

# Agenda



## **AGENDA FOR A MEETING OF THE HEALTH SCRUTINY COMMITTEE IN THE COUNCIL CHAMBER, COUNTY HALL, HERTFORD ON WEDNESDAY 9 MAY 2018 AT 10.00 A.M.**

### **MEMBERS OF THE COMMITTEE (20) - QUORUM 7**

#### **COUNTY COUNCILLORS (10)**

S Brown; E H Buckmaster; M A Eames-Petersen; F Guest; D Hart; M S Hearn;  
D J Hewitt; S Quilty (*Chairman*); M A Watkin (*substituting for R G Tindall*); C J White  
(*Vice Chairman*);

#### **DISTRICT/BOROUGH COUNCILLORS (10)**

J Birnie (Dacorum); B Gibbard (St Albans); K Hastrick (Watford); J Green (North  
Herts); D Lambert (Hertsmere); M McKay (Stevenage); G Nicholson (Broxbourne); A  
Scarth (3 Rivers); N Symonds (East Herts); F Thomson (Welwyn Hatfield)

Meetings of the Scrutiny Committee are open to the public (this includes the press) and attendance is welcomed. However, there may be occasions when the public are excluded from the meeting for particular items of business. Any such items are taken at the end of the public part of the meeting and are listed under "Part II ('closed') agenda".

The Council Chamber is fitted with an audio system to assist those with hearing impairment. Anyone who wishes to use this should contact main (front) reception.

#### **Members are reminded that:**

- (1) if they consider that they have a Disclosable Pecuniary Interest in any matter to be considered at the meeting they must declare that interest and must not participate in or vote on that matter unless a dispensation has been granted by the Standards Committee;**
- (2) if they consider that they have a Declarable Interest (as defined in paragraph 5.3 of the Code of Conduct for Members) in any matter to be considered at the meeting they must declare the existence and nature of that interest but they can speak and vote on the matter**

### **PART I (PUBLIC) AGENDA**

#### **1. MINUTES [SC.8]**

To confirm the Minutes of the meetings held on 15 & 29 March 2018 and 21 March 2018

## **2. PUBLIC PETITIONS [SC.11]**

The opportunity for any member of the public, being resident in Hertfordshire, to present a petition relating to a matter with which the Council is concerned, which is relevant to the remit of this Committee and which contains signatories who are either resident in or who work in Hertfordshire.

Members of the public who are considering raising an issue of concern via a petition are advised to contact their [local member of the Council](#). The Council's criterion and arrangements for the receipt of petitions are set out in [Annex 22 - Petitions Scheme](#) of the Constitution.

If you have any queries about the petitions procedure for this meeting please contact Elaine Manzi, by telephone on (01992) 588062 or by e-mail to [elaine.manzi@hertfordshire.gov.uk](mailto:elaine.manzi@hertfordshire.gov.uk).

At the time of the publication of this agenda no notices of petitions have been received.

## **3. UPDATE ON FORMALISING RELATIONS BETWEEN WEST HERTFORDSHIRE HOSPITAL TRUST AND THE ROYAL FREE HOSPITAL**

*Presentation by the Deputy Chief Executive - WHHT*

## **4. RESPONSE TO REPORT OF THE WHOLE COMMITTEE SCRUTINY OF HERTS VALLEYS CLINICAL COMMISSIONING GROUP'S DECISION FOR FUNDING NASCOT LAWN SERVICES**

*Reports of the Head of Scrutiny*

## **5. WORK PROGRAMME UPDATE**

*Report of the Head of Scrutiny*

## **6. OTHER PART I BUSINESS**

Such Part I (public) business which, if the Chairman agrees, is of sufficient urgency to warrant consideration.

**7. ITEMS FOR REPORT TO THE COUNTY COUNCIL (Standing Order SC. 7(2))**

To agree items for inclusion in the Committee's report to County Council.  
In the absence of a decision, a summary of all items will be reported

**PART II ('CLOSED') AGENDA  
EXCLUSION OF PRESS AND PUBLIC**

There are no items of Part II (Confidential) business on this agenda. If items are notified the Chairman will move:

*"That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraph ... of Part 1 of Schedule 12A to the said Act and the public interest in maintaining the exemption outweighs the public interest in disclosing the information."*

If you require a copy of any of the reports mentioned above or require further information about this agenda please contact Elaine Manzi, Democratic Services Manager, Legal, Democratic and Statutory Services, on telephone no. 01992 588062 or email [elaine.manzi@hertfordshire.gov.uk](mailto:elaine.manzi@hertfordshire.gov.uk)

Agenda documents are also available on the internet at

<http://cmis.hertfordshire.gov.uk/hertfordshire/CabinetandCommittees.aspx>

**KATHRYN PETTITT  
CHIEF LEGAL OFFICER**

# Minutes



To: All Members of the Health  
Scrutiny Committee, Chief  
Executive, Chief Officers, All  
officers named for 'actions'

From: Legal, Democratic & Statutory Services  
Ask for: Elaine Manzi  
Ext: 28062

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## HEALTH SCRUTINY COMMITTEE

THURSDAY 15 MARCH 2018 & THURSDAY 29 MARCH 2018

## MINUTES

15 MARCH 2018

## ATTENDANCE

### MEMBERS OF THE COMMITTEE (20) - QUORUM 7

#### COUNTY COUNCILLORS (10)

E H Buckmaster; M A Eames-Petersen; F Guest; D Hart; D J Hewitt; S Quilty  
(Chairman); N Quinton (substituting for R G Tindall); C J White (Vice Chairman);

#### DISTRICT COUNCILLORS (10)

A Alder (substituting for N Symonds (East Herts); J Birnie (Dacorum); B Gibbard (St  
Albans); D Lambert (Hertsmere); M McKay (Stevenage); A Scarth (3 Rivers); F  
Thomson (Welwyn Hatfield)

#### OTHER MEMBERS IN ATTENDANCE:

P Bibby, J Billing, J S Hale, T Howard, J R Jones,

Upon consideration of the agenda for the Health Scrutiny Committee meeting on  
Thursday 15 & 29 March 2018 as circulated, copy annexed, conclusions were  
reached and are recorded below.

*Note: No conflicts of interest were declared by any member of the Committee in  
relation to the matters on which conclusions were reached at this meeting.*

## CHAIRMAN'S INITIALS

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## **PART 1 ('OPEN') BUSINESS**

### **1. MINUTES**

- 1.1 The minutes of the meeting of the 18 January 2018 were agreed and signed by the Chairman.

### **2. PUBLIC PETITIONS**

- 2.1 None received.

### **3A. ANNUAL SCRUTINY OF HEALTH ORGANISATIONS QUALITY ACCOUNTS 2018/19**

#### **Officer Contact:**

Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 3.1 The Chairman welcomed all Members and officers present to the Committee's Annual Scrutiny of the health trusts Quality of Care Accounts.
- 3.2 Members received an introduction to the scrutiny and a summary by the Head of Scrutiny, reminding members of the format for the Committee's scrutiny.
- 3.3 The Committee then adjourned to gather its evidence.
- 3.4 The Committee broke into three groups to gather its evidence and focussed on six local trusts.
- West Herts Hospital Trust (WHHT)
  - North Herts Hospital Trust (ENHT)
  - Herts Partnership Foundation Trust (HPFT)
  - Herts Community NHS Trust (HCT)
  - East of England Ambulance Trust (EEAST)
  - Princess Alexandra Hospital (PAH)
- 3.5 Members of the Committee were divided into six Member Groups, with each group focusing its evidence gathering based on the written responses that had been provided by the organisations plus supplementary questions.
- 3.6 All members of the Council had been notified of the scrutiny and invited to attend. A number of members had accepted this invitation and participated in the evidence gathering part of the scrutiny.

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- 3.7 At the end of the evidence gathering process the session closed.

***The Committee reconvened on 29 March 2018 to consider its recommendations, information requests and additions to the work programme.***

#### **MEMBERS OF THE COMMITTEE**

S Brown; E H Buckmaster; M A Eames-Petersen; F Guest; D Hart; D J Hewitt; S Quilty (*Chairman*); N Quinton (*substituting for R G Tindall*); C J White (*Vice Chairman*);

#### **DISTRICT COUNCILLORS**

A Alder (*substituting for N Symonds (East Herts)*); S Deakin-Davies (*substituting for J Green (North Herts)*) B Gibbard (St Albans); M McKay (Stevenage); A Scarth (3 Rivers); F Thomson (Welwyn Hatfield)

#### **Other Members In Attendance**

J Billing, R C Deering, T Howard,

3B

#### **SCRUTINY OF NHS IN HERTFORDSHIRE'S QUALITY ACCOUNTS FOLLOW UP: DRAFT REPORT**

##### **Officer Contact:**

Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 3.8 The Committee considered a draft report summarising the recommendations, future scrutinies, seminars, site visits, bulletins, system risks and trust observations proposed as a result of the Committee's evidence gathering session on 15 March 2018.

As a result of discussion on the report it was agreed that the report be revised and finalised to reflect the views expressed at the meeting

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**3.9 CONCLUSIONS**

1. Members thanked the NHS organisations for the responses they had provided to the Committee which had contributed to a very successful scrutiny and also thanked Healthwatch for the contribution they had made to the event.

2. The Committee agreed:-

- (a) that the Committee's report be revised to reflect discussion at the meeting.
- (b) that the final report be sent to the Trusts for response by 20 April 2018.

**4. OTHER PART I BUSINESS**

Such Part I (public) business which, if the Chairman agrees, is of sufficient urgency to warrant consideration.

There was no other Part I business

**5. ITEMS FOR REPORT TO THE COUNTY COUNCIL  
(STANDING ORDER SC. 7(2))**

To agree items for inclusion in the Committee's report to County Council. In the absence of a decision, a summary of all items will be reported

**KATHRYN PETTITT  
CHIEF LEGAL OFFICER**

**CHAIRMAN.....**

**CHAIRMAN'S  
INITIALS**

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# Minutes



To: All Members of the Health  
Scrutiny Committee, Chief  
Executive, Chief Officers, All  
officers named for 'actions'

From: Legal, Democratic & Statutory Services  
Ask for: Elaine Manzi  
Ext: 28062

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## **SPECIAL HEALTH SCRUTINY COMMITTEE**

**WEDNESDAY 21 MARCH 2018**

### **M I N U T E S**

#### **ATTENDANCE**

##### **MEMBERS OF THE COMMITTEE (20) - QUORUM 7**

###### **COUNTY COUNCILLORS (10)**

S Brown; E H Buckmaster; M A Eames-Petersen; D Hart; D J Hewitt; T Howard  
(*substituting for F Guest*); S Quilty (*Chairman*); M A Watkin (*substituting for R G  
Tindall*); C J White (*Vice Chairman*);

###### **DISTRICT COUNCILLORS (10)**

J Birnie (Dacorum); S Deakin Davis (*substituting for J Green (North Herts)*); A Scarth  
(3 Rivers); N Symonds (East Herts); F Thomson (Welwyn Hatfield)

###### **OTHER MEMBERS IN ATTENDANCE:**

N Bell, T Heritage, C B Wyatt-Lowe

Upon consideration of the agenda for the Special Health Scrutiny Committee  
meeting on Wednesday 21 March 2018 as circulated, copy annexed, conclusions  
were reached and are recorded below.

