



**Democratic and Member Support**

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## **SUPPLEMENT PACK**

## **WELLBEING OVERVIEW AND SCRUTINY COMMITTEE**

Wednesday 13 December 2017  
2.00 pm  
Warspite Room, Council House

**Members:**

Councillor Mrs Aspinall, Chair

Councillor James, Vice Chair

Councillors Mrs Bridgeman, Cook, Dann, Deacon, Loveridge, Dr Mahony, Sparling, Tuffin and Tuohy.

Please find attached additional information for your consideration under agenda items 8 and 10.

**Tracey Lee**

Chief Executive

## **Wellbeing Overview and Scrutiny Committee**

- 8. Torbay Children Services (Pages 1 - 20)**
- 10. Recommendations from the General Practice in Plymouth Select Review (Pages 21 - 26)**



# Contractual Partnership Plymouth City Council & Torbay Council

Due Diligence and Assurance

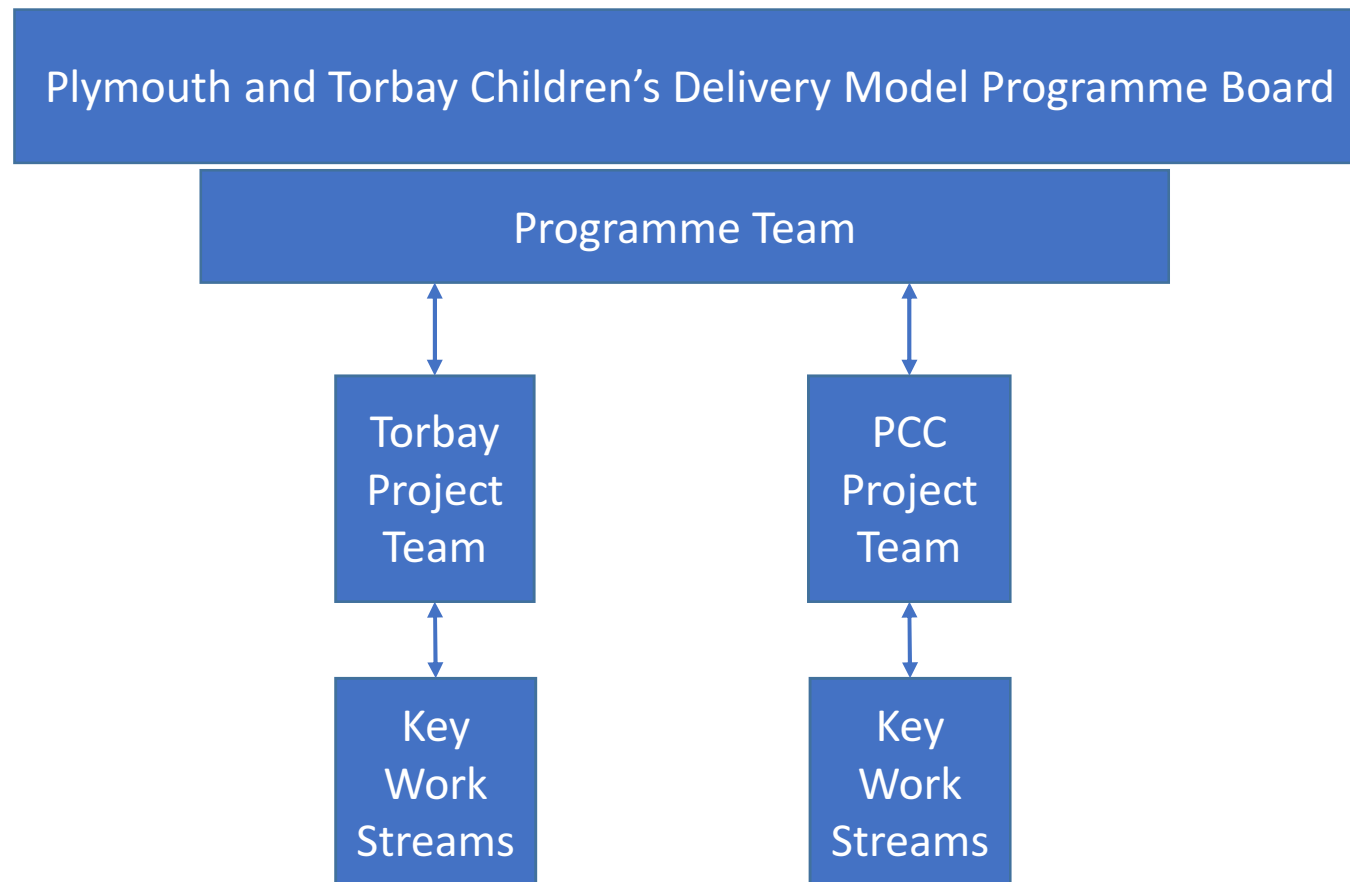
Health & Wellbeing Overview Scrutiny Committee 13<sup>th</sup> December 2017

