
Overview and Scrutiny Panel (Social Well-Being)

**Report of the meetings held on 2nd July and
3rd September 2013**

Matters for Information

**9. CAMBRIDGESHIRE AND PETERBOROUGH CLINICAL
COMMISSIONING GROUP: FINANCE AND PERFORMANCE
REPORTS**

Mrs S Shuttlewood, Acting Director of Performance and Delivery, and Mr R Murphy, Acting Local Chief Officer for the Huntingdonshire System, Cambridgeshire and Peterborough Clinical Commissioning Group have reported to the Panel on the financial and operational performance of the Clinical Commissioning Group across the Cambridgeshire and Peterborough area. The Commissioning Group officially came into operation on 1st April 2013 and the performance report was the first such report to be submitted to the Governing Body to date. Generally, all providers struggled to meet desired performance levels in the first quarter owing to adverse weather conditions in April 2013, but most providers have now recovered and are reaching their performance targets.

Particular attention has been paid to the performance levels achieved at Hinchingsbrooke Hospital. The Accident and Emergency Department has been ranked as the top performing facility across the nation in January 2013. Arising from the poor weather in April, additional pressure has been placed on the Trauma Orthopaedic Department. However, on a more positive note, the Hospital is achieving its cancer waiting times and there have been no outbreaks of MRSA on site. Delays with diagnostic waiting times are an area of concern but this is attributed to staff sickness. Ambulance handover times are a further area of concern but an audit of the service is currently being undertaken and an action plan will be developed with a view to improving performance.

Clarification has been received of the differences between the running cost budget and the programme budget for the Commissioning Group and of the differences between the previous Primary Care Trust (PCT) model and the new Commissioning model. Comment has been made about the possible fragmentation of services across the area. It has, however, been reported that the Commissioning Group works towards a federated model which utilises existing data sources such as the Joint Strategic Needs Assessments and takes into consideration historic areas of spend. It

is felt that local clinical commissioning groups will be able to pick up on specific health trends and will be best placed to take decisions on local matters.

The Panel has discussed the effective utilisation of resources within the Clinical Commissioning Group especially with regard to community medicines. Members have also examined the accountability mechanisms in place, the powers of the Commissioning Group to undertake unannounced visits at Hospitals, the sanctions available to the Commissioning Group and the process for imposing fines together with the risks associated with the imposition of financial penalties on providers. The Commissioning Group's view of providers is partly informed by the new Friends and Family test which is being employed by providers nationally. In addition there is a requirement to report upon defined health standards.

The Commissioning Group intends to clarify what funding it receives for specialist treatments. It appears that up to £6m has been withheld for such treatments which had previously been included within the PCT's budget. On the subject of financial matters comment has been made that there should be engagement with the community on where funding is directed.

The Panel has considered the Commissioning Group's short to medium term priorities. These have been reported as being the development of a strategy for end of life care, improving communications across the board and reducing the risk of coronary heart disease amongst the population. Some priority also is accorded to care for older people.

Members have been advised that in Huntingdonshire social care services and health services have adopted close working practices. It is thought that these services might be integrated in the future provided there is a justifiable case to do so. Similarly, the Panel has commented on the need for there to be a culture change on the part of local GPs in the way they work alongside local authorities and elected Members.

Representatives of the Commissioning Group will return to the Panel in six months time to deliver a further performance report.

10. HOUSING AND COUNCIL TAX BENEFIT CHANGES AND THE POTENTIAL IMPACT UPON HUNTINGDONSHIRE

The effect of Government changes to the Housing Benefits system arising from the Welfare Reform Act have been reported to the Panel. The Council is yet to realise the true impact of the reforms but, since the last quarter, there has been an evident increase in the number of households presenting themselves to the Council as homeless. Private landlords also appear to be withdrawing their properties from the market which is causing difficulties in finding appropriate accommodation for households. The Benefit Cap will take effect from

15th July 2013 but there are only 44 households within Huntingdonshire that are affected by this change.

There have been a number of claims for discretionary housing payments which initially took up to five to six weeks to process. The backlog has now been cleared and turnaround times are now back to a few days. The Panel has queried the level of non payment from customers affected by the Council Tax Support Scheme and, in response Members have been advised that the Council has issued a number of summonses to some households within the District.