*Note: No conflicts of interest were declared by any member of the Committee in  
relation to the matters on which conclusions were reached at this meeting.*

#### **CHAIRMAN'S INITIALS**

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## **PART 1 ('OPEN') BUSINESS**

### **1. MINUTES**

- 1.1 As this was a special meeting of the committee there were no minutes to be agreed. Minutes of the meeting of the committee held on 15 and 29 March will be considered at the next ordinary meeting.

### **2. PUBLIC PETITIONS**

- 2.1 None received.

### **3. SCRUTINY OF HERTS VALLEYS CLINICAL COMMISSIONING GROUP'S PROPOSAL TO WITHDRAW £600,000 FUNDING FROM NASCOT LAWN NHS RESPITE CENTRE (THE "PROPOSAL")**

#### **Officer Contact:**

Natalie Rotherham Head of Scrutiny (Tel: 01992 588485)

- 3.1 The Chairman outlined the structure and purpose of the Committee to attendees. Members were reminded that the special meeting had been called as Herts Valleys Clinical Commissioning Group (HVCCG) wished to carry out a consultation on the proposal to withdraw £600k of funding from Nascot Lawn, in accordance with regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (SI 2013 / 218) (the Regulations).
- 3.2 The Committee were reminded that the request from HVCCG had been as a result of a Judicial Review undertaken on 6 & 7 February 2018. The Court Determined that respite services, at Nascot Lawn, were health provision and therefore that HVCCG's previous decision to withdraw £600k of funding from Nascot Lawn was unlawful as it was a substantial variation in the health service and HVCCG should have consulted the County Council..
- 3.3 The Chairman advised that a number of witnesses had been called to the meeting today and stressed to the Committee that any discussion or agreements made by Members during the meeting should be based on the evidence provided for and heard during the meeting, and not any information provided for or heard any previous meetings where the subject of Nascot Lawn had been discussed.

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- 3.4 The Chairman invited the representatives of **Herts Valleys Clinical Commissioning Group (HVCCG)** to address the meeting.
- 3.5 Members heard that HVCCG fully accepted the decisions made by the court, and highlighted that out of the six grounds on which they were challenged, the judge had only upheld the requirement for HVCCG to consult with the Local Authority regarding the withdrawal of funding. The remaining five grounds for the judicial review had been dismissed.
- 3.6 It was noted that the remaining five grounds were as follows:
- Failure to assess the needs of users
  - Failure to consult
  - Breach of the Public Sector Equality Duty set out in section 149 of the Equality Act 2010
  - Breach of Art 8 of the ECHR taken with Art 3 of the UNCRC
- 3.7 Members heard that HVCCG recognised how difficult the continued uncertainty regarding the future of Nascot Lawn was for parents, and assurance was received that discussions would be ongoing between the council and both CCGs to find a resolution.
- 3.8 HVCCG also expressed, on behalf of the CCG Board, its sympathy and admiration for the parents and children affected .
- 3.9 It was advised that the final decision regarding the proposal to withdraw £600k of funding from Nascot Lawn would be made at HVCCG's Finance and Performance Committee scheduled to be held on the 3 May 2018. It was explained that that Committee was chaired by a Lay Member, and its membership included senior directors of HVCCG, GP's and clinical managers.

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- 3.10 The Committee's attention was then drawn to the proposed agreement for an alternative funding proposal contained within the committee papers, (at Appendix Dx), which outlined that HVCCG and East & North Herts Clinical Commissioning Group (ENHCCG) would each provide the council with £100k per annum to support overnight short breaks for children and young people with complex health needs should the decision be made by HVCCG to withdraw the full £600k of funding at its meeting on 3 May 2018. This proposal also had the agreement of Hertfordshire County Council
- 3.11 Members received assurance that HVCCG would also continue to work with Hertfordshire Community Trust (HCT) to ensure that HCT were able to restore its contracted position of commissioned service provision for the children and families currently using Nascot Lawn during the transition period.
- 3.12 Members were advised that HVCCG also commissioned Community Children's Nurses - who specialised in working with children with complex needs and requiring end of life care.
- 3.13 The Committee were reminded of the considerable financial challenges faced by HVCCG, and it was stressed that difficult decisions had to be made to achieve savings across the entire portfolio of commissioned services. These had been detailed within the recent Let's Talk Consultation.
- <http://www.hertsviewpoint.co.uk/events-collection/a-healthier-future-lets-talk-nhs-consultation-on-local-services>
- 3.14 The Chairman maintained that such a decision should be taken to the by the main executive board of HVCCG and not the Finance and Performance Committee. It was explained that under the current governance structure of HVCCG, the Finance & Performance Sub-Committee has delegated powers and is the appropriate body, to make this type of decision.
- 3.15 Assurance was received that although an alternative funding agreement had been proposed and shared with the Health Scrutiny Committee, the outcome of the meeting of the HVCCG's Finance and Performance Committee on the 3 May 2018 was not predetermined and the members of the Finance and Performance Committee would discuss the proposal to withdraw £600k of funding from Nascot Lawn with an open mind.

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- 3.16 In response to a Member question, it was established that the figure of £100k per CCG outlined in the alternative funding proposal had been based on the discussions in November 2017, where it was understood that five children from Nascot Lawn would be eligible for continuing healthcare funding by Herts Valleys CCG. It was calculated that this would cost £20k per year per child. ENHCCG had subsequently agreed to match this funding.
- 3.17 The Chairman invited officers from **Hertfordshire County Council's Childrens Services** to address the meeting.
- 3.18 The Committee heard that the Local Authority were pleased with the intention of both CCGs to work together with the Council, in an integrated way, to provide short breaks for special needs children and young people and their parents. It was noted that this was in line with the Council's longstanding plan to provide a 'local offer' to children and young people with special or complex needs.
- 3.19 It was noted that the intention, should the full £600k be withdrawn and the alternative funding agreement be implemented, that the £100k from HVCCG would be used to fund a senior nurse and two other nurses, whose combined skills would meet the needs of a majority the children.
- 3.20 It was further noted that all children were assessed on a case by case basis and any children with particularly complex needs, which would require additional support would receive funding through either CCGs continuing healthcare (CHC) budget in addition to the £100k.
- 3.21 The Committee were advised that to date eight children have been transitioned from Nascot Lawn and are receiving short breaks at other settings, 19 are in the process of transition and a further 16 are yet to have an agreed transitional setting.
- 3.22 It was established that the delay in transitioning was due to the complexity of need of some of the children and young people and also the capacity issue at the other respite centres.
- 3.23 Members learnt that to improve capacity, a feasibility study at West Hyde (one of the other respite centres in the county), had found that a greater proportion of children could be accommodated if the property was extended to create two extra bedrooms.

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- 3.24 In response to a Member question, Members received assurance that the Local Authority were confident that all the children currently attending Nascot Lawn would receive an appropriate alternative respite provision at least as good as they were currently receiving.
- 3.25 In response to a Member concern that CHC (continuing health care) budget meetings, where decisions regarding CHC funding were made, were not attended by parents of the children, assurance was received that representatives from the Local Authority attended CHC panel meetings, and because representatives from the Council regularly liaised with parents of children and young people this ensured that their views were included.
- 3.26 It was also established that the Council also intends to reinstate its Short Breaks panel, attended by parents, to ensure that parental views on what they would require from their short breaks allocation was heard and recorded.
- 3.27 The Committee were advised that in terms of future need for new children requiring a respite service, this would be undertaken at a single point of entry through the council's 0-25 service. Currently this is utilised by ENHCCG, and it has been agreed that HVCCG will use this moving forward.
- 3.28 The Chairman invited officers from **East & North Herts Clinical Commissioning group (ENHCCG)** to address the meeting.
- 3.29 The Committee learnt that ENHCCG also welcomed the progress in joint working with HVCCG and the Council with regard to short breaks and Members received assurance that work would continue with parents to get the best outcomes for the families.
- 3.30 Members were advised that from ENHCCG's perspective the key issues to address were personalisation of care, effective use of personal budgets and ensuring that there was a consistent assessment process.
- 3.31 In response to a Member question, it was established that ENHCCG had agreed to match HVCCG's contribution to the alternative funding plan of £100k, as it was a sum that both CCGs and the local authority could agree on, and was a good starting point to continue discussions in a constructive way.

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- 3.32 During discussion it was established that any discussion regarding an inflation linked increase to future payments was yet to be agreed. It was noted that should the alternative funding proposal be implemented, this would be undertaken through an annual review of the agreement.
- 3.33 The Chairman invited **Angela Kitching, parent representative**, to address the meeting
- 3.34 It was suggested to the Committee that since the last time parents had addressed Members of the council, the consequent recommendations made by Members had been ignored by HVCCG resulting in the case twice being taken to the High Court. As a result of this, the families did not have faith in the scrutiny process as HVCCG had previously ignored the outcome of previous scrutiny meetings. The Committee were urged to ensure that HVCCG did not ignore Members on this occasion.
- 3.35 Members were provided with the details of a number of fundamental future requirements for respite care by parents of children with special and complex needs as outlined in the report, these included:
- the need for a registered nurse even if the child(ren) did not qualify for CHC funding;
  - easy accessibility to the centre (no more than 20 minutes' drive);
  - easy accessibility to the named hospital from the centre where the child(ren) receive care to ensure continuity of acute care if required;
  - the need for the alternative respite centre to be suitable and safe (in light of current issues with capacity, staffing and accessibility);
  - an appropriate pathway for 3 age groups with differing needs (0-5, 5-17, 17-25);
- Members noted that currently, parents are not confident that any of these issues were being considered or would be addressed.
- 3.36 The Committee were advised that the impact of the impending threat of closure of Nascot Lawn through withdrawal of funds was already having a detrimental impact on parents and families. Due to staff leaving the centre because of the ongoing uncertainty, parents and children were now only receiving a quarter of the respite care they were entitled to. This was leading to concerns that parents may now be presenting with

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mental health issues due to the stress, and siblings also feeling pressured. It was highlighted that it was a crucial time for siblings as number of them were undertaking exams.

- 3.37 Members were also advised that there had also been cases where children with the most complex of needs had needed to remain in hospital due to the lack of respite provision, resulting in beds that could have been used for other patients being taken for longer periods than necessary. Members were provided with examples of where this had occurred.
- 3.38 It was reiterated to Members that, in the nine months since the initial announcement regarding the withdrawal of funding had been made, only eight children had successfully transitioned from Nascot Lawn to other respite settings which evidenced how complex the needs of the children were. It was illustrated that even something as apparently straightforward as transferring a bed had taken a significant amount of time to organise.
- 3.39 Members also heard that training the appropriate staff for the alternative respite provisions was something that was also a lengthy process. It was explained that for children who did not qualify for CHC funding the medical requirements of the children (such as the management of a Hickman line) was something that could only be undertaken by a registered nurse.
- 3.40 In response to a Member query, the Chairman acknowledged the presence of other parents in the public gallery, but stressed that due to the process of the meeting, Ms Kitching and the two parent representative organisations would be representing their views.
- 3.41 In discussing the report, Members learnt that since the initial announcement by HVCCG to withdraw funding, no 'new' children had been referred to Nascot Lawn, leading to concerns that there were a number of children within the county not gaining access to respite care. It was suggested that both parents and health professionals were now unclear of where to refer children requiring the service.
- 3.42 During discussion it was reiterated that the uncertainty of the future was the key concern for parents, particularly for those who did not qualify for CHC funding. It was suggested that there was no clear structure or process for any child in crisis.
- 3.43 It was also repeated that parents believe that the alternative respite provision could not meet the needs of the children, due

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to the lack of specialist staff, capacity, and lack of accessibility, especially for children with large specialist wheelchairs.