# Update of work

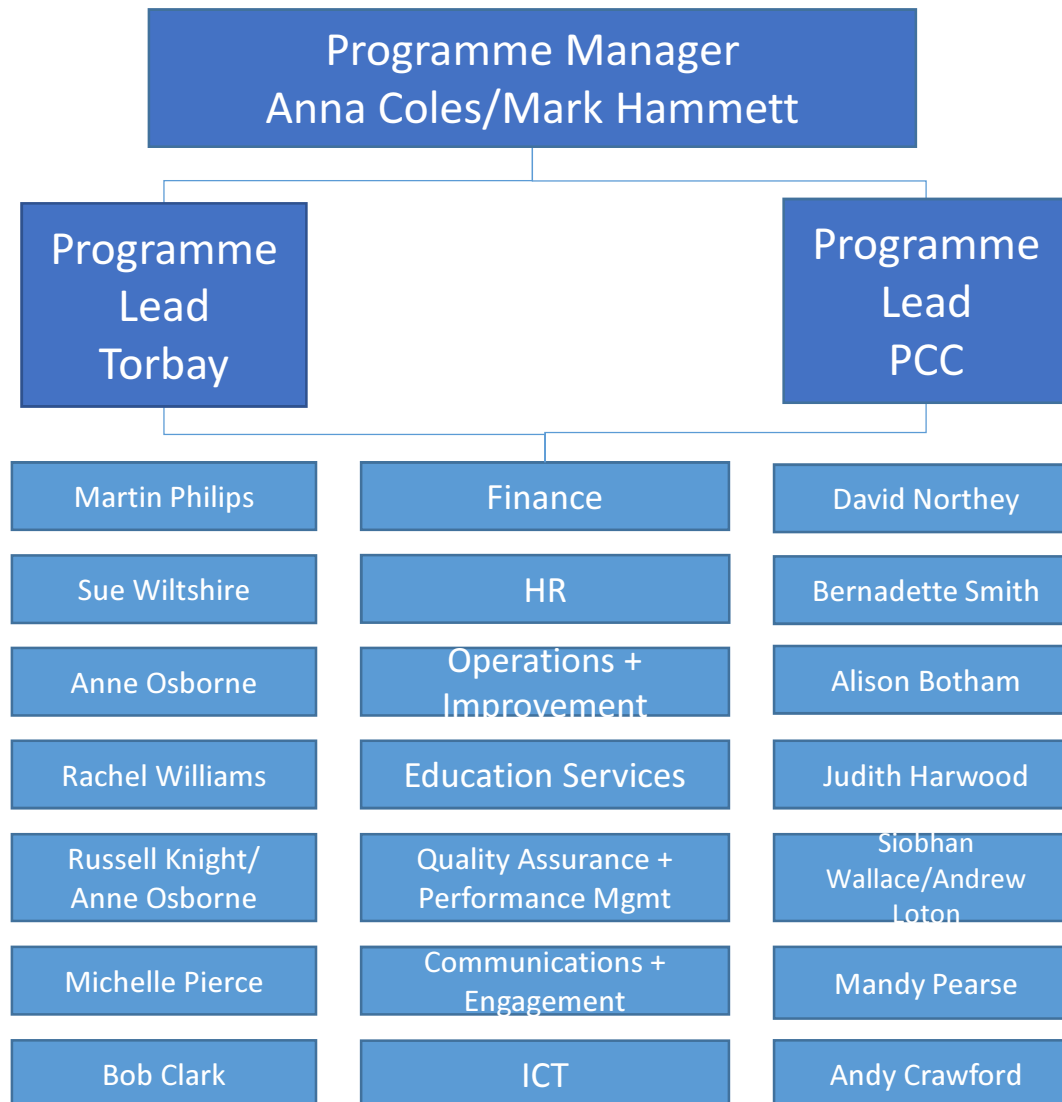


- Initial scoping meeting PCC
- Programme Structure developed
- Torbay Senior Stakeholder Engagement Event
- Work stream leads identified
- Outputs defined
- Phased approach agreed
  - Phase 1- Due Diligence/Assurance
  
