

## HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

Tuesday, 23 July 2019

**PRESENT** – Councillors Clarke, Donoghue, Heslop and Newall

**APOLOGIES** – Councillors Bell, Dr. Chou, Layton, Lee, McEwan and K Nicholson

**ALSO IN ATTENDANCE** – Michael Houghton (NHS Darlington Clinical Commissioning Group), Gillian Curry (County Durham and Darlington Foundation Trust), Levi Buckley (Tees Esk and Wear Valleys Foundation Trust) and Diane Lax (Healthwatch Darlington)

**OFFICERS IN ATTENDANCE** – Hannah Fay (Democratic Officer)

### HP9 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

### HP10 PROPOSALS FOR NEW CLINICAL COMMISSIONING GROUPS FOR TEES VALLEY AND DURHAM CCGS

Michael Houghton, Director of Commissioning, Strategy and Delivery, NHS Darlington Clinical Commissioning Group (CCG) gave a PowerPoint presentation to Members on behalf of County Durham and the Tees Valley CCG's which provided members with information on the proposals for new CCG's for Tees Valley and Durham CCG's.

Members were advised of the current arrangements for the CCG's that cover Teesside, Darlington and Durham, of which there were five; these CCG's commission services for over 1.2 million people; and that one Accountable Officer and a combined management structure was in place for all five CCG's. Members were advised of what CCG's do and that the proposed merger was an administrative change only which would not affect services provided.

Details were provided of the reasons for the proposed changes, including requirements of the NHS Long Term Plan to have fewer CCG's and to reduce running costs by 20%; and there were four proposed options, these were:

1. Single CCG across the ICS i.e. Cumbria and the North East
2. Single CCG across the 5-CCG collaborative: merger of Darlington CCG, Durham Dales, Easington & Sedgfield CCG; Hartlepool & Stockton-On-Tees CCG; North Durham CCG and South Tees CCG.
3. Single CCG across each Integrated Care Partnership: i.e. the southern ICP (South Tees CCG, Hartlepool and Stockton on Tees CCG and Darlington CCG) and the central ICP (Durham Dales, Easington and Sedgfield CCG, North Durham CCG, South Tyneside CCG and Sunderland CCG)
4. Two CCGs with a shared management structure i.e. a single Tees Valley CCG and a single Durham CCG whilst retaining a shared management structure

Members were informed of the preferred option by the CCG Governing Bodies, option 4, and the reasons for this being the best option.

Members raised concern regarding option 4 and how two separate CCG's would link.

It was confirmed that services were commissioned globally and adapted to the local population; that services were based on national standards; and in respect of TEWV there was a Mental Health and Learning Disability Partnership covering the current CCG's who work as a group to set contract standards.

Members questioned the level of public engagement for the proposals. Members were advised that Healthwatch had undertaken a survey seeking the views of members of the public; that a formal consultation had not been undertaken; that County Durham and the Tees Valley CCGs had engaged with and sought the views of local authorities, NHS providers, Health and Well Being Boards and Scrutiny Committees; and this feedback would be discussed when the Governing Bodies consider the merger proposal at their meetings in August 2019.

Following a question relating to the 20% required reduction in running costs, Members were advised that the monetary value was millions, an exact figure would be confirmed and shared; that 14% had been saved to date and the full 20% was required to be saved by the end of the financial year.

Discussion ensued in respect of budget arrangements for option 4; Members stated that other CCG's were in a budget deficit and Darlington was breaking even; and raised concern in respect of the impact these deficits would have on Darlington. Members were advised that the budget allocation had been published until 2021; that budgets would be combined when CCGs merge, however money would not be reallocated as money was invested in services; and that existing financial plans would remain in place.

A Member raised concern regarding possible impact of the proposed change on the 111 service and was advised that the 111 service was provided by NEAS, covering the North East, and that there would be no impact.

Discussion ensued regarding potential job losses as a result of the proposed change; roughly six posts had been lost at a senior level, however a number of these roles were absorbed and new roles created and some staff members had retired; there had been no redundancies; and that this would be a last resort.

**RESOLVED** – (a) That the representative from NHS Darlington Clinical Commissioning Group be thanked for the presentation.

(b) That Members of this Scrutiny Committee forward any comments and views on the proposals to the Director of Commissioning, Strategy and Delivery, NHS Darlington Clinical Commissioning Group (CCG) by 30 July 2019.