- 3.44 Members also heard that another key factor for consideration was that it was whether it was possible to mix children with physical disabilities with those with behavioural issues. Due the reduced capacity of respite that the closure of Nascot Lawn would present, this would mean that more advanced planning would be required for parents requiring the service and there would be minimal opportunity to use the service at short notice.
- 3.45 Given the concerns, clearly articulated by parents and in the evidence provided in the papers for the meeting, parents believe that not all matters regarding Nascot Lawn would be resolved by November 2018 and that this date was 'aspirational'.
- 3.46 Members recalled that HVCCG had discussed the provision of Community Children's Nurses. It was acknowledged that, whilst the Community Children's Nurses had the requisite skills, it was suggested that this was not comparable to what was available on site at Nascot Lawn nor was it available 24 hours per day.
- 3.47 In response to a Member question, the Committee were advised that parents do not believe that they have been adequately engaged in the consultation surrounding the current proposal by HVCCG to withdraw funding from Nascot Lawn since the Judicial Review had taken place.
- 3.48 The Chairman invited the representative from **Carers in Herts** to address the Committee.
- 3.49 It was restated to the Committee the impact of caring for a child or young person with special needs on carers own mental and physical health, and also the wider impact experienced by other members of the family.
- 3.50 It was stressed to Members that it should be remembered that overnight short breaks were not a holiday, but crucial respite and a much needed break for the carers and families, and also an opportunity for the child/young person to experience an environment outside of the family home.
- 3.51 The Committee were advised that evidence had already been heard about the impact on parents due to the reduction of hours available at Nascot Lawn and it was maintained that this would only get worse should Nascot Lawn be forced to close

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completely.

- 3.52 Members discussed and acknowledged the significant challenge presented by the current and future reducing of respite provision at Nascot Lawn.
- 3.53 The Committee heard that Carers in Herts do not consider that they had not had a meaningful role in the consultation or had ongoing engagement with HVCCG.
- 3.54 The Chairman invited the representative from **Hertfordshire Parent Carer Involvement (HPCI)** to address the Committee
- 3.55 Members were provided with an explanation of the purpose of HPCI and were advised that HPCI was a Parent Carer Forum, where parents attended strategic meetings across the county.
- 3.56 It was noted that HPCI echoed the comments made in the meeting so far regarding the pressures on families, and the concerns that parents had not been consulted or engaged with by HVCCG before or since the judicial review. HPCI also confirmed that they do not perceive that it has consulted and engaged with by HVCCG.
- 3.57 Members expressed their disappointment about the apparent lack of consultation and engagement with parents by HVCCG before and since the judicial review had taken place.
- 3.58 The Chairman invited the representative from **Healthwatch Hertfordshire** to address the Committee.
- 3.59 Members heard that Healthwatch considered that moving forward, there was a positive message being heard about the alternative funding proposal that had been presented, but was concerning to hear that there were a number of issues highlighted in their report that were outstanding, particularly the ongoing lack of consultation with parents, and the impact of the reduced respite on families.
- 3.60 During discussion it was confirmed that Healthwatch Hertfordshire had expressed its concern within their report to the Committee about the inadequate exploration of the needs of the users by HVCCG when making its decision.
- 3.61 It was noted that, in line with its remit, Healthwatch Hertfordshire was briefed, but not consulted on the ongoing developments regarding the proposal to withdraw funding from Nascot Lawn.

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- 3.62 The Committee received confirmation that a number of parents contacted Healthwatch Hertfordshire subsequent to the initial announcement by Herts Valleys CCG that it intended withdrawing funding from Nascot Lawn.
- 3.63 The Chairman invited the representative from **Hertfordshire Community Trust (HCT)** to address the Committee.
- 3.64 The Committee were advised that HCT's current focus was to bring Nascot Lawn back to the commissioned level of service. It was noted that there were currently issues with staffing levels which had resulted in the reduction of respite availability already illustrated in the meeting.
- 3.65 In response to a Member question HCT confirmed that it would continue to provide staff training at other respite centres and would be willing to be part of any future respite provision that was commissioned.
- 3.66 Members received assurance that training was undertaken in conjunction with the local authority on an individualised basis and where required was bespoke, as it was recognised that some children and young people present as having very complex needs.
- 3.67 The Committee received confirmation that, as the previous notice period presented by HVCCG had been rescinded, HCT would continue to provide services at Nascot Lawn until such a time that any further notice period was presented. It was noted that, should HVCCG make the decision to withdraw the funding at their Finance and Performance Committee on the 3 May 2018, this would mean that HCT would continue to provide a commissioned service until the end of the six month notice period, which would expire in November 2018.
- 3.68 In response to a Member question as to how the staffing issues were being addressed, given the uncertain future of Nascot Lawn, it was explained that staff were being recruited into generic children's healthcare roles such as registered nurses and healthcare assistants that were initially assigned to Nascot Lawn with the view to them transferring to an alternative provision if required.
- 3.69 Members also received assurance that to ensure a duty of care to the families and children was maintained, it was HCT's intention to continue to support families up to and beyond the transition period if required.

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- 3.70 The Chairman invited representatives **Herts Valleys Clinical Commissioning Group (HVCCG)** to respond to the comments made by witnesses.
- 3.71 HVCCG stated that it was concerned that a number of factual inaccuracies had been presented to the Committee, particularly in relation to the comments regarding lack of consultation and engagement on the proposed withdrawal of funding.
- 3.72 Members were advised that parents, Carers In Herts, HPCI and Healthwatch Hertfordshire had all been extensively consulted with on the process and the Committee were reminded that in the outcome of the court hearing, the Judge had clearly confirmed that there had been an extensive consultation.
- 3.73 HVCCG also challenged the apparent misunderstanding of the responsibility of the areas of acute care, medical care and respite care. It was stressed that no acute care was undertaken at Nascot Lawn. This was undertaken in a medical setting and was the responsibility of the CCGs. Respite care was the responsibility of the local authority, but where a child requiring respite care had medical need, this was where the CCGs and the local authority would work together to provide the appropriate provision.
- 3.74 On return from adjournment for lunch, the Chairman and Head of Scrutiny summarised the morning's events.
- 3.7 Prior to Member debate, the Chairman allowed the Director for Public Health to provide a brief example of a joint agreement between the local authority and the CCGs by way of illustration to the committee to how these arrangements worked in practise.
- 3.76 The Chairman then proceeded to invite questions from Members to officers who had presented evidence in the morning sessions.
- 3.77 In response to a Member question regarding alternative uses for short break funds, it was noted that rather than using a respite provision, the carers could use the funding to pay a relative to look after the child or young person or use the funding towards allowing the child to attend an activity. It was stressed that the use of the funds would be carer led and would be discussed through the re-established short breaks carers group. Members noted that the local authority has a

**CHAIRMAN'S  
INITIALS**

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Brokerage Service to assist parents with managing any funding they receive.

- 3.78 In response to a Member question as to whether as the lead commissioner for Nascot Lawn, the Local Authority could register it as a children's home through Ofsted, it was explained that this option had already been explored, however to be eligible for children's home status the children would need to have single bedrooms, which was not possible or practical at Nascot Lawn.
- 3.79 Members expressed concern regarding the continued provision of respite and issues regarding transition. It was reemphasised that HCT would continue to work towards providing a full commissioned service until such a point that notice was given and completed.
- 3.80 In response to Member challenge regarding the evidence heard regarding lack of consultation with parents and partner organisations in the proposal to withdraw funding from Nascot Lawn, it was reiterated to Members that the judge in his ruling on the judicial review had stated that appropriate consultation had taken place, and had only upheld the decision regarding HVCCG's failure to formally consult with the local authority.
- 3.81 Members discussed the validity of HVCCG's counter challenge regarding the judge's ruling in more detail and the Committee's attention was drawn to point 17 of the ruling (Appendix L) which stated 'having reached this primary conclusion, it is strictly speaking unnecessary, and arguably otiose for me to pronounce on the remaining five grounds'.
- 3.82 The Committee noted that if the alternative funding arrangement discussed in the meeting was implemented, this would mean that overall funding from both CCGs would be reduced from £460,000 to £200,000. It was established that the shortfall will be met by the local authority and used to invest in the remaining three respite settings to extend the contracts and make the necessary adaptations and recruitment to accommodate all children. This will be a short term budget need as members were informed that the local authority will not be required to spend this money from beyond 2020/21.
- 3.83 On invitation from the Chairman, the representative from Carers in Herts took the opportunity to reiterate the undue stress for families caused by the uncertainty of future provision and the current reduction of provision of respite care.

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INITIALS**

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3.84 The Chairman thanked the parents and the officers from health providers and support organisations for attending the meeting. The Chairman concluded the discussion by repeating his earlier comment that the final decision regarding the withdrawal of funding from Nascot Lawn should take place at HVCCG's main Executive Board meeting and not the Finance & Performance Committee as indicated. This was acknowledged.

3.85 The meeting adjourned at 2.45pm to allow the Chairman, Vice Chairman and Labour Lead to discuss a motion and recommendation for the Committee to consider.

3.86 **CONCLUSION**

The meeting reconvened at 3.25pm. The following motion and recommendation was **proposed by the Chairman, S Quilty and seconded by J Birnie, District Member for Dacorum**:

'The Committee notes the progress that has now been made towards partnership working and the commitment from both HVCCG and E&NHCCG to support and provide services for children with complex health needs to safely access overnight short breaks.

However The Committee is not satisfied that the Proposal as put forward by HVCCG is in the interests of the health service but considers that it may be possible to reach an appropriate agreement with HVCCG.

The Committee has comments on the following aspects of the Proposal ("the Recommendations"):

Members raised the importance of active engagement with Parents, Carers, Carers Groups and Healthwatch in the future planning of any replacement service;

Members were concerned about the financial agreement that has been reached including the issues of revenue and capital. Members also raised concerns on the amount of funding and how the sums of money would be managed to address:

- Current and future needs,
- Equipment costs,
- Inflationary pressures

Members raised the importance of transparent decision making and responsibilities;

**CHAIRMAN'S  
INITIALS**

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Members were concerned about the availability of future respite provision and equity of location;

Members were concerned as to the impact on the wider health and social care system, the disruption and / or reduction in the level of respite service currently available;

Members were concerned about transition planning, staff costs and retention;

Members are concerned that the offer would leave any new arrangement initially underfunded and that the County Council would be required to meet the shortfall caused by the removal in funding;

Members considered that the new service should be in place before Nascot Lawn is decommissioned.

Members encouraged partnership working, putting the needs of children using respite services at the centre of decision making to provide proper health care and to avoid deviation from the Concordat.

