

**Minutes of: JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE
FOR PENNINE CARE NHS FOUNDATION TRUST**

Date of Meeting: 30 November 2017

Present: Councillor Councillor Colin McClaren (in the Chair)
Councillors P Adams and R Walker

**Also in
attendance:**

Public Attendance: No members of the public were present at the meeting.

Apologies for Absence: Councillor , Councillor Gordon, Councillor J Grimshaw,
Councillor Howard, Murphy, Peet and Price

15 DECLARATIONS OF INTEREST

There were no declarations of interest

16 PUBLIC QUESTIONS

There were no questions from members of the public

17 MINUTES

It was agreed:

The minutes of the meeting held on the 30th September 2017 be approved as a correct record.

18 UPDATE FROM CLINICAL COMMISSIONERS

Stuart North, Chief Operating Officer, Bury CCG attended the meeting to provide a further update in respect of the work undertaken with colleagues from Greater Manchester to provide assistance to the Pennine Care Trust. His verbal update contained the following information:

- Involvement of the CCG in addressing the shortcomings highlighted in the CQC report
- Additional funding for Informatics and IT
- Re-tendering of Community Services
- Financial Deficit at the Pennine Care NHS Foundation Trust
- Future sustainability of the Trust

The Chief Operating Officer reported that the CCGs within the Pennine Care footprint had been fully involved with the CQC action plan. Their involvement has included, joint visits into service areas, deep dives in respect of individual service areas as well as meetings with partners including NHS Improvement and GMHSCP.

The Chief Operating Officer reported that Bury CCG have no intention of market testing or re-tendering any service whilst the Local Care Organisation (LCO) is being developed.

The Chief Operating Officer reported that there is a financial deficit of £500 million across Greater Manchester, £1.8 million support funding has been shared out across the NHS. Pennine Care needs a sustainable model going forward and there may be some difficult decisions in respect of services going forward.

The Chief Operating Officer reported that following GM Devolution the emphasis will be on ensuring that health and social care services are integrated, with integrated strategic commissioning specific to Local Authority need.

Those present were invited to ask questions and the following issues were raised:

Responding to a question with regards to the use out of Borough placements, the Chief Operating Officer reported that Pennine Care is currently reviewing its use of these placements. The majority of these placements will be close to the patients home; for example a Bury resident placed at Prestwich hospital will be categorised as an out of Borough placement, because Prestwich hospital is managed by the Greater Manchester Mental Health Trust. The re-worked proposals will also look to address issues raised in respect of mixed sex accommodation.

The Chief Operating Officer, responding to a Member's question, confirmed that it will be necessary for the Commissioners and the Trust to make difficult decisions with regards to service provision going forward including in which Boroughs some of these services are provided. The Executive Director of Finance and Deputy Chief Executive reported that the organisation cannot compromise on clinical quality, the key is to define what the clinical model is, what capacity can be provided, with the finances available.

The Chief Operating Officer reported that the majority of patients with long term conditions will experience mental health problems. In the vast majority of instances the GP will treat the medical but not the mental health condition. Work is underway across GM as part of the wider social care reform agenda to emphasis the benefit of assessing the emotional wellbeing of a patient in particular those suffering from a long term condition. The Trust would like to develop Crisis cafes as well as wrap around services to avoid an escalation in a mental health condition.

In response to a Member's question, the Chief Operating Officer reported that the CCGs are not looking to procure services currently provided by the Pennine Care NHS Trust. The primary focus is the establishment of each Borough's Locality Care Organisation and the CCG would be wary of de-stablishing the organisations during this time.

The Chief Operating Officer reported that the recruitment of staff continues to be problematic across the NHS. In respect of Pennine Care, national standards have been developed in respect of early intervention psychosis service but the biggest challenge continues to be the recruitment of staff.

It was agreed:

Stuart North, Chief Operating Officer be thanked for his attendance and be invited to attend the next meeting of the Joint Committee scheduled to take place on the 1st March 2018.

19 PENNINE CARE NHS FOUNDATION TRUST UPDATE; STRATEGY, WORKFORCE, FINANCE AND INFORMATICS

Judith Crosby, Executive Director of Service Development and Sustainability and Martin Roe Executive Director of Finance and Deputy Chief Executive Pennine Care NHS Foundation Trust attended the meeting to provide an update in respect of the Trust Strategy, Workforce, Finance and Informatics.

The verbal presentation informed members of the appointment of the new Trust Chief Executive and development of the early delivery priorities. With regards to the workforce, the Trust representatives reported a reduced expenditure on agency staff from, £7.9 million to £4.5 million; plans to support the retention of staff and reduce turnover as well as the development of a recruitment strategy.

The Executive Director of Finance and Deputy Chief Executive reported that the first deficit plan was submitted for 2017/18 of £6.6 million, cost improvement targets for 2017/18 will be £6.1 million, £4.7 million has been identified.

The Executive Director of Service Development and Sustainability reported that there will be a new informatics strategy, a roll out of electronic referrals; improved electronic document management and archiving of records as well as improved uptake of mobile working.

Responding to a Member's question, the Executive Director of Finance reported that locally 50% of the Pennine Care workforce will be eligible for retirement in the next five years. The Trust must look at radically different solutions to address the ongoing recruitment and retention issues within the health service economy.

In response to a Member's question in respect of concerns raised by the CQC, the Executive Director of Finance reported that the quality will be the primary focus going forward. The Trust has one of the lowest reference cost in the country, the Trust working with its partners will need to identify the financial envelope and commission high quality services commensurate with the monies available.

In response to a Member's question the Executive Director of Finance reported that the overall assessment delivered by the CQC was fair, the Trust would like to move to an inspection rating of good. The senior leadership team as well as interested partners/stakeholders receive regular updates in respect of progress against the CQC action plan.

It was agreed:

1. Representatives from Pennine Care NHS Foundation Trust be thanked for their attendance.
2. Claire Molloy, Chief Executive Pennine Care NHS Foundation Trust will be invited to attend the next meeting of the JHOSC for Pennine Care.

3. An outline of the Business Strategy for the Pennine Care NHS Trust will be presented at the meeting due to be held on 1st March 2018.

20 URGENT BUSINESS

There was no urgent business considered.

COUNCILLOR COUNCILLOR COLIN MCCLAREN
Chair

(Note: The meeting started at Time Not Specified and ended at Time Not Specified)