- **Due diligence schedule: Full Council 25 September**

# Programme Governance



# Work stream Structure



# Due Diligence / Assurance



## Overall Due Diligence – David Northey

- To provide assurance to:
  - Wellbeing and Overview Scrutiny Committee
  - Cross-party Torbay Children's Services Working Group
  - Cabinet
  - Council
  
- Provide assurance to cover:
  - Resources:
    - Leadership, Capacity and Maintaining Focus
    - Roles & Responsibilities
  - Finance
  - Political, Legal & Governance
  - Communication
  - ICT

# Phase 1 Due Diligence/Assurance Leads



Assurance (Phase 1)	
Overall	David Northey
HR	Bernadette Smith
Finance	David Northey
Legal & Governance	Linda Torney
Communication	Mandy Pearce
ICT	Andy Crawford
Risks	Mike Hocking



# Resources:

## Leadership, Capacity & Maintaining Focus



1. Ensures that Plymouth's senior management have sufficient capacity to deliver, given the breadth of their current remit
  - Review in progress by Chief Exec, Strategic Director for People and Leader; paper for Appointments Panel
2. Provides clarity on staffing structures, including describing the controls that will be put in place to ensure that any staffing shortfalls will be addressed within the respective councils
  - Senior staffing changes will reflect Shared DCS appointment. Finance, HR and Operational review will be triaged to ensure complete overview of requirements and funding
3. Provides reassurance that there will be no impact on service delivery for, or detriment to children and young people in Plymouth, nor any detriment to frontline social care staff
  - No intention to move from agreed MTFS/Budget. Staff changes at SMT level only
  - Business as Usual for all Plymouth frontline staff and middle management
4. Describe how Plymouth's capacity and reputation will be managed in the event of a major investigation or high profile case in either authority, setting out the details of how the Council would respond to potential scenarios.
  - Same approach as current arrangements for child protection and safeguarding
  - Maintain integrity of current arrangements in place on briefing on high risk cases to children and young people; maintain the reputation of the Council

# Resources:

Leadership, Capacity & Maintaining Focus



5. Demonstrates how the Council will continue to maintain its own improvement journey and performance levels
  - Business Improvement & Corporate Safeguarding Improvement Plan to be maintained
6. How will the arrangement improve the recruitment and retention of social workers in both councils
  - Joint working by both HR and Children's Services across both councils
  - Contractual Partnership in place for minimum 3 years provides stability of senior management
  - Good communication strategy in both councils
  - Expect to build on Plymouth's current strong retention position given national context
7. Includes a comprehensive risk register that is actively monitored and widely shared
  - Risk Register developed with input from cross party meetings, group meetings/workshops and Scrutiny Committee

# Resources:

## Roles and Responsibilities



8. Confirm PCC's accountabilities for children and young people are distinct, including around safeguarding

- This is confirmed and in line with the Statutory Guidance on the roles & responsibilities of the DCS and Lead Members for Children's (2013) and the requirements as laid out in the Children's & Young Peoples Act 2014.

9.. Provides clarity around contract termination, monitoring of contractual arrangement, cost liabilities for early termination:

- This was discussed and agreed at a recent cross-party working group. Appropriate wording will now be incorporated into the final contract
- Final review by an external legal firm.

10. Provide assurance that any reputational impacts of serious incidents or negative judgements are contained within the relevant authority.

- This was discussed and agreed at a recent cross-party working group
- Appropriate wording will now be incorporated into the final contract

11. How will the effectiveness of the contractual arrangement be reported, including the impact on the improvement of Torbay's Children's Services

- Wellbeing and Overview Scrutiny Committee / CMT / DMT will receive Progress reports

# Resources:

## Roles and Responsibilities



12. Clarify the future relationship with the DfE and arrangements under Ofsted
  - In the Cross Party Meeting on 13 November, this subject was discussed with the Commissioner and the DfE.
  - Reassurance was provided by the DfE that under inspection, Ofsted would **only look at services for children in Plymouth** and the rate of improvement of children's services in Torbay would not form part of their judgement of Plymouth
13. Set out the proposed senior staffing structure for the management of the contract
  - Review by Chief Exec, Strategic Director for People and Leader; paper for Appointments Panel

# Finance



1. The set up and operation of the delivery contract will be at no cost to the Council and there will be no cross-subsidy or pooling of budgets between the two councils.