The Committee agreed that:

1. A Report be prepared in accordance with Regulation 23(4) of The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 setting out the issues considered by the Committee and the Recommendations being in relation to:
  - a. Transitional arrangements
  - b. Financial contribution
  - c. Details of nursing available for OSB
  - d. Type and nature of legal agreement
  - e. Engagement and consultation
2. The Chief Legal Officer be authorised to take all necessary steps to prepare and submit the report referred to in 1 above in consultation with the Chairman of Health Scrutiny Committee. Such report to be submitted to HVCCG no later 4 April 2018
3. The HVCCG's decision on the Proposal and Recommendations, which will be taken on 3 May 2018,

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is further considered at the meeting of the Health Scrutiny Committee on 9 May 2018

4. The Committee will consider on 9 May 2018 whether any further action is required, including but not limited to the possibility of a recommendation that Full Council refer the final decision to the Secretary of State in accordance with Regulation 23(9) of the Regulations

The Motion and recommendation was voted on upon by the Committee by a show of hands. The Committee **unanimously** voted in favour of the motion and recommendation.

#### **4. OTHER PART I BUSINESS**

Due to the nature of the meeting, so other Part I business was considered

#### **5. ITEMS FOR REPORT TO THE COUNTY COUNCIL (STANDING ORDER SC. 7(2))**

To agree items for inclusion in the Committee's report to County Council. In the absence of a decision, a summary of all items will be reported

**KATHRYN PETTITT  
CHIEF LEGAL OFFICER**

**CHAIRMAN.....**

**CHAIRMAN'S  
INITIALS**

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**HERTFORDSHIRE COUNTY COUNCIL**

**HEALTH SCRUTINY COMMITTEE**

**WEDNESDAY, 9 MAY 2018 AT 10:00AM**

Agenda Item  
No:

**3**

**UPDATE ON FORMALISING RELATIONS BETWEEN WEST HERTFORDSHIRE  
HOSPITAL TRUST AND THE ROYAL FREE HOSPITAL**

Report of the Head of Scrutiny

Author: Natalie Rotherham, Head of Scrutiny

(Tel: 01992 588485)

**1. Purpose of report**

- 1.1 To update the Committee on the developing relationship between West Herts Hospital Trust (WHHT) and the Royal Free Hospital.

**2. Summary and Background**

- 2.1 The WHHT board has reviewed its current relationship with the Royal Free. In principle the Trust board has decided to formalise the affiliation and become a clinical partner. A formal decision will be taken following engagement with staff and partners.
- 2.2 The deputy chief executive of WHHT will attend the Committee to outline the current arrangement, how this could develop in the future and timelines.

**3. Recommendations**

- 3.1 The Committee notes the update.



**RESPONSE TO REPORT OF THE WHOLE COMMITTEE SCRUTINY OF HERTS  
VALLEYS CLINICAL COMMISSIONING GROUP'S DECISION FOR FUNDING  
NASCOT LAWN SERVICES**

Report of the Head of Scrutiny

Author: Charles Lambert, Scrutiny Officer (Tel: 01438 843630)

**1. Purpose of report**

- 1.1 To provide the Committee with the Herts Valleys Clinical Commissioning Group (HVCCG) response to recommendations from the Special Health Scrutiny Committee meeting 21 March 2018.

**2. Summary and Background**

- 2.1 HVCCG made a decision to withdraw £600,000 funding from Nascot Lawn. Nascot Lawn is a respite centre for children and young people with complex health and social care needs.
- 2.2 Parents challenged the CCG's decision. A judicial review was held in February 2018. At the conclusion of the hearing the judge stated that Nascot Lawn was a health provision and therefore any proposed changes would be a substantial variation.
- 2.3 A special Health Scrutiny Committee was held 21 March 2018 to scrutinise the proposal from HVCCG to remove £600k of funding for services at Nascot Lawn.
- 2.2 HVCCG presented a new collaborative funding position to the Committee.
- 2.3 The Committee made recommendations to HVCCG (attached as Appendix 1) which were scheduled to be considered as part of HVCCG's Finance & Performance Meeting to be held on 3 May 2018 where the decision regarding the future of Nascot Lawn's funding arrangements is due to be made.

- 2.4 An update report from Hertfordshire County Council's Children's Services is attached as Appendix 2 to this report. (Appendix 2 to follow)

### **3. Recommendations**

- 3.1 The Committee notes the outcome of HVCCG's Finance & Performance meeting held on 3 May 2018 and takes no further action.

OR

- 3.2 The Committee notes the outcome of HVCCG's Finance and Performance meeting on 3 May 2018 and recommends that Full Council makes a referral to the Secretary of State.

#### Background Information

Reports & Minutes of the Health Scrutiny Committee Nascot Lawn Topic Group held on 21 March 2018:

<https://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/817/Committee/12/SelectedTab/Documents/Default.aspx>

**THE LOCAL AUTHORITY (PUBLIC HEALTH, HEALTH AND WELLBEING BOARDS AND HEALTH  
SCRUTINY) REGULATIONS 2013**

**HERTFORDSHIRE COUNTY COUNCIL**

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**REPORT TO THE HERTS VALLEYS NHS CLINICAL COMMISSIONING GROUP**

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## **HERTFORDSHIRE COUNTY COUNCIL**

### **REPORT TO THE HERTS VALLEYS NHS CLINICAL COMMISSIONING GROUP UNDER REGULATION 23(4) OF THE LOCAL AUTHORITY (PUBLIC HEALTH, HEALTH AND WELLBEING BOARDS AND HEALTH SCRUTINY) REGULATIONS 2013**

#### **Preface**

In accordance with the County Council's constitution the Council's Health Scrutiny Committee is the statutory consultee for the purposes of The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

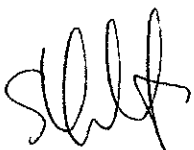
On 21 February 2018 Herts Valleys Clinical Commissioning Group gave notice to the County Council that it was consulting with the County Council in accordance with Regulation 23(1) of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 in respect of a Proposal to withdraw £600,000 funding from Nascot Lawn NHS Respite Centre (the "Proposal"); this Proposal amounting to a substantial variation of the health service in Hertfordshire.

This Report has been prepared in accordance with a Resolution of Hertfordshire County Council's Health Scrutiny Committee ("HSC") made at a special meeting of the Committee where the Proposal was considered.

#### **Summary**

On 21 March 2018 the Council's HSC took written evidence and heard oral evidence from officers of the County Council, HVCCG, East & North Herts Clinical Commissioning Group, Parents of the children using the Nascot Lawn NHS Respite Centre, Hertfordshire Community NHS Trust, Healthwatch Hertfordshire, Carers in Herts and Hertfordshire Parent Carers Involvement Group. HSC took time to debate the issues and passed a resolution setting out the Committees' Comments and Recommendations on the Proposal, in accordance with Regulation 23(4) of the Local Authority (Public Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

Health Scrutiny Committee hopes the account of the evidence gathered, the Comments and the Recommendations that it has made, as set out in this report, will be accepted by Herts Valleys Clinical Commissioning Group when considering their final decision on the Proposal.



**Seamus Quilty**  
**Chairman**  
**Health Scrutiny Committee**



**REPORT TO THE HERTS VALLEYS NHS CLINICAL COMMISSIONING GROUP UNDER REGULATION 23(4) OF THE LOCAL AUTHORITY (PUBLIC HEALTH, HEALTH AND WELLBEING BOARDS AND HEALTH SCRUTINY) REGULATIONS 2013**

**Authority for the Making of the Report**

1. This Report is made under Regulation 23(4) of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (**"the Regulations"**) and any reference by number to a particular Regulation is a reference to that numbered Regulation in the Regulations).
2. The making of this Report was authorised by Hertfordshire County Council's Health Scrutiny Committee at a special meeting of the Committee held on 21 March 2018, at which the Committee passed the following motion:

*The Committee agrees that:*

1. *A Report be prepared in accordance with Regulation 23(4) of The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 setting out the issues considered by the Committee and the Recommendations being in relation to:*
  - a. *Transitional arrangements*
  - b. *Financial contribution*
  - c. *Details of nursing available for OSB*
  - d. *Type and nature of legal agreement*
  - e. *Engagement and consultation*
2. *The Chief Legal Officer be authorised to take all necessary steps to prepare and submit the report referred to in 1 above in consultation with the Chairman of Health Scrutiny Committee. Such report to be submitted to HVCCG no later 4 April 2018*
3. *The HVCCG's decision on the Proposal and Recommendations, which will be taken on 3 May 2018, is further considered at the meeting of the Health Scrutiny Committee on 9 May 2018*
4. *The Committee will consider on 9 May 2018 whether any further action is required, including but not limited to the possibility of a recommendation that Full Council refer the final decision to the Secretary of State in accordance with Regulation 23(9) of the Regulations"*

## Subject Matter of the Report

3. The report relates to the scrutiny undertaken by the Council's Health Scrutiny Committee ("HSC") of the Proposal by the Herts Valleys NHS Clinical Commissioning Group ("HVCCG") on 1 to withdraw £600,000 of funding from Nascot Lawn NHS Respite Centre ("the Proposal").

## List of Documents

4. The following documents are attached to this report:

D1 – Agenda pack for Special Scrutiny Meeting

D2 – List of participants involved in the scrutiny

## Summary of Comments made by HSC

5. *"The Committee notes the progress that has now been made towards partnership working and the commitment from both HVCCG and E&NHCCG to support and provide services for children with complex health needs to safely access overnight short breaks.*

*However The Committee is not satisfied that the Proposal as put forward by HVCCG is in the interests of the health service but considers that it may be possible to reach an appropriate agreement with HVCCG.*

*The Committee has comments on the following aspects of the Proposal ("the Recommendations"):*

*Members raised the importance of active engagement with Parents, Carers, Carers Groups and Healthwatch in the future planning of any replacement service*

*Members were concerned about the financial agreement that has been reached including the issues of revenue and capital. Members also raised concerns on the amount of funding and how the sums of money would be managed to address:*

- *Current and future needs,*
- *Equipment costs,*
- *Inflationary pressures*

*Members raised the importance of transparent decision making and responsibilities.*

*Members were concerned about the availability of future respite provision and equity of location.*



*Members were concerned as to the impact on the wider health and social care system, the disruption and / or reduction in the level of respite service currently available.*

*Members were concerned about transition planning, staff costs and retention.*

*Members are concerned that the offer would leave any new arrangement initially underfunded and that the County Council would be required to meet the shortfall caused by the removal in funding.*

*Members considered that the new service should be in place before Nascot Lawn is decommissioned.*

*Members encouraged partnership working, putting the needs of children using respite services at the centre of decision making to provide proper health care and to avoid deviation from the Concordat.*

6. Further detail in relation to these Comments is to be found at Paragraphs 47 to 50 of this report.

#### **Statutory Process engaged in the making of the Report**

7. Regulation 23 of the Regulations sets down the statutory process by which a health body is required to consult with local authorities about the provision of health services within that local authority area. So far as is relevant at this stage, Regulation 23 provides that:

(1) Subject to paragraphs (2) and (12) and regulation 24, where a responsible person ("R") has under consideration any proposal for a substantial development of the health service in the area of a local authority ("the authority"), or for a substantial variation in the provision of such service, R must—

(a) consult the authority;

(b) when consulting, provide the authority with—

(i) the proposed date by which R intends to make a decision as to whether to proceed with the proposal; and

(ii) the date by which R requires the authority to provide any comments under paragraph (4);

(c) inform the authority of any change to the dates provided under paragraph (b); and

(d) publish those dates, including any change to those dates.

(2) Paragraph (1) does not apply to any proposals on which R is satisfied that a decision has to be taken without allowing time for consultation because of a risk to safety or welfare of patients or staff.