The Panel has discussed the fact that when it comes to occupancy levels the Regulations do not permit the Council to make any allowance for married couples where one of them is disabled. However, the Discretionary Housing Payment scheme is available where a family has a disabled child. Members have also discussed the availability of one and two bedroom properties across the District, the responses received from Luminus' survey enquiring whether tenants are interested in moving home as a means of mitigating the effects of the welfare reforms and the process employed by housing associations in the case of mutual property exchanges. Having received details of the level of budget available to assist with homelessness together with the range of preventative work undertaken and the recent acquisition of additional temporary accommodation in Huntingdon, Members have expressed their gratitude to the Head of Customer Services and her Team for their efforts during the implementation of the welfare reforms.

11. CCTV OPERATIONS – SHARED SERVICE PROPOSAL

In conjunction with the Cabinet, the Panel has expressed its support for a proposal to establish a joint CCTV shared service with Cambridge City Council. On the basis of the analysis carried out to date, the service is likely to operate under a single management structure from the CCTV Control Room at Eastfield House and is expected to generate around £200,000 of savings per year to be shared equally between the two authorities. Whilst the assets will remain the responsibility of the relevant authority the new body will oversee the monitoring of images.

It has been noted that wireless technology could enable the new service to generate additional income through commercial contracts. This and other opportunities in both the private and public sectors to improve the service's financial performance will be explored once the shared service is established.

Members have drawn attention to the financial implications for the Council of the transfer to it of staff from the City Council. Detailed work has not yet been undertaken on this element of the proposals but a number of safeguards have been built into discussions with the City Council in order to protect the District Council's interests. Members have sought assurances that the full impact is incorporated into the proposed business plan. It is intended to review the structure

of the service once it has been established. Consultations with Trade Unions and other relevant bodies will be undertaken at a later date.

It is expected that the CCTV Control Room at Eastfield House will need to be reconfigured to provide sufficient screens to cover the two Council areas. There is capacity on site to undertake the necessary adaptive works and further expansion in the future could be accommodated. It has been confirmed that there will be no reduction in CCTV coverage of Huntingdonshire from the present level and the shared service should result in improved consistency and resilience of the service.

12. HUNTINGDONSHIRE STRATEGIC PARTNERSHIP HEALTH AND WELL-BEING THEMATIC GROUP – ANNUAL SCRUTINY REPORT (FOR 2012-13)

The Panel has received details of the activities undertaken by and changes affecting the Huntingdonshire Health and Well-Being Group in 2012-13. The priorities for Huntingdonshire are based on evidence of need, which has been identified through the Joint Strategic Needs Assessment and the Huntingdonshire Sustainable Community Strategy. Members' attention has been drawn to the Group's Action Plan, membership and its strategic links to other key groups including the Cambridgeshire Health and Well-Being Board and local Commissioning Groups. Since it was established in 2008, the Group has evolved into a local health partnership. As of November 2012, it also has taken on responsibility for the older people priority actions that were previously part of the remit of Huntingdonshire Matters delivery groups.

The Panel has been advised that the Group's membership has changed considerably over the last year. This has enabled closer working to take place with the local Commissioning Groups on falls prevention and has allowed the Group to keep informed of and to influence the procurement process currently being undertaken on older people's services. Key members who have recently joined the Group include the voluntary sector, Healthwatch and Age UK.

Members have discussed how the Group might develop its wider community engagement. It has been suggested that, if they are established, Local Joint Committees could provide a mechanism for the work of the Group to filter down to local communities. In the current year the Group will be making particular efforts to improve outcomes for falls, teenage conceptions, mental health thresholds for release of patients and occupational therapy. With regard to the latter, arising from concerns placed on record by the Environmental Well-Being Panel, up to date information has been requested on waiting times.

13. HUNTINGDONSHIRE COMMUNITY SAFETY PARTNERSHIP

The Police and Criminal Justice Act 2006 requires the Panel to scrutinise the work of the Huntingdonshire Community Safety Partnership. To comply with this requirement, Members have

examined the Action Plan for 2013-14, performance information for the previous 12 months, details of the projects undertaken by the Partnership and crime trends in Huntingdonshire since 2006 to date.

The last year has been a period of great change for the Partnership. It no longer receives funding from the Home Office. The Police and Crime Commissioner now has responsibility to devolve funds down to all Cambridgeshire Partnerships. The Commissioner has expressed support for the Partnerships but he has indicated that funding might not be available next year.

The Panel has been pleased to see the downward trend in crime levels in the District but has noted that there has been an increase in the number of metal thefts over the last year. Changes to the way in which scrap metal dealers are licensed will take effect from October 2013, which it is hoped will reverse this trend.