- This is part of the current agreement; has been confirmed and will form part of the final contract when it is agreed. Finance will start formal negotiations around on-going Torbay funding for shared resources in tandem with assurance programme.

2. Sufficient funding will be made available from the DfE and/or other sources to enable both Councils to undertake effective due diligence and cover the transition phase

- Negotiations complete and funding bid approved. PCC Finance will now monitor and control all expenditure drawdown. Overall responsibility of SRO (Carole Burgoyne)

# Transitional Funding

(Approved)



## 2(a) Transitional Funding approved

- We bid for £1.518m which included £0.100m contingency
- £1.418m to be paid in 2 tranches 50% Dec 17/ 50% Feb 18
- £0.100m available if required

## 2(b) Transitional Funding covers 3 phases

- Phase 1 Initial discussion:
- Phase 2 Programme costs to go-live 1<sup>st</sup> April 2018
- Phase 3 Initial contract period to 30<sup>th</sup> June 2018
- Includes “exit fees”

# Finance



3. Torbay's Medium Term Financial Planning makes sufficient provision for the delivery of Children's Services for the duration of the agreement and:

4. There is sufficient ongoing visibility of Torbay Council's overall budget and financial planning process, and that decisions made in the medium term are assessed for any inadvertent impacts on Children's Services.

- Finance have undertaken due diligence reviews of the overall MTFS/Budget allocations and assumptions. Additional funding has been identified within the proposed budget.
- Torbay S151 to present Budget/MTFS at next Programme Board
- PCC AD CYP+F / DCS to attend all Torbay budget discussions

# Political, Legal and Governance



1. Provide clarity about the political accountabilities within both Plymouth and Torbay councils
  - Contract will set out clear lines of accountability
  - Plymouth will be responsible for Plymouth Children's Improvement
  - Torbay will be responsible for Torbay Children's Improvement
  - Torbay Council will retain full statutory responsibility for delivery of Children's Services
    - **Confirmed by Commissioner and DfE**
2. Ascertain the level of cross party support in Torbay for the arrangement
  - Torbay Full Council Meeting 19 October
  - Recommendations were proposed by the Mayor and seconded by the deputy leader of the Conservative Group
  - Request from Elected Mayor and Children's Portfolio Holder to meet Members from Plymouth- this is being arranged
3. Identifies the Council's response if Torbay Council were to cut the provision of non-statutory services which could have an impact on Children's Services
  - Joint DCS will have full control of Children's budget allocations
  - Statutory post – responsibility to ensure correct level of funding; direct access to Chief Executive and Full Council
  - PCC Finance will work with Torbay colleagues and joint DCS to review budgets
4. Provides clarity about potential future governance and scrutiny approaches
  - Distinct responsibilities Torbay / Plymouth
  - No joint scrutiny requested / required
  - Joint DCS work within Torbay political governance for Torbay / PCC for Plymouth



# Political, Legal and Governance



*That Full Council confirms the following so as to inform Plymouth City Council's due diligence in respect of arrangements for Children's Services:*

- (a) the current operating model of Torbay Council is flexible, evolving and based upon the most appropriate fit for each service. The model is not designed or anticipated to lead to a single strategic partnership;
- (b) Torbay Council will use all reasonable endeavours to commit to its current operating model for a period not less than 3 years;
- (c) if during the contract term Torbay Council determines that there is an overwhelming business case for it to enter into a single strategic partnership with another Council, Plymouth City Council reserves the right to review its position in relation to delivery of Children's Services and if Plymouth City Council withdraws as a result, Torbay Council will cover all costs relating to the termination of the arrangement;

# Political, Legal and Governance



- (d) should Plymouth City Council decide to unilaterally end the contract before the end of the contract term under circumstances other than those set out in the contractual agreement then Plymouth City Council will cover all costs relating to the termination of the agreement;
- (e) should Torbay Council and Plymouth City Council decide, with permission of the Secretary of State, to end the contract before the end of the contract term then Torbay Council and Plymouth City Council will share equally all costs relating to the termination of the agreement; and
- (f) the notice period for early termination under all the above circumstances would be **6 months** to allow reasonable time to disengage, unless there was agreement that it could be achieved within a shorter period.