(3) In a case such as is referred to in paragraph (2), R must notify the authority immediately of the decision taken and the reason why no consultation has taken place.

(4) Subject to regulation 30(5) (joint committees) and any directions under regulation 32 (directions as to arrangements for discharge of health scrutiny functions), the authority may make comments on the proposal consulted on by the date or changed date provided by R under paragraph (1)(b)(ii) or (c).

8. On 21 February 2018 HVCCG (the “Responsible Person” (“R”) for the purpose of the Regulations) served notice on the County Council (the “authority”) in accordance with Regulation 23(1)(a) of the Regulations that it was consulting the County Council in respect of a proposal that amounts to a substantial variation in the health service in Hertfordshire. The Proposal is for HVCCG to cease its annual funding of £600,000 for Nascot Lawn.
9. In accordance with Regulation 23(1)(b)(i) HVCCG advised that it will be making a decision on the Proposal on 3 May 2018. Further and in accordance with Regulation 23(1)(b)(ii) HVCCG requested that the County Council provides comments on the Proposal by 4 April 2018.
10. The County Council’s Constitution provides that HSC is the statutory consultee for the purposes of variation and development of the health service in Hertfordshire. In order to be in a position to comply with the notified timetable HSC convened a special meeting of the Committee on Wednesday 21 March 2018.
11. HSC took both written and oral evidence and debated the Proposal; at the conclusion of the debate made Comments on the Proposal and set out a number of Recommendations.
12. This Report is made in accordance with Regulation 23(4) and sets out the comments and recommendations that HSC considers are necessary to ensure that the Proposal is in the interests of the health service in Hertfordshire, in the event that HVCCG proceeds with the Proposal on 3 May 2018.
13. HSC notes that, having made Comments and Recommendations on the Proposal as set out in the letter from HVCCG dated 21 February 2018, the requirements of Regulation 23(5) are now engaged:

(5) Where the authority's comments under paragraph (4) include a recommendation to R and R disagrees with that recommendation—

  - (a) R must notify the authority of the disagreement;
  - (b) R and the authority must take such steps as are reasonably practicable to try to reach agreement in relation to the subject of the recommendation; ...
14. HSC would be grateful if HVCCG could advise whether it is in disagreement with the Recommendations set out by HSC.
15. HSC notes that HVCCG propose to further consult with the Parents of children who currently access Nascot Lawn on the Proposal, and the Comments and Recommendations made by HSC, and that this process will be complete by 18 April 2018.

16. HVCCG have noted that the date that they propose to take their decision (3 May 2018) is the same day as local elections in a number of District Council's in Hertfordshire. HVCCG have confirmed that they will advise the County Council of their final decision on 4 May 2018.
17. HSC have agreed that HVCCG's final decision on the Proposal will be reviewed at the meeting of HSC on 9 May 2018.

## **Explanation of the Proposal Scrutinised**

### Background to the Proposal

18. Nascot Lawn is an NHS commissioned service operated by HCT and provides health care services for children with complex health care needs providing respite from caring responsibilities for the parents, carers and siblings of those children using the service.
19. HVCCG decided to withdraw funding from Nascot Lawn in January 2017 ("**Decision 1**") although details of Decision 1 were not made public until after the election period in June 2017.
20. Representatives of HVCCG attended the meeting of HSC on 19 July 2017 to outline the HVCCG's rationale for Decision 1. At that meeting Members reiterated to both HVCCG and officers of the County Council their view, which had been consistently expressed, that all stakeholders should have proactive and mature discussions in order to ensure that the needs of the children and their families who attended Nascot Lawn (the "**Families**"), and those with similar needs going forward, could be met on a sustainable and basis.
21. HSC also determined that the matter should be subject to a more detailed scrutiny and a Member topic group was undertaken on 7 September 2018. It examined:
  - the current and future funding arrangements of respite care for Children & Young People (CYP) with complex care needs and their carers;
  - the extent and quality of consultation with partner organisations and other stakeholders in reaching the decision to cease funding for Nascot Lawn;
  - the assessments supporting the decision to cease funding including financial, risk assessment, Equality Impact Assessment (EQIA) and Health Impact Assessments (HIAs);
22. In conclusion the topic group made four recommendations:
  1. *That all partners agree and use protocols that are already in place more consistently to ensure effective, timely and thoughtful engagement to both understand the needs of users, stakeholders and partners and how this informs service delivery and development.*

*2. That all partners develop and use mechanisms already in place more consistently to ensure partnership working operates maturely at a time of financial pressure within a challenged system and provide examples of how this will be achieved and measured.*

*3. That services for our most vulnerable residents are commissioned, resourced and provided utilising a sound and authoritative evidence base.*

*4. Using this experience (as outlined in recommendations 1, 2 and 3) to inform future working and decision making.*

23. Decision 1 was challenged by some of the families using Nascot Lawn by way of Judicial Review ("JR1"); following the submissions of claim and defence and the preparation of skeleton arguments HVCCG withdrew Decision 1, without the need for a determination by the High Court. HVCCG accepted that, in order for it to be able to take a decision to withdraw funding from Nascot Lawn it was required to undertake a "stakeholder engagement" process and to complete Equality Impact Assessments and Health Inequality and Quality Assessments.
24. Following JR1, and after the Topic Group, HVCCG conducted a stakeholder engagement process with the Families and other relevant stakeholders in October and November 2017. HVCCG's Finance and Performance Committee met on 17 November 2017 and concluded that HVCCG was not legally required to, and could not continue to, fund the respite service for children and young people at Nascot Lawn and again decided to withdraw funding ("Decision 2"). HVCCG's decision was supported by a new Equality Impact Assessments (EqIA), and Health Inequality and Quality Assessments (HIA).
25. On 27 November 2017 further legal proceedings ("JR2") were commenced by some of the families using Nascot Lawn challenging Decision 2; the County Council was as an "interested party" to JR2.
26. The matter came before Mr Justice Mostyn in February 2018 who gave judgment on 21 February 2018. In his judgment Mr Justice Mostyn concluded that the nature of the provision at Nascot Lawn was in fact a health service, contrary to the position adopted by HVCCG that the service at Nascot Lawn was solely a social care service (and therefore exclusively the responsibility of the County Council). Mr Justice Mostyn stated: "*on any view nursing services are being provided at Nascot Lawn as well as services for the care of persons suffering from illness.*"
27. The judge went on to find that the removal of funding (by HVCCG) from the only unit in Hertfordshire that provided care to children with these complex health needs would amount to a substantial variation in health provision. Mr Justice Mostyn went on to determine that

HVCCG were required to, and had failed to, consult the County Council as required under the Regulations. The Judge quashed Decision 2; he further determined that no further decision on the funding of Nascot Lawn could be taken until consultation with the County Council, in accordance with the process set down in the Regulations, had taken place.

28. Mr Justice Mostyn set out that the only basis on which he had made the determination to quash Decision 2 was the failure to properly consult under the Regulations. Although there was no legal requirement for him to do so Mr Justice Mostyn went on to comment on the other grounds on which the Families had challenged Decision 2; and made it clear that, in his view, the other grounds were not made out. For example the Judge considered that HVCCG had complied with the requirement of the health service to engage with those using NHS services.

### The Proposal

29. Immediately following the judgment HVCCG wrote to the County Council giving formal notification of consultation on the Proposal (i.e. to withdraw £600,000 funding from Nascot Lawn in accordance with regulation 23 of the Regulations). The Proposal and the timetable was set out in correspondence dated 21 February 2018. HVCCG set out, in their letter, that:

29.1 the Proposal is at a formative stage and that the Proposal will be approached with an open mind;

29.2 there was a significant amount of information available for an informed consultation to take place, and indicated that they would be willing to provide further information if requested;

29.3 they considered that the timeframe set out for consultation was adequate;

29.4 they would conscientiously take the outcome of the consultation into account.

### **The Council's Scrutiny of the Proposal**

30. On 27 February 2018 the County Council accepted that HVCCG had provided valid notice of consultation and confirmed that the Proposal would be referred to HSC in accordance with its constitutional arrangements. On 2 March 2018 HVCCG was advised that a special meeting of the Committee had been summonsed for 21 March 2018. A scoping document for the special scrutiny was prepared in the usual way and those providing evidence were asked to consider the following questions when making submissions:

*"Is the Proposal in the interests of health services in Hertfordshire?"*

*Are there any alternative services proposals available to HVCCG and the County Council that would address the current and future needs of CYP [children and young people] with complex health and social care needs requiring respite care in Hertfordshire?*

*How will the integration and joint responsibilities between HVCCG and the County Council be arranged and managed going forward?"*

31. HSC received written evidence from:

- 31.1 HVCCG
- 31.2 Hertfordshire County Council Children's Services (CS) Department
- 31.3 East & North Herts Clinical Commissioning Group (E&NHCCG)
- 31.4 Nascot Lawn Parents
- 31.5 Hertfordshire Community NHS Trust (HCT)
- 31.6 Healthwatch Hertfordshire (Healthwatch)
- 31.7 Carers in Herts (CinH)
- 31.8 Herts Parent Carer Involvement (HCPI)

32. HSC received oral evidence from:

- 32.1 Dr Nicholas Small, Kathryn Magson, Dr Rami Eliad, David Evans (HVCCG)
- 32.2 Marion Ingram, Jenny Coles, Dr Jim McManus (Hertfordshire County Council)
- 32.3 Beverley Flowers (E&NHCCG)
- 32.4 Angela Kitching (parent)
- 32.5 Roma Mills (CinH)
- 32.6 Carol Kelsey (HCPI)
- 32.6 Michael Downing, Geoff Brown (Healthwatch)
- 32.7 Marion Dunstone, Tricia Wren, Anne McPherson (HCT)

33. Appended to the written submissions of HVCCG, E&NHCCG and CS was a signed written agreement ("**the Agreement**").

34. The Agreement sets out that the three organisations (referred to as Partners) “have agreed three shared priorities in relation to children and young people: *early childhood, 0-25 integration for children and young people with additional needs and emotional wellbeing and mental health transformation*”.
35. The Agreement goes onto set out that the three organisations are seeking to ensure that all children in the County, assessed as needing an overnight short break (“OSB”) are able to access a local OSB setting.
36. As part of the Agreement both HVCCG and E&NHCCG have each committed to providing £100,000 per annum to support OSBs for children and young people with complex health needs – though no agreement had been reached on the issue of inflation.
37. The Agreement goes on to record how the three organisations anticipate that complex health needs would be met and that those children requiring additional health needs would be assessed for Children and Young People’s Continuing Care and “top-up” funding considered. Equally, whilst not anticipated to be an issue, should a child or young person need to access a service out of county, and have additional complex health needs, these cases would not impact on the financial arrangements set out in the arrangement.

