

Questions to the Health Committee. 12 January, 2017 from Jean Simpson

The Cambridgeshire and Peterborough Clinical Commissioning Group (CPCCG) published the Cambridgeshire and Peterborough Health Care System Sustainability and Transformation Plan (STP) (including appendices) on the 21 November 2016.

The CPCCG state that they have to save £500 million pounds from the Cambridgeshire and Peterborough health care system by 2020. However in the STP documents there is no evidence whatsoever about how they are going to save this amount of money, apart from beginning the downgrading of Hinchingsbrooke Hospital. In order to try to understand where the cuts in services are to be made, Margaret Ridley (Chair of Keep Our NHS Public, Cambridge), sent a Freedom of Information request to the CCG asking to see the entirety of the STP submission that had gone to NHS England, including the workforce and financial appendices. In other geographical areas, the examination of STP appendices has revealed the extent of proposed job losses and cuts to local services.

The CPCCG has declined the request saying that "the financial details of the plan are still under discussion with NHS England". The response to the request is attached.

Questions.

- 1) How can the Health Committee scrutinise the STP published on the 21st November 2016 when, according to the FOI request reply, this is not the final document?

The Health Committee can scrutinise the document that was presented to them at the December meeting but would expect to have sight and the option to scrutinise a final version of the STP. The Health Committee will ask the CCG to clarify its position on the documents provided.

- 2) Were the members of the Committee aware that this was not the final document?

Members sought clarification with representatives from the CCG at the meeting on the 15th December as to which document they should be scrutinising, clarification was given that it was the "Fit for the Future" document published on the 21st November. <http://www.fitforfuture.org.uk/what-were-doing/publications/>. At no time during this meeting were members told that this was not the final document however the CCG did refer to missing appendix(s) that still required sign off through the appropriate NHS channels. Assurances were given that the Health Committee would receive these once they were finalised.

- 3) When is the Committee expected to make a decision about whether the proposals are in the interests of the health service and the community it serves?

4)

The Health Committee in its scrutiny role is not a decision making body, this can be confusing as it has a dual role as an executive committee for the councils public health function in which decisions are made often at the same meetings.

Health scrutiny is a fundamental way by which democratically elected local councillors are able to voice the views of their constituents, and hold relevant NHS bodies and relevant health service providers to account. The primary aim of health scrutiny as stated by the Department of Health in guidance is to strengthen the voice of local people ensuring that their needs and experiences are considered as an integral part of the commissioning and delivery of services and that those services are effective and safe

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/324965/Local_authority_health_scrutiny.pdf

As I noted at the December Health Committee we intend to conduct a robust scrutiny that will require looking in depth at specific elements within the STP proposals. It is also important to note that any “significant service changes” that result from the proposals in the STP are subject to independent statutory consultation with the Health Committee on each service change. Members of the Health Committee will then be able to provide clear recommendations for each proposal.

- 5) When is the Committee expected to make a decision the adequacy of the consultation process and whether sufficient time has been allowed for, given the fact that detailed information is being released in stages?

It is our understanding that the CCG is conducting an “engagement process” rather than a formal consultation. The CCG was provided with questions from the Health Committee for the meeting on 15th December. Responses received have indicated that there is five strands to the engagement. We will be focusing our meeting today on GP and Public engagement.

- . Patient engagement in specific work streams
- . Wider public engagement about awareness raising of the challenges the NHS is facing
- . Wider engagement or consultation about specific areas of change
- . Clinical engagement
- . Staff engagement