# Communications



1. Provides clarity about the communications approach to the people of Plymouth
  - Communication plan in place
2. Provides reassurance to Plymouth residents that Children's Services will not suffer as a result of the arrangement
  - Assurance from the questions posed will enable Elected Members to make an informed decision at Full Council in January. Through the development of key messages from this Council meeting we will provide Members with sufficient information to reassure Plymouth residents
3. Includes a comprehensive communication and engagement plan.
  - A full and comprehensive plan in development with Torbay colleagues

# ICT



1. To review and map existing ICT systems across Plymouth City Council / Torbay Council and capability around supporting arrangement.
2. Identification of ICT requirements and compatibility to support contractual arrangement
3. Milestone Plan to meet capability- delivery plan

# Assurance (Due Diligence)



## Timeline / Next Steps

- *Wellbeing Overview & Scrutiny Committee* 13<sup>th</sup> Dec
- **Finance review: – Cabinet Member and  
Shadow Cabinet Member for Finance** wk1 Jan 18
- **Labour Group** tbc
- **Conservative Group** tbc
- **Cabinet** 16<sup>th</sup> Jan
- **Full Council** 29<sup>th</sup> Jan

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**Select Committee Review****Wednesday 29 November 2017****PRESENT:**

Councillor Mrs Aspinall, in the Chair.

Councillor James, Vice Chair.

Councillors Mrs Bridgeman, Carson, Dann, Dr Mahony, Sparling and Tuffin.

Also in attendance: Mark Procter - Joint Director of Primary Care, South Devon and Torbay and NEW Devon Clinical Commissioning Groups and Head of Primary Care, NHS England South (South-West – Devon, Cornwall and Isles of Scilly), Nicola Jones - Head of Commissioning, Craig McArdle - Director of Integrated Commissioning and Dr Dafydd Jones, NEW Devon CCG, Ruth Harrell - Director of Public Health, Karen Marcellino and Anthony Gravett, Healthwatch Plymouth, David Bearman - Devon Local Pharmaceutical Committee, Ross Jago – Lead Officer and Amelia Boulter – Democratic Advisor.

The meeting started at 1.00 pm and finished at 4.12 pm.

*Note: At a future meeting, the Panel will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.*

1. **Declarations of Interest**

In accordance with the Code of Conduct the following declarations of interests were made –

<b>Member</b>	<b>Minute</b>	<b>Reason</b>	<b>Interest</b>
Councillor James	Minute 3	Chair of the Patient Participation Group, Glenside Medical Centre	Personal
Councillor Mrs Aspinall	Minute 3	Chair of the Patient Participation Group, Freedom Health Centre	Personal
Councillor Carson	Minute 3	Patient at Freed Health Centre	Personal

2. **Chair's Urgent Business**

There were no items of Chair's Urgent Business.

### 3. **Witnesses**

The Committee heard from Mark Procter, Joint Director of Primary Care, South Devon and Torbay and NEW Devon Clinical Commissioning Groups and Head of Primary Care, NHS England South (South-West – Devon, Cornwall and Isles of Scilly).

The Committee were provided with a presentation and heard that;

- a) nationally and locally primary care faces many issues such as limited investment, increasing pressure from an ageing population and attracting workforce into the South West;
- b) Primary care was one of the main priorities for the Devon Sustainable Transformation Partnership;
- c) Hyde Park, St Barnabas and Saltash Road closed in March 2017 and an interim provider, Access Health Care took over the contract for Ernesettle, Mount Gould and Trewlawny GP surgeries;
- d) more recently Access Health Care took on the contract for Freedom Health Centre and Ocean Health;
- e) following two failed procurement exercises they were unable to secure a GP surgery in Barne Barton, an option for this area could be a pharmacy-led service with GP input;
- f) Glenside Medical Centre and Beacon Medical Group merged in 2017;
- g) NEW Devon CCG had worked with nearby partners to support patients moving to another surgery by 31 March 2018 following a retirement at Leypark Surgery. Leypark Surgery would then close;
- h) the NEW Devon CCG, Western Locality in partnership with NHS England would be undertaking the following immediate actions:
  - encouraging GPs to return to practice;
  - telephone triage service;
  - recruitment of GPs from overseas;
  - Plymouth workforce/recruitment campaign.