Given the funding position, the Panel has questioned whether the service is sustainable. Opportunities exist to generate income through partnership working and these are currently being explored. In addition, recent investment into the E-CINS database, a multi-agency information sharing tool, enables a communication base to be established with other participating agencies which will facilitate partnership working.

Other matters discussed include the need to find an alternative solution to anti-social behaviour in Riverside Park, St Neots as a result of damage to a barrier caused by nuisance drivers and the success of the Dodgems project in the prevention of crime by individuals who have been identified as being at risk of offending.

In concluding their discussions, the Panel has expressed its satisfaction with the Partnership's performance in 2012-13 and supported the priorities contained in the Huntingdonshire Community Safety Plan 2011-14.

14. HUNTINGDONSHIRE TOWN AND PARISH CHARTER

Pursuant to Item No. 1 of their Report to the meeting of the Council held on 26th June 2013, the Panel has been acquainted with changes to the Huntingdonshire Town and Parish Charter, which have been made following consultation on it with all Town and Parish Councils. Members acknowledge that the Charter will be a living document that will have to be amended to accommodate changes such as the potential introduction of Local Joint Committees, the parish planning process and initiatives announced by the Department for Communities and Local Government relating to the Localism Act.

The Panel has suggested that in view of the extension of homeowners' and businesses' rights, the District Council should inform Town and Parish Councils of extensions that are taking place through permitted development. Provision to this effect should be made in Appendix C of the Charter document.

15. REPORT ON THE PERFORMANCE OF THE SHAPE YOUR PLACE HUNTINGDONSHIRE WEBSITE 1ST JULY 2012 – 30TH JUNE 2013

The Panel has reviewed the performance of the Shape Your Place website between 1st July 2012 and 30th June 2013. The site has attracted 15,707 individuals, 33,930 visits and 82,891 page views in its first year of operation. In total, 127 issues have been raised, of which 46 relate to District Council matters. Planning, parking and the maintenance of grass verges and hedges are the most common issues. A 3% improvement on performance levels has been set for this year and Members expect this target to be achieved.

Whilst expressing satisfaction with the website, the Panel has accepted that generally Members could do more to raise their own profiles through Shape Your Place and to utilise it as an effective tool for engaging with their constituents. It has been confirmed that all Ward Members are notified of any ward issues once they have been published on the website.

The County Council has allocated 0.5 FTE post to Huntingdonshire, whose role is to raise the profile of and develop the Huntingdonshire Shape Your Place website across local communities. There have been recent notable successes in the Ramsey area. Shape Your Place is less well used in other areas of the District. The Panel has recommended that initiatives to promote it should be given chance to have an effect before consideration is given to changing the areas covered by the seven Huntingdonshire sites. If changes to the boundaries are made in the future, it will be preferable if the any Local Joint Committee areas are wholly contained within single Shape Your Place sites.

A further report on the performance of Shape Your Place will be submitted to the Panel in a year's time.

16. CAMBRIDGESHIRE ADULTS, WELL-BEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Councillor J W G Pethard has been appointed as the Panel's representative on the Cambridgeshire Adults, Wellbeing and Health Overview and Scrutiny Committee. Councillor R C Carter is now the substitute Member. Matters currently being considered by the Committee include the future commissioning of older people's services, delayed discharge review and East of England Ambulance Service NHS Trust – Performance and Plans. With the latter in mind, the Panel has decided to remove Ambulance Service Provision from its work programme.

Other Matters of Interest

17. OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) – PROGRESS

The Panel has reviewed its programme of studies at each of its meetings. The Cambridgeshire Adults, Wellbeing and Health Overview and Scrutiny Committee has reaffirmed its wish for the Hinchingsbrooke Hospital Joint Working Group to continue to operate in the current Municipal Year. The Chairman will be meeting with the Chairman and Vice-Chairman of the Committee to discuss its work plan.

The Elderly Patient Care Working Group has met with representatives of Hinchingsbrooke Hospital Trust and Circle. A further meeting of the Working Group is being arranged. Brief updates have been delivered on the Voluntary Sector, Consultation Processes, Corporate Plan and Social Value Working Groups.

18. WORK PLAN STUDIES

The Panel has received details of studies being undertaken by the other Overview and Scrutiny Panels. Members have been reminded of the opportunity they have to participate in their studies should they wish.

19. NOTICE OF EXECUTIVE DECISIONS

The Panel has been acquainted with the current Notice of Executive Decisions at each of its meetings.

20. SCRUTINY

The Panel has considered the latest editions of the Decision Digest and discussed matters contained therein.

S J Criswell
Chairman