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Date: Wednesday, 10 October 2018

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Dear Member

OVERVIEW AND SCRUTINY BOARD - WEDNESDAY, 10 OCTOBER 2018

I am now able to enclose, for consideration at the Wednesday, 10 October 2018 meeting of the Overview and Scrutiny Board, the following reports that were unavailable when the agenda was printed.

Agenda No	Item	Page
6.	Notice of Motion - Clinical Commissioning Group - Overview and Scrutiny (Overview and Scrutiny Decision)	(Pages 35 - 36)

Yours sincerely

Kate Spencer
Clerk

Overview and Scrutiny

This briefing note has been prepared in response to the Notice of Motion.

Q1: The lack of any positive outcomes in terms of improved services for local residents:

It remains our ambition to ensure that Torbay residents continue to benefit from integrated person-centred care, and we focus our efforts on working together with partners and communities to focus on improving health and wellbeing outcomes for local residents.

We have been able to demonstrate over many years that integration of delivery benefits people and Torbay has a long history of this. South Devon and Torbay CCG has worked closely with Torbay Council, Torbay and South Devon NHS FT, GPs, other providers, local communities and voluntary sector, members, partners and stakeholders to deliver improved outcomes. While there is more work to do and particular areas remain under pressure, we continue to address these and we feel strongly that our proposals to create a single health commissioning voice as part of a wider integrated care system in Devon will help improve services for local residents.

For example, working as part of a wider network of provision in Devon has improved resilience and performance in local services – some hospital services provided at Torbay hospital which had previously struggled to recruit key staff have been able to continue to be provided locally by partnering with other hospitals. Local residents now continue to access services locally that otherwise may not have been sustainable. Further specific examples include services such as access to Dermatology and Child and Adult Mental Health Services, where local residents will benefit from being part of a single health commissioning voice.

Q2: The lack of clarity on how a new merged body would be accountable to local people

Clinical Commissioning Groups are governed by a constitution, the framework for which has been recently nationally refreshed. This is within existing national legislation, accountability and governance frameworks. The relationship with Torbay Health and Wellbeing board will continue and be built on the strong local relationships and infrastructure we have benefited from.

We will continue to have an obligation for patient and public engagement and will ensure that this is within our governance arrangements, and indeed at the heart of our work as we continue to strengthen and shape our future models of care and integration for the population we serve.

While a merged CCG would have responsibility for the health budget for a wider Devon population, this will be built on strong local voice – it is clear that how care is integrated in neighbourhoods and towns and we work with the local authorities at place are the foundations of system wide working. This would ensure we stay close to local people and GPs, and continue to work in partnership with each of the local authorities, while building on the benefits we've already seen from working together over the last two years.

Q3: Concerns about Torbay's influence in a larger body being watered down

Maintaining local voice in a wider system is very important to us. Our experiences tell us that working together and integrating care at a very local level is important because it means that we can be responsive to local needs, meeting local and national priorities, ensuring that local voices are heard in developing ways of working and caring for people, leading to strong ownership of outcomes and good use of local assets and resources.

NHS organisations involved:

Northern, Eastern and Western Devon Clinical Commissioning Group
South Devon and Torbay Clinical Commissioning Group

It is our ambition and intent that the benefits that we have reaped from working together locally, such as delivering innovative changes at pace to enhance care for the local population, are supported and enhanced with the advantages of being part of a wider Devon system and the resilience, sharing of good practice, and economies of scale that this has to offer

Q4: Concerns that this decision could be made behind closed doors without public consultation

The two CCGs have been sharing our experiences of working more closely together in many public meetings for the last year, such as governing body meetings, discussions with our health and wellbeing boards and scrutiny meetings, as well as our most recent Annual General Meeting that the two CCGs held together. It is also reflected in the annual report(s) for 2017/18.

More recently, proposals to merge the two CCGs have been discussed in our public Governing Body meetings and the papers and minutes are publicly available, as well as with health and wellbeing boards and scrutiny meetings. The CCGs' regulators, NHS England, have confirmed that the merger process does not automatically trigger a formal requirement for full large-scale formal public consultation. This is primarily because the process relates to management change and is not a change in care provision that would have implications for service delivery affecting public and patients. However, we would always want to keep our patients and public informed, and listen and respond to any issues arising, and have been doing so and will continue to. We shall ensure we continue to share information with the public and our key stakeholders, and can draw upon the well-developed network of engagement and participation groups in our area.

Q5: Questions over whether funds currently earmarked for Torbay might be subsumed into a wider body.

Maintaining a strong local voice in decision making is important to us and to our GP members. We believe the changes we are proposing will be hugely beneficial for South Devon and Torbay residents, and will attract more funding locally.

We have already demonstrated significant savings from working together more closely over the last year (approx. £4m). Additionally:

- A single CCG would allow further efficiency savings – for example in reduced back office and board costs – amounting to an estimated additional £1 million a year.
- Financial modelling suggests that healthcare funding for our residents will improve from being a single CCG; becoming a single health commissioner could bring us an extra £1.6 million a year across the wider footprint compared to staying separate. Particularly, for South Devon and Torbay residents, remaining as a separate CCG will mean lower allocation of national funding next year than as a merged CCG.
- That is money that we cannot afford to lose as it is additional resources we would be able to spend on frontline services and improving our population's health and wellbeing

The proposed changes are time critical as we could lose out on vital investment next year and beyond. As well as attracting more investment, significant further savings could be delivered as a single CCG, freeing up more money for frontline care and support locally.

END