#### Summary of the oral evidence

38. HVCCG advised HSC:
  - 38.1 that they accepted the Court’s findings that the services provided at Nascot lawn were health services;
  - 38.2 that the Court had ruled in favour of HVCCG on 5 other grounds;
  - 38.3 that they had approached the decisions to withdraw funding with humility, respect and professionalism;
  - 38.4 they apologised, to the Families, for the continued uncertainty;
  - 38.5 that they had continued to meet with Hertfordshire County Council CS and E&NHCCG on a regular basis to look at a future proposal;
  - 38.6 that they would approach the new decision in May with an open mind having listened to views and taking the outcome of the consultation fully into consideration when reaching a decision on the Proposal;

- 38.7 that the decision would be taken by the Finance and Performance Sub-committee of the HVCCG Board, which has the full powers of the Board;
- 38.8 that the Agreement amounted to a positive way forward following good collaboration between HVCCG, CS and E&NHCCG;
- 38.9 that they continued to face considerable financial challenges, despite considerable progress in the last 12 months, which required savings in all areas;
- 38.10 that Community Children's Nurses are commissioned by HVCCG to support children and families with complex health needs and end of life care, and that this support is available to the Families;

*In response to Members questions of clarification HVCCG advised*

- 38.11 that the figure of £100,000 as set out in the Agreement was based on their experience of the costs of providing continuing health care funding for 5 to 6 children annually;
- 38.12 that HVCCG was not required to pay all the costs of JR2.

39 Hertfordshire County Council's Children's Services advised HSC:

- 39.1 that they aimed to deliver OSBs in local settings integrated with health services;
- 39.2 that the Agreement reached with HVCCG and E&NHCCG supported that aim;
- 39.3 that where children had continuing health care and had a need for a nurse lead service – these cases would be dealt with on an individual basis;
- 39.4 that for other children accessing OSBs, who did not specifically need nursing services, care would be delivered by carers who had been specially trained by and with support of health colleagues;
- 39.5 that 8 of the children accessing Nascot Lawn had now transitioned to other services, 19 were in the process of transitioning to other services and 16 were yet to start the process;
- 39.6 that the viability of an extension to West Hyde Short Breaks Unit was being explored to increase capacity;



*In response to Members questions of clarification:*

- 39.7 that there was an offer of £100,000 per annum each from HVCCG and E&NHCCG to support the OSB proposal;
- 39.8 that in all cases the care provided in alternative County Council commissioned settings would be as good as that provided at Nascot Lawn;
- 39.9 that where exceptional funding was required for nursing care this would be assessed and considered by the continuing health care panels and any funding would be over and above the funding agreed in the Agreement;
- 39.10 that CS worked with families during transition and were confident that any concerns or complaints would be picked up;
- 39.11 that children and families who would need to access OSB services in the future would benefit from a single county wide process, as opposed to the two routes have been in place to date.

40. E&NHCCG advised HSC:

- 40.1 that they were continuing to work with CS and the Families;
- 40.2 that they were participating in wider discussions on health personalisation and individual budgets as well as supporting pooled budgets for OSBs

*In response to Members questions of clarification:*

- 40.3 that inflation was yet to be agreed but that this would be reviewed in line with the Agreement;
- 40.4 that their contribution was over and above that which they currently contributed to Nascot Lawn, but that £100,000 was the right initial investment which would need to be reviewed as it was a good starting estimate of the level of support required.

41. Angela Kitching, who had been invited to represent the views of the Families advised HSC:

- 41.1 that it had been necessary for the Families to take HVCCG to court twice in order to challenge both Decision 1 and 2;

- 41.2 that the Families did not have faith in the scrutiny process as HVCCG had previously ignored the outcome of previous scrutiny meetings;
- 41.3 that any service offered to the Families required
- 41.3.1 access to a registered nurse;
  - 41.3.2 safe transfers to hospital;
  - 41.3.3 access for all children;
  - 41.3.4 a clear 0-25 pathway for all children;
  - 41.3.5 Nascot Lawn to remain open until a full transition of service could take place;
- 41.4 that the services offered to the Families were now less than they were previously receiving and entitled to and that a number of the Families were now in crises with at least one child now only being able to access respite on a hospital ward.
- Members debated Mrs Kitching's evidence and discussed points of clarification as Mrs Kitching was unable to attend for the debate in the afternoon, the discussions covered:*
- 41.5 whether new children and families were able to access Nascot Lawn and the lack of clarity amongst professionals on how to access respite services;
- 41.6 whether, in Mrs Kitching's opinion the care at the alternative sites would be at least as good as at Nascot Lawn, Mrs Kitching advised that it was too early to know as the service was not fully designed, but if nursing provision was not in place it would be likely that the service would not be as good;
- 41.7 that it was likely that there was an increase in access to acute care and mental health services as a result of the uncertainty surrounding Nascot Lawn as a result of HVCCGs previous decisions;
- 41.8 that following JR2 there had been engagement with CS but not with HVCCG;
- 41.9 that respite services should ideally be no more than 20 minutes from the child's home (a 40 minute round trip), as this would support the Families "vital role" of "advocate" for the child in question – the person / people with the most knowledge of the child and their complex needs;

- 41.10 the effect of a closure in Nascot Lawn would have a very significant and serious effect on the Families using that services, including family breakdown, an inability to plan holidays and effects on siblings and their ability complete studies;
- 41.11 that the children using Nascot Lawn have a range of complex needs, some of which can only be met by a nurse;
- 41.12 that the children using Nascot Lawn should not be the last in line for the provision of services.

42. Carers in Herts advised HSC:

- 42.1 that a lack of respite care is significant for all carer groups, causes high levels of stress and anxiety and has a significant impact on siblings who do not have time to spend with their parents;
- 42.2 that it is also important for the child with a disability to have alternative experiences to the sole care of their parents;
- 42.3 that CinH were concerned that will not be enough capacity to meet the respite needs of all children accessing services both those with complex health needs and those with challenging behaviours;
- 42.4 that a reduction from 4 respite centres to 3 could not realistically be described as the provision of local services;
- 42.5 that there would be a reduction in the provision of day care services;

*In response to Members questions of clarification:*

- 42.6 that CinH were aware of a reduction in service to all Nascot Lawn parents and that it was unlikely to be practical for many of the Families to access increased support at home as they would be unable to accommodate the necessary additional adults;
- 42.7 that CinH were of the impression that it was difficult to access the OSB service for children with behavioural needs until those children were teenagers;
- 42.8 that CinH had not been consulted by HVCCG on the Proposal, but that they had provided with information and been advised as to what was happening. The County Council has been looking at how to move matters forward.

43 Herts Parent Carer Involvement advised HSC:

- 43.1 that they were a parent carer forum who were funded by the Department for Education to assist with the development, commencement and review of new services to understand the needs of the users of services;
- 43.2 that they had been working with the County Council on the OSB Service before the initial decision to withdraw funding (Decision 1) was made;
- 43.3 that they supported all the points that had been put forward by Mrs Kitching on behalf of the Families and CinH;
- 43.4 that it was important for all concerned to work together and close the gap between the “theory and the practicality” of any revision to respite services and to deal with the reality of future capacity concerns.

*In response to Members questions of clarification:*

- 43.5 that HPCI had not been included as part of the consultation process but have been invited to and attended at meetings;
- 43.6 that HPCI were building trust with relevant stakeholder groups and were forging effective relationships;
- 43.7 that there good and consistent relationships with the County Council and E&NHCCG but not with HVCCG. HPCI did however seek to “inject” their views even when not directly sought;
- 43.8 that HPCI considered that the manner in which the previous decisions had been taken could have been handled more considerately as a number of the Families were “on the edge”.

44 Healthwatch Hertfordshire advised HSC:

- 44.1 that they considered this issue to be one of real significance for those using the service and of the need to ensure integrated working in Hertfordshire, and that their response was based on discussions with the County Council, HVCCG and the Families;
- 44.2 that there was a positive message about moving forward to find a solution that would address the needs of the Families;

*In response to Members questions of clarification:*

- 44.3 that there needed to be engagement with carers and families groups;
- 44.4 that they were concerned about the impact of reduced respite services on the whole health system and that whilst there was now a positive opportunity to develop an OSB service - that service would need to be adequately resourced and consideration given to how it would work in practice;
- 44.5 that they had been briefed, informed and communicated with by HVCCG but had not been consulted;
- 44.6 that the Families had provided them with a full briefing on the implications of changes to respite care;

45 Herts Community NHS Trust advised HSC:

- 45.1 that their key priority was to maintain the services at Nascot Lawn but this was not straightforward given the uncertainty of the position and the effect on staff;
- 45.2 that they will continue to support the service and any future service;
- 45.3 that there was a positive message about moving forward to find a solution that would address the needs of the Families;

*In response to Members questions of clarification:*

- 45.4 that they would deliver any service that was required by their Commissioners, including the training of staff who may work in other units;
- 45.5 that the Nascot Lawn building is owned by HCT and there had not been any discussions as to its future use;
- 45.6 that they could provide a service at Nascot Lawn if funded and that they were working to ensure that the level of service at Nascot is being provided in accordance with contractual requirements;
- 45.7 that they were working to provide an individualised service to meet each child's clinical needs including group and individualised training for those carers and staff working with the Families;

- 46 At the conclusion of the evidence session HVCCG responded to some of the comments made, including commenting on what HVCCG considered to be factual inaccuracies concerning the extent of their consultation and issues of acute services and respite services.

#### Comments from HSC

47. HSC took time to debate the Proposal and input from witnesses was welcomed as part of the debate. It was clarified, as part of the debate, that:
- 47.1 the difference in funding between the current level and the commitment as set out in the Agreement (£460,000) would be met by the County Council.
  - 47.2 the County Council could not use the building at Nascot Lawn as part of a Children's Service lead OSB Service as the building could not be adapted to provide single bedrooms for each child – which is a requirement of OFSTED registration;
  - 47.3 alternatives were available for those using respite and OSB services in the form of direct payments.

At the conclusion of the debate the Chairman and Group Leaders took advice from County Council Officers; HSC's comments in the debate were summarised in the motion presented at the conclusion of the debate.

48. HSC noted the progress that had been made towards partnership working and the commitment from both HVCCG and E&NHCCG to support and provide services for children with complex health needs to safely access overnight short breaks. However HSC was not satisfied that the Proposal, as put forward by HVCCG, is in the interests of the health service in Hertfordshire. HSC considers that it may be possible to reach an appropriate agreement with HVCCG.
49. HSC made the following comments on the Proposal which set out the basis of HSC's recommendations ("**the Recommendations**") pursuant to Regulation 23(4).
- 49.1 Members raised the importance of active engagement with Parents, Carers, Carers Groups and Healthwatch in the future planning of any replacement service.
  - 49.2 Members were concerned about the financial agreement that has been reached including the issues of revenue and capital. Members also raised concerns on the amount of funding and how the sums of money would be managed to address:
    - Current and future needs,

- Equipment costs,
  - Inflationary pressures
- 49.3 Members raised the importance of transparent decision making and responsibilities.
- 49.4 Members were concerned about the availability of future respite provision and equity of location.
- 49.5 Members were concerned as to the impact on the wider health and social care system, the disruption and / or reduction in the level of respite service currently available.
- 49.6 Members were concerned about transition planning, staff costs and retention.
- 49.7 Members are concerned that the offer would leave any new arrangement initially underfunded and that the County Council would be required to meet the shortfall caused by the removal in funding.
- 49.8 Members considered that the new service should be in place before Nascot Lawn is decommissioned.
- 49.9 Members encouraged partnership working, putting the needs of children using respite services at the centre of decision making to provide proper health care and to avoid deviation from the Concordat.

#### Recommendations from HSC

#### 50. HSC made the following recommendations:

##### 50.1 Transitional arrangements

The Committee considers that the Proposal should not take effect until alternative respite / OSB provision is in place and that this would require funding to be provided for Nascot Lawn, at its current rate, until such time as the new OSB service is in a position to be operational.

