and HoEFT would mean that a stronger commissioning voice across Birmingham and Solihull was imperative.

A Member inquired further about governance and how place-based GPs would be represented on merged CCG Board. In response, it was highlighted that there would be appropriate and equal representation from GPs on the merged Birmingham and Solihull Health CCG Board so that the voices of all the different parties/places across the footprint could be heard and valued.

In response to a question about what had tipped the balance in favor of option 3, as there were quite a number of people opposed to it and there were significant number of people who had a preference for Option 2. It was highlighted that it would made more sense to have a single financial entity when dealing with larger provider and there was the potential to make efficiencies to reduce duplication in back office function. He also reassured the Committee that

individual arrangements / relationships with the two local authorities, Birmingham City Council and Solihull MBC would be maintained, including adhering to their separate Section 75 agreements and distinctive work-streams, i.e. Solihull Together. Further work would also take place with the incoming West Midlands Combined Authority (WMCA) as part of taking forward the Health and Wellbeing work-stream.

The representative from NHS England advised that the applications for a merger of CCGs could be a long and complex process that would have to undergo a number of Assurance Tests. They had initially assessed the current bid being put forward by Birmingham and Solihull at a recent 'confirm and challenge' session. It was indicated that they required further, more detailed information on how the commissioning intentions across a wider area with differing needs would work in practice and a detailed transitions plan and more clarity about West Birmingham is needed. They had felt that in comparison with other consultation carried out across the country on this subject matter; this consultation had been relatively successful.

Members of the Committee discussed the various options and whether they were supportive of option 3. The majority of the Committee highlighted that they would be satisfied to see option 3 to be progressed but that it was essential that more detail information on how key issues highlighted would work in practice. One/two members from Solihull made reference to the consultation feedback and response from Solihull residents and remained unconvinced that the case for option 3 had been sufficiently made. However, one member also stated that Solihull Health and Wellbeing Board had endorsed option 3 as well.

RESOLVED

(I). The Scrutiny Committee noted the outcome of the consultation and felt that lessons needed to be learnt in engaging with the public on complex issues.

(ii). The Scrutiny Committee were partly reassured by taking forward option 3 but felt more information on the following was imperative

a) a better understanding on how the financial allocations across the system would work in practice with the different areas.
b) a better understanding of how the West Birmingham finances will form part of Birmingham and Solihull Commissioning intentions
c) a clarification on how a possible merged organisation will work with West Midlands Combined Authority (WMCA).

(ii). For the Scrutiny Committee to receive more detailed information at a future joint meeting in Autumn 2017.

6. BIRMINGHAM AND SOLIHULL MENTAL HEALTH FOUNDATION TRUST – OUTCOMES OF CQC INSPECTION

The Scrutiny Board received a presentation from the Chief Executive of BSMHFT on the outcomes of the recent CQC Inspection that had been undertaken at the Trust. He indicated that the Trust had been downgraded from a 'good' to 'requires improvement' rating based on the old CQC inspection framework as there was a new inspection framework currently being developed. The inspection did not cover all areas and specialist areas such as neuropsychiatry were not included as part of the inspection. Some of the key messages from his presentation were as follows;

- There was a disappointment amongst the Trust Board on the ratings result and indicated that this was currently being contested. It was felt that CQC had identified compliance issues and it was right for them to criticize the Trust on failure to deliver upon these and action has already taken place to address and resolve these compliance issues.
- For some areas the Trust did not agree with all of findings made by CQC. It was felt that searches had to take place when service users were re-entering a mental health acute facility. Over the past 6 months, 148 weapons had been recovered and there was a need to have a consistent approach. Furthermore, the Trust had felt that they had been judged on issues that were beyond their control. They had had to make cuts/savings in response to cuts in funding from commissioners and a number of re-organisations had had an adverse effect on staff.
- In respect of Solihull, the 'inadequate' judgement for Solar seemed very unfair particularly as a lot of work had been done to change this mode of service when they took the over running service from HoEFT. They had been hampered by losing experienced consultant psychiatrists. There was a persistent effort to develop community hubs and the closure of the Bruce Burns Unit had not seen a rise on Solihull patients being placed in out of Borough placements.

The Scrutiny Board was asked to comment on this report.

The Members made a number of observations/comments and asked a number of questions including;

- More information about the number of Solihull patients that were placed out of Borough and the nature of extra beds that would be made available across Birmingham and Solihull.
- Whether the CQC rating was justified and what further action might need to be taken.
- The nature of the connectivity with West Midlands Combined Authority work.
- An explanation of why staff had felt undervalued.
- An explanation for the high number of prone restraint.

In response, representatives from BSMHFT provided the following information.

- There were seven Solihull patients that have been placed out of Borough but work was ongoing with Regional Merit colleagues to ensure that if beds are needed out of the Borough, they can be accommodated in the West Midlands region. The Trust has been asked to take back services that are currently being provided by Forward Thinking Birmingham (FTB) because this provider is admitting too many patients. As a result, two more wards would become available at existing units such as Arden Lee.
- It was acknowledged it was right for CQC to question and criticize the Trust on straight-forward compliance and gap in service issues which were within the Trust remit as part of their regulatory role. It was seen that the Trust had an opportunity to learn and improve and there was an open and transparent

dialogue with the staff about these results. However, the Trust's own regulatory NHS Improvement was not going to take any further action as a result of the CQC Inspection rating.

- A lot of work was ongoing on a national / regional level, such as through Norman Lamb work with the West Midlands Combined Authority. However, the focus was on a number of distinct areas such as suicide prevention and how to address wellbeing and employment issues.
- Staff being valued within the Solar service was due to the challenges in recruiting permanent consultant psychiatrists and due to national shortages in this area. There was a regular dialogue with the staff and their ideas suggested were considered and in many cases, taken on board. Having to make redundancies due to funding cuts from commissioners had effect on members of staff who were already working in a very difficult climate.
- It was acknowledged that there was a significant number of prone restraints being used across the Trust as there was the largest number of medium sized secure units across the Borough and a consistent approach needed to be adopted. Although, it was felt that the numbers did need to fall.

Healthwatch Birmingham commented on the fact that their work with BSMHFT on the issue of quality of care plans had been positive and they look forward to continuing to work with them. Members acknowledged this work but inquired further about the work with the newly formed Healthwatch Solihull. In response, it was advised that not a lot of work had taken place with Healthwatch Solihull todate but there was a scope to work with them on getting the service-user feedback and monitoring developments within the Solar service. It was advised that Solihull Scrutiny would be looking at impact and effectiveness of Solar in Winter 2017/2018.

The Chairman summarised the debate by asking whether there was anything that the Scrutiny Board could do to support the work they were doing. The Chief Executive valued the opportunity to come and engage with Councillors about their current issues and improvement journey and wished to continue to do this in the year ahead.

RESOLVED

(I). The Scrutiny Committee noted the CQC Inspection findings and wished to keep a watching briefing on the Trust's improvement journey.
(ii), For Scrutiny Committee to contact Healthwatch Solihull and encourage it to do some work with BSMHFT on monitoring the impact of Solar and for this matter to be considered at a future meeting of Solihull Health and Adult Social Care Scrutiny Board.

7. NEXT MEETING

The Chair advised that the next meeting was likely to be held in Autumn 2017 and key topics to be explored would be as following

- HoEFT / UHB Oversight of merger
- STP oversight of progress

RESOLVED

(I) That the Scrutiny Officers across Birmingham and Solihull make arrangements for the next meeting.

The meeting finished at 8.15pm