



Minutes of the meeting of the HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE held on TUESDAY 29 JANUARY 2013

Present: Councillor Long (Chair)
Councillors Alexander, Bramall, M Burke, Richards, Venn, Wharton and Zealley, and Mr A Hastings (MK LINK)

Officers L Bull (Corporate Director Community Wellbeing), L Scott (Assistant Director [Adult Social Care]), N Rayner (Assistant Director [Children's Social Care]), E Richardson (Overview and Scrutiny Officer)

Apologies: Councillor Brunning

Also Present: Councillor Brock (Cabinet Member [Adult Social Care, Health and Wellbeing]), Councillor P Williams and Alderwoman Lloyd (Older Persons' Champion), C Murdoch (Chief Executive, Central and North West London NHS Foundation Trust), J Vaughan (Director of Strategic Development and Community Services, Central and North West London NHS Foundation), C Walker (Managing Director, Milton Keynes Community Health Services), J Ablett (Milton Keynes Clinical Commissioning Group), B Mallon (Milton Keynes Clinical Commissioning Group) and 7 members of the public

HAS15 MINUTES

RESOLVED –

That the Minutes of the meeting of the Health and Adult Social Care Select Committee held on 30 October 2012 be approved and signed by the Chair as a correct record.

HAS16 FUTURE PROVISION OF COMMUNITY HEALTH SERVICES IN MILTON KEYNES

In December 2012 NHS Milton Keynes announced that the Central and North West London NHS Foundation Trust (CNWL) had been selected as the preferred acquirer for Milton Keynes Community Health Services. This managed transfer process, part of the national Transforming Community Services programme, would result in the transfer of community health services and staff in Milton Keynes to CNWL by 1 April 2013, subject to receipt of all necessary regulatory approvals.

Clare Murdoch, Chief Executive of the Central and North West London NHS Foundation Trust gave a brief introduction to CNWL and its work. CNWL felt privileged as a health trust to have been awarded the contract; it was an important and precious task which they did not take lightly. The team at CNWL were experienced, dedicated and believed that the delivery of quality care was paramount. They were excited about working in Milton

Keynes as the community health services and partnerships in the area were already very good and they hoped to build on them in the future.

The Committee then received a presentation from John Vaughan, Director of Community Services and Strategic Development at CNWL and during the ensuing discussion with the CNWL team, noted that::

- Apart from London, CNWL was already delivering services in other local authority areas such as Surrey, Kent and Hampshire, as well as some national in initiatives;
- CNWL currently employed 5,200 staff working in 300 separate teams across these areas. 200 staff were based in their head office in Euston, London.
- They provided a range of services from highly specialised services, such as the only national gambling clinic in the UK, to the regular community facing health services;
- Their base in Milton Keynes would be in the Community Health Service offices in Bletchley, where the current team will continue to provide the local contact;
- Although their annual turnover was in the region of £370m, any surplus was reinvested in order to facilitate continued improvements to services and their delivery;
- The various teams within the organisation supported each other and where possible worked on shared programmes in local areas;
- They had tendered for the work in Milton Keynes because of the area's growth strategy and the Trust's passion to deliver good healthcare. Milton Keynes was a fantastic city and CNWL wanted to be involved in service provision of healthcare in the area. They felt that they could add value to community health provision in Milton Keynes and that in return Milton Keynes would add value to the work of the Trust generally. They felt it was a good match;
- CNWL, as a Foundation Trust, had to produce annual accounts which went before Parliament every year and comply with accountancy regulations;
- They were registered with the Care Quality Commission with no conditions and had a green governance risk rating from Monitor;
- They liked the work which had been done in Milton Keynes to provide an integrated model of health and social care and wanted to build on that to improve provision even further;
- Only NHS organisations had been eligible to tender for the work in Milton Keynes. There had been a rigorous selection process and details of the Trust and its work had been independently verified;

- CNWL were experienced providers of community health services which meant that they were able to identify problems quickly and things right as soon as possible;
- They wanted to build on and enhance the existing services, but also to learn from what is already being done well in Milton Keynes and apply it elsewhere;
- CNWL had experience of supporting commissioners of health services in their leadership role and to influencing the local healthcare economy to introduce whole systems change where appropriate;
- In order to fund 'extras' outside the core service provision CNWL also ran an Innovation Fund of £600k per year which they would like to see grow. Teams who have a new idea or innovation submitted a pitch to a "Dragons' Den" style panel for consideration. If successful, funds were provided to get the idea off the ground;
- Based on their experience in other local authority areas CNWL are looking forward to maintaining a good relationship with the Milton Keynes LINK organisation (Healthwatch from April 2013);
- The Board of Directors included both users and carers and had a programme of regular 'Board to Ward' visits to frontline services;
- CNWL were constantly investing in new technology and systems, including assisted technology. A tele-health service was already running in Milton Keynes. Calls were picked up by community matrons who arranged the necessary checks on patients;
- CNWL also carried out mock Care Quality Commission style visits internally, going into a service / facility unannounced to look at everything that the Care Quality Commission would look at and reported accordingly. This meant that if anything was wrong it could be picked up quickly and addressed. They had multiple schemes / methods to check that what they thought should be happening was happening;
- The current contract was for an initial 3 year period, but CNWL hoped that their association with Milton Keynes would be much longer. Although most of their contracts were on a 3 year basis these were regularly renewed. CNWL liked to plan for long term associations in order to train staff to build on their successes;
- CNWL had also established user forums in all localities where they operated, bringing together representatives on a Trust-wide group to address cross-cutting issues. Milton Keynes already had a number of successful user forums which CNWL would retain;
- The Trust acknowledged that there was a rapidly aging population in Milton Keynes and that the service provision for the 70+ strand could be significant. However, services should be based on clinical need rather than age and there were younger people with long term

conditions who may need more care than someone in their seventies who was generally fit and well;

- There was work to be done around support for veterans and their families and CNWL were looking at ways of picking up previous armed forces service history. However, it was noted that in the case of serving personnel the Ministry of Defence liked to look after 'their own';
- All existing staff who currently worked for the Milton Keynes Community Health Service would be TUPE'd ('Transfer of Undertakings Protection of Employment) to the Trust. CNWL had been commissioned to provide a community health service and therefore needed experienced, local personnel to enable them to do that effectively;
- CNWL carried out regular skill mix reviews to ensure that the right people were in the right jobs at the right time;
- Milton Keynes Community Health Service was the only part of the NHS in Milton Keynes which had made a profit and delivered savings over the past 4 years. However, they had acknowledged that any further savings would only be achieved by coming together with another organisation;
- A lot of third party contracts had evolved by custom and practice and the price paid did not always fit the service being provided eg increased computerisation had reduced the costs of pathology services. These contracts would need to be looked at and where possible renegotiated so that value for money was obtained locally;
- CNWL had a track record of being open and transparent about how they do things and who with.

RESOLVED –

That the team from the Central and North West London NHS Foundation Trust be thanked for their presentation which the Committee felt had been a useful and positive first session. The Committee looked forward to receiving updates on progress on the work of CNWL in Milton Keynes in the future.

HAS17

INTERIM REPORT OF THE REVIEW GROUP ON THE PROVISION OF MENTAL HEALTH SERVICES IN MILTON KEYNES

The Committee received the Interim Report of the Review Group on the Provision of Mental Health Services and noted that the final report would be presented to the Select Committee at its meeting on 23 April 2013. They also noted that the Review Group would be interested in doing further work on the provision of mental health services later in the year.

THE CHAIR CLOSED THE MEETING AT 9:20 PM