The Committee heard from Nicola Jones, Head of Commissioning, Craig McArdle, Director of Integrated Commissioning and Dr Dafydd Jones, NEW Devon CCG.

The Committee were provided with a presentation and heard that;

- i) the CCG are the commissioners for primary care and acknowledge that they have a bigger role to play with regards to joint commissioning and delegated commissioning;



- j) this was part of a wider system which includes reviewing the workload, workforce, infrastructure and sustainability and to reflect that they were part of the 5 year forward view and the STP;
- k) the Primary Care Improvement Plan had been produced in partnership with various stakeholders such as NHS England, PHNT, Livewell, GP Practices and Devon Local Pharmaceutical Committee;
- l) one of the urgent highlights within the primary improvement plan was recruitment and they were working with Plymouth City Council to better enable GP practices to be able to recruit;
- m) in the near future most practices would be undertaking social subscribing using the non-health voluntary organisations;
- n) the winter plan initiatives included the relocation of Robin Unit, increasing domiciliary care capacity, maximise bed use for patient flow and added in additional capacity;
- o) Stay Well Campaign, a guide to health and care services in Plymouth has been distributed across the city;

The Committee heard from Ruth Harrell, Director of Public Health.

The Committee were provided with a presentation and heard that;

- p) they were working closely with NHS England and NEW Devon CCG and recognise the challenges;
- q) in conjunction with the Medical School trying to attract more people into Plymouth and to increase exposure for trainees to visit GP Practices in deprived areas to understand primary care within these areas;
- r) practices that were struggling were in the more deprived areas and this was not typical to Plymouth;
- s) people were living longer with chronic illnesses and within the deprived areas these illnesses were developed earlier. They were looking at whether the funding within deprived areas was sufficient enough to attract GPs into those areas;
- t) the Carr-Hill formula needs to be updated with a higher weighting to take account of deprivation;
- u) the system as a whole was aware of the risk of harm to patients and they were looking at how this would be managed.

The Committee heard from Karen Marcellino and Anthony Gravett, Healthwatch Plymouth;

The Committee were provided with a presentation and heard that;

- v) they had carried out engagement with patients of the recently closed GP surgeries and since then engagement with patients had improved dramatically;
- w) they looked at call back and triage system but this piece of work was still progressing, feedback included that patients were not aware that this had been implemented and how it would affect them;
- x) they were working alongside the Western Locality Overview Group and NHS England looking at the challenges around GP recruitment, contract handback and how patients can be involved.

The Committee heard from David Bearman, Devon Local Pharmaceutical Committee.

The Committee were provided with a presentation and heard that;

- y) there was a clear need to change and for pharmacies towards to move forward and integrate into general practice work moving side by the side for the future population;
- z) there was a shortage of pharmacists within the South West but they were working collaboratively to stop the poaching and to recruit outside the south west;
- aa) looking at how we assist GPs with the aim to make pharmacy a key contributor to the sustainability of primary care both through direct support in the practice and by the redesign if community pharmacy to be the key partner within a community service provision;
- bb) recognise the way we work with pharmacists in hospitals, in practice and communities to help glue the system together;
- cc) they were leading the way nationally on this agenda.

#### 4. **Recommendations**

The Committee agreed that;

- I. the Committee, via the Chair, receives further reports on every future change to GP Surgeries in Plymouth which include information on engagement and consultation activities with patients at the earliest stage;

2. the Select Committee requires a progress report on the projects as outlined within the Western Locality Primary Care Improvement Plan at its next meeting;
3. that partners in the Health and Social Care System lobby for review of the Carr-Hill Formula funding and identify how more funding would benefit GP Surgeries within the most deprived areas of Plymouth, reporting progress to the next meeting of the Select Committee;
4. the Select Committee requires an update on the work being undertaken by partner organisations to attract GP's to Plymouth but more specifically on how we attract and retain GP's within the most deprived areas of the city at next meeting of the Select Committee;
5. the Select Committee to receive a report on from Health and Social Care commissioners on how Pharmacy will be a key feature of new models of working and how pharmacists can alleviate the pressures currently being faced within primary care at next meeting of the Select Committee.

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