The Committee seeks assurance on the issue of staff retention and details of how the transition from Nascot Lawn to the OSB Service will be planned and delivered.

## 50.2 Financial contributions

The Committee notes and welcomes the position taken by both HVCCG and E&NHCCG as set out in the Agreement. The Committee is concerned, however, that the County Council will be required to fund the shortfall in the costs of the Service and is required to make capital investment in the alternative OSB service units to increase capacity.

The Committee considers that further funding commitments are required to address: the current and future needs of all children and families, with complex health needs, who require access to respite care, the requirement for specialist equipment, capital costs for adaptations, staffing costs (including additional training costs) and inflation.

## 50.3 Details of nursing available for OSB

The Committee heard evidence that the Families were concerned that the complex health needs of the children currently using Nascot Lawn would require significant nursing input and in some cases nursing lead care.

The Committee considers that it is necessary for HVCCG, E&NHCCG and the County Council to set out the detail of the nursing that will be available in the OSB Service and how the complex health needs of those children attending will be met.

## 50.4 Type and nature of legal agreement

As noted above the Committee welcomes the Agreement that has been reached between HVCCG, E&NHCCG and CS (on behalf of the County Council). The Committee received evidence that the agreed funding (£100,000 per annum from each CCG and addition continuing health care funding as required) was not time limited. The Committee heard evidence that it was necessary to resolve the issue of inflation and that the agreed financial commitment represented a good start.

The Committee considers that a formal and legally binding agreement should be entered into by HVCCG, E&NHCCG and the County Council so as to secure, amongst other matters:

50.4.1 the relevant financial contributions, including those issues as set out in 50.2 above;

50.4.2 the duration of the Agreement, including responsibilities on termination;



50.4.3 procedures for giving notice to terminate and to resolve any disputes that may arise between the parties to the Agreement;

50.4.4 procedures to ensure that the Committee is, and Services Users are, fully informed of, and consulted with, in respect of any material change in the Agreement.

#### 50.5 Engagement and consultation

The Committee notes that HVCCG have accepted that they are under a legal duty to consult with the County Council under the Regulations in the current case. The Committee heard evidence that HVCCG were not yet engaging as effectively as possible with the Families and relevant stakeholders (including HPCI and Healthwatch).

The Committee reiterated its belief that partnership working is in the best interests of the health service in Hertfordshire and encourages full and meaningful engagement by and with all those connected to and affected by the Proposal. The Committee considers that the Families and other Stakeholders need to be involved in the planning and delivery of any new OSB Service.

#### Resolution of HSC

51. HSC passed the following resolution unanimously:

*"The Committee notes the progress that has now been made towards partnership working and the commitment from both HVCCG and E&NHCCG to support and provide services for children with complex health needs to safely access overnight short breaks.*

*However The Committee is not satisfied that the Proposal as put forward by HVCCG is in the interests of the health service but considers that it may be possible to reach an appropriate agreement with HVCCG.*

*The Committee has comments on the following aspects of the Proposal ("the Recommendations"):*

*Members raised the importance of active engagement with Parents, Carers, Carers Groups and Healthwatch in the future planning of any replacement service*

*Members were concerned about the financial agreement that has been reached including the issues of revenue and capital. Members also raised concerns on the amount of funding and how the sums of money would be managed to address:*

- *Current and future needs,*
- *Equipment costs,*
- *Inflationary pressures*

*Members raised the importance of transparent decision making and responsibilities.*

*Members were concerned about the availability of future respite provision and equity of location.*

*Members were concerned as to the impact on the wider health and social care system, the disruption and / or reduction in the level of respite service currently available.*

*Members were concerned about transition planning, staff costs and retention.*

*Members are concerned that the offer would leave any new arrangement initially underfunded and that the County Council would be required to meet the shortfall caused by the removal in funding.*

*Members considered that the new service should be in place before Nascot Lawn is decommissioned.*

*Members encouraged partnership working, putting the needs of children using respite services at the centre of decision making to provide proper health care and to avoid deviation from the Concordat.*

*The Committee agrees that:*

1. *A Report be prepared in accordance with Regulation 23(4) of The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 setting out the issues considered by the Committee and the Recommendations being in relation to:*
  - a. *Transitional arrangements*
  - b. *Financial contribution*
  - c. *Details of nursing available for OSB*
  - d. *Type and nature of legal agreement*
  - e. *Engagement and consultation*
2. *The Chief Legal Officer be authorised to take all necessary steps to prepare and submit the report referred to in 1 above in consultation with the Chairman of Health Scrutiny Committee. Such report to be submitted to HVCCG no later 4 April 2018*
3. *The HVCCG's decision on the Proposal and Recommendations, which will be taken on 3 May 2018, is further considered at the meeting of the Health Scrutiny Committee on 9 May 2018*

4. *The Committee will consider on 9 May 2018 whether any further action is required, including but not limited to the possibility of a recommendation that Full Council refer the final decision to the Secretary of State in accordance with Regulation 23(9) of the Regulations”*

## **Request for Response**


52. Regulation 23(5), so far as relevant, provides that:

(5) Where the authority's comments under paragraph (4) include a recommendation to R and R disagrees with that recommendation—

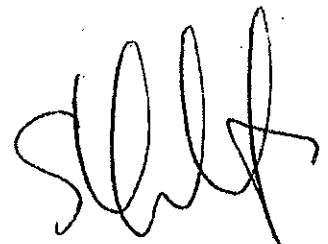
(a) R must notify the authority of the disagreement;

(b) R and the authority must take such steps as are reasonably practicable to try to reach agreement in relation to the subject of the recommendation; ...

53. This Report sets out the Comments and Recommendations made by HSC in accordance with Regulation 23(4) to the Responsible Person (R). HSC notes that, that being the case, HVCCG is required as the Responsible Person (R) to inform the County Council whether it disagrees with the Comments and Recommendations and if it does so it will be necessary for HVCCG and the County Council to take reasonably practicable steps to reach an agreement.
54. HSC requests, therefore, that HVCCG notify the County Council and the Chairman of HSC if they are in disagreement with the Comments and Recommendations as set out in paragraph 48 above. HSC understands that HVCCG will be seeking the views of Families and other stakeholder by 18 April 2018, HSC requests that HVCCG confirm whether there is any disagreement on the Recommendations by Wednesday 25 April 2018.



**Simon Banks**  
**For and on behalf of Kathryn Pettitt**  
**Chief Legal Officer**  
**Hertfordshire County Council**  
**4 April 2018**



**Seamus Quilty**  
**Chairman**  
**Heath Scrutiny Committee**  
**Hertfordshire County Council**



**HERTFORDSHIRE COUNTY COUNCIL**

**HEALTH SCRUTINY COMMITTEE  
WEDNESDAY, 9 MAY 2018 AT 10.00AM**

**UPDATE PAPER FROM HERTFORDSHIRE COUNTY COUNCIL CHILDREN'S  
SERVICE FOR THE COMMITTEE'S RECONVENED SCRUTINY OF HERTS  
VALLEYS CLINICAL COMMISSIONING GROUP'S PROPOSAL TO WITHDRAW  
£600,000 FUNDING FROM NASCOT LAWN NHS RESPITE CENTRE (THE  
"PROPOSAL")**

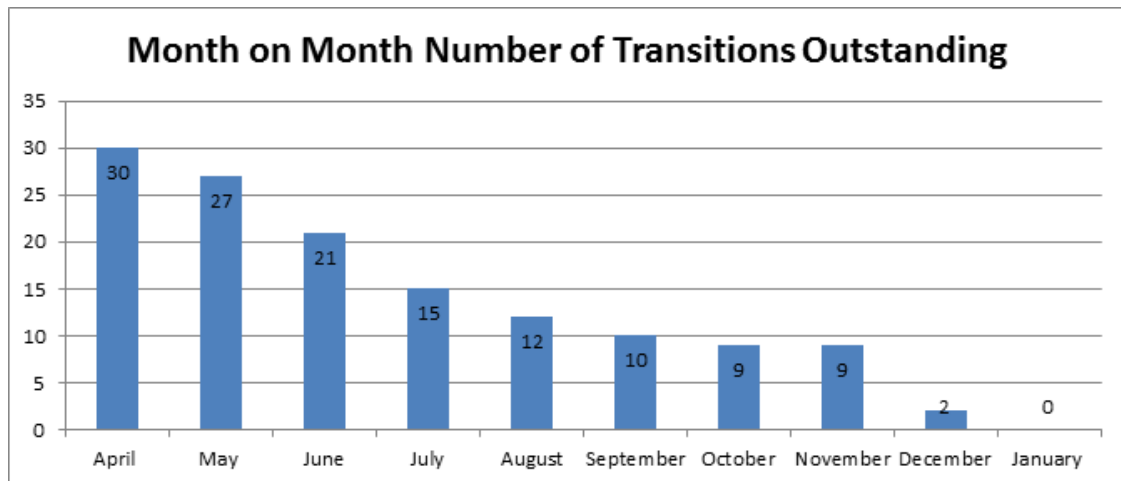
Author: Marion Ingram, Operations Director Specialist Services  
Author's telephone number: 01992 588620

**1. PURPOSE OF THE REPORT**

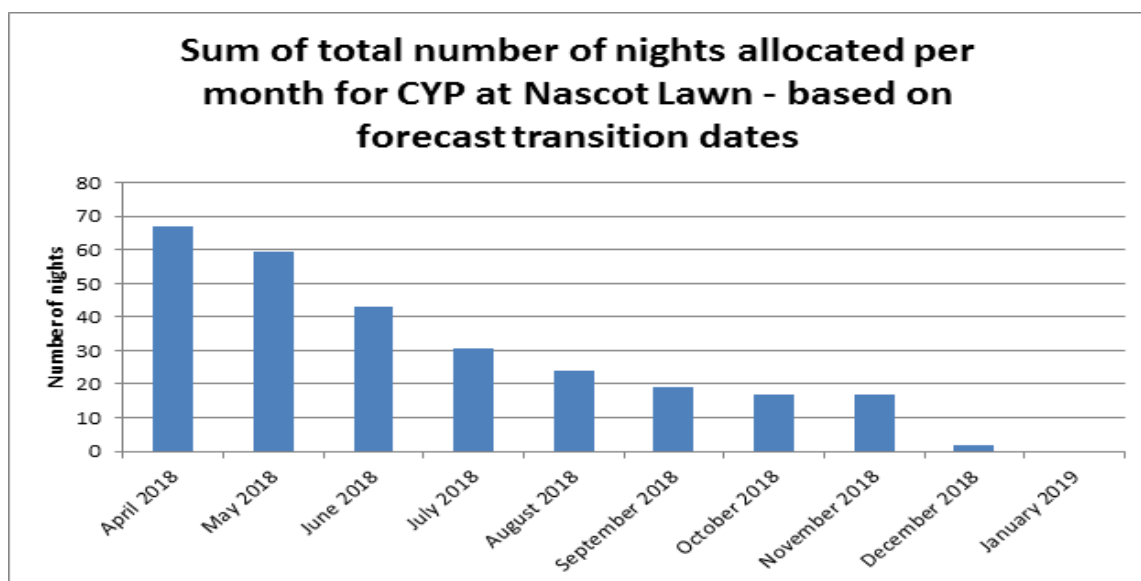
- 1.1 To provide members with an update to the scrutiny report prepared for the Special Health Scrutiny Committee which took place 21 March 2018. This report is to be read in conjunction with previous reports.

**2. Transitional arrangements**

- 2.1 Council Officers have continued to work with Hertfordshire Community NHS Trust, East and North Herts Clinical Commissioning Group and Herts Valleys Clinical Commissioning Group to plan and implement transitions from Nascot Lawn to alternative services, including alternative overnight short breaks settings. Plans were initially made as contingencies should the Proposal be implemented however, due to the reduced service at Nascot Lawn and the stated intent regarding the Proposal those plans are now being actively progressed.
- 2.2 There are currently 30 children who are still having overnight short breaks at Nascot Lawn (of the original 46). The table below shows the projected trajectory of children taking up alternative arrangements. This table assumes that West Hyde will be able to recruit a small number of additional staff, that training of staff and 'sign off' regarding competence will progress as planned and that equipment will be available as required. It also assumes that an appropriate alternative arrangement can be made for the child with the most complex health needs during November.



- 2.3 Children who access overnight short breaks are allocated a number of nights per year depending on need. Assuming that these allocated nights are spread across the year in an even way (for example if the child has an allocation of 24 nights per year the assumption is that this equates to two nights per month), the table below illustrates the number of nights per month that Nascot Lawn will be required to deliver during a transitional period. A number of children are offered an overnight on the same day (there are four bedrooms). The table reflects the full allocation rather than the level of overnights currently available to families (less than 50%). Again, this table reflect the assumptions as set out in 2.2 above.



### **3. Building Works to West Hyde Overnight Short Breaks Service**

- 3.1 Plans for an extension to West Hyde are currently being designed and will be submitted for planning permission. Due to the location of the setting (Green Belt), it is possible that this application will take some time to progress. If planning permission is granted then building works will be tendered, commissioned and delivered.
- 3.2 Whilst Officers recognise that this work must be completed as soon as possible, the proposed schedule indicates that the works will not be completed by November as had been hoped. Due to the various surveys that need to be carried out and the uncertainty surrounding the application for planning permission it is unlikely that building works will commence before October. The two extra bedrooms are therefore unlikely to be available until the end of the financial year. This will impact on the transition of one child who cannot be accommodated at the current West Hyde setting.

### **4. Proposed Financial Arrangements for the Delivery of an Integrated Overnight Short Breaks (OSB) Service.**

- 4.1 The County Council has three contracts for OSB. Last year, 2017/18, the value of these contracts was £1,725,000. This year, 2018/19, due to the contracts having been extended, the value is £2,031,964. The cost of the extensions is £306,964. In addition costs are being incurred through extending Direct Payments, increased home care provision and a shared care arrangement.

- 4.2 Herts Valley Clinical Commissioning Group and East & North Herts Clinical Commissioning Group (CCG) have agreed to contribute £200,000 (£100,000 each CCG) towards the costs of delivering OSB in recognition of the health care that is provided. As the integrated service is developed this contribution will be incorporated into the overall contract cost rather than being seen as an 'add on'. The first meeting to begin to develop the integrated service is taking place on 27 April 2018. It is anticipated that parents and both CCGs will be at the meeting and actively involved in service development.

**5. Staffing at Nascot Lawn**

- 5.1 Children currently have overnight stays at Nascot Lawn allocated until 17 May. Future stays have yet to be allocated. Staff availability remains an issue and there has recently been an occasion where overnight stays have been cancelled due to staff sickness. HTC are planning to send allocations for June next week.



**HERTFORDSHIRE COUNTY COUNCIL**  
**HEALTH SCRUTINY COMMITTEE**  
**WEDNESDAY 9 MAY 2018 AT 10:00AM**  
**SCRUTINY WORK PROGRAMME**

Agenda Item No.

**5**

*Report of the Head of Scrutiny*

Author: Elaine Manzi, Democratic Services Officer (Tel: 01992 588062)

**1. Purpose of report**

- 1.1 To provide the Committee with an update on the ongoing overarching scrutiny work programme.

**2. Summary**

2.1 The Scrutiny Work Programme

A combined work programme for both Health and Overview and Scrutiny Committees, is attached as Appendix 1 to this report.

2.2 Scrutiny Requests

The Scrutiny requests as agreed at the Annual Scrutiny of Quality Accounts held on 15 & 29 March 2018 are included in the work programme.

At the Overview & Scrutiny Committee (OSC) meeting on 19 April 2018 committee members agreed that the following scrutiny, which came out of the IP process which took place in January 2018, should be considered by HSC.

**‘Scrutiny of the working relations between Public Health and the NHS’**

2.3 Health Scrutiny – Impact of Scrutiny Sub-Committee

Verbal Update from meeting held on 25 April 2018.

2.4 Patient Flow Topic Group Scope

The Patient Flow Topic Group Scope is attached for information at Appendix 2. This was already circulated to Members on 23 April 2018.

2.5 CAMHS Topic Group

The report from the CAMHS Topic Group held on 12 January 2018 can be found here: Agenda Pack 57 of 62

<http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/811/Committee/81/Default.aspx>

### **Recommendations**

- 3.1 That the Scrutiny Work Programme, attached as Appendix 1 to the report, be approved.
- 3.2 The Patient Flow Topic Group Scope, attached as Appendix 2 to the report is noted.
- 3.3 The CAMHS Topic Group report is noted.
- 3.4 The ISSC update is noted.
- 3.5 Members agree to add the Topic Group '**Scrutiny of the working relations Between Public Health and the NHS**' to the work programme.

### **4 Financial Implications**

- 4.1 There are no financial implications arising from this report.

### **Background Information**

None

## Appendix 1 - Scrutiny Work P

Topic Name	HSC/ OSC/J oint	Type	Due to be Held	Scrutiny Lead	DSO Support	Service Lead	Chairman	Membership	Executive Member
IMPACT OF SCRUTINY SUB-COMMITTEE 12Jul18	Joint	Committee - standard	25/04/2018	Natalie Rotherham	Michelle Diprose		Ian Reay	Kareen Hastrick Joshua Bennett Lovell Jane West Richard Smith	
HEALTH SCRUTINY COMMITTEE May18	HSC	Committee - standard	09/05/2018	Natalie Rotherham	Elaine Manzi		Seamus Quilty		
POTENTIAL FIRE AND RESCUE MOVE TO PCC	HSC	Seminar	09/05/2018	Natalie Rotherham	Elaine Manzi		Seamus Quilty		Colette Wyatt-Lowe
SUSTAINABILITY TRANSFORMATION PARTNERSHIPS	HSC	Seminar	09/05/2018	Natalie Rotherham	Elaine Manzi	Debbie Fielding	Seamus Quilty		Colette Wyatt-Lowe
LOCAL ENTERPRISE PARTNERSHIP (LEP)	OSC	1 day	16/05/2018	Natalie Rotherham	Stephanie Tarrant	Neil Hayes	Frances Button	Frances Button (chairman), Bob Deering, John Wyllie, Dreda Gordon	Terry Douris
ATTAINMENT GAP AND DISADVANTAGED PUPILS	OSC	1 day	23/05/2018	Natalie Rotherham	Stephanie Tarrant			Judi Billing, Tina Howard,	
OVERVIEW & SCRUTINY COMMITTEE Jun18	OSC	Committee - standard	19/06/2018	Natalie Rotherham	Michelle Diprose		David Andrews		
HEALTH SCRUTINY COMMITTEE Jul18	HSC	Committee - standard	03/07/2018	Natalie Rotherham	Elaine Manzi		Seamus Quilty		
HERTFORDSHIRE INFRASTRUCTURE AND PLANNING PARTNERSHIP	OSC	1 day	06/07/2018	Charles Lambert	Michelle Diprose			Bob Deering / Richard Smith / Paul Mason / Tina Howard / Ian Reay	Terry Douris
HIGHWAYS CONTRACTS	Joint	Committee - standard	12/07/2018	Natalie Rotherham	Elaine Manzi		Ian Reay	Kareen Hastrick Joshua Bennett Lovell Jane West Richard Smith	
0-25 SERVICES	HSC	TBA							Colette Wyatt-Lowe
CHILDREN'S CENTRES	OSC	1 day		Natalie Rotherham	Michelle Diprose	Sally Orr			Teresa Heritage
DELAYED TRANSFERS OF CARE		1 day							
DIGITAL STRATEGY	OSC	Seminar		Natalie Rotherham	Michelle Diprose	Owen Mapley	David Andrews		David Williams
END OF LIFE CARE	HSC	1 day		Natalie Rotherham	Elaine Manzi				Colette Wyatt-Lowe
FUTURE TECHNOLOGIES	OSC	Seminar		Natalie Rotherham	Michelle Diprose	Rob Smith	David Andrews		David Williams
IMPACT OF SCRUTINY SUB-COMMITTEE 25Apr18	HSC	1 day		Charles Lambert	Theresa Baker				Colette Wyatt-Lowe
OVERVIEW OF RESPECTIVE WORKFORCE STRATEGIES	HSC	Committee - standard		Natalie Rotherham	Elaine Manzi		Seamus Quilty		Colette Wyatt-Lowe
REVIEW CARE STAFFING LEVELS	OSC	1 day				Iain MacBeath			Colette Wyatt-Lowe
REVIEW OF PTS SERVICE	HSC	1 day		Natalie Rotherham	Elaine Manzi				Colette Wyatt-Lowe
SAVINGS MADE AS A RESULT OF THE INVESTMENT TO TRANSFORM BID	OSC	1 day				Iain MacBeath			Colette Wyatt-Lowe
SPECIAL EDUCATION NEEDS AND DISABILITIES (SEND)	OSC	Seminar		Natalie Rotherham	Michelle Diprose		David Andrews		Terry Douris
THE COUNTY COUNCIL'S CONFIDENCE IN PARTNERS									
FINANCIAL STABILITY AND ABILITY TO DELIVER SERVICES	OSC	1 day				Owen Mapley			David Williams
VIOLATIONS OF HIGHWAYS ACT 1980	OSC	TBA							Ralph Sangster
WORKFORCE STRATEGY	OSC	Seminar		Natalie Rotherham	Michelle Diprose		David Andrews		David Williams

## Appendix 2

**SCRUTINY REMIT: As at 24 April 2018**

**Hospital Patient Flow Topic Group**

**DATE DUE AT HSC: 9 May 2018**

**HSC COMMITTEE APPROVED: date.....**

**WORK PROGRAMME: Q4 2017/8 or Q1 2018/9**

### **OBJECTIVES:**

To examine patient flow processes at the two Hertfordshire acute trusts to identify good practice and blockages in admission from an ambulance and discharge

### **BACKGROUND:**

Both East & North Hospital Trust (ENHT) and West Herts Hospital Trust (WHHT) face increasing challenges to deliver their A&E target to achieve timely discharge. However the issue is more acute at WHHT and it appears that it may be a more systemic issue in the west of the county.

Points to consider

- Non-elective admissions
- Length of stay (elective and non-elective)
- Time taken at different stages in the patient journey including the time taken to refer patients to Integrated Discharge Teams
- The reasons behind Delayed Transfers of Care, e.g. Social care capacity, further NHS non-acute care, assessment delays etc.
- The rate and cause of failed discharges
- Readmission rates

### **QUESTIONS TO BE ADDRESSED:**

1. What management and clinical processes does the Trust have in place prior to hospital admission including
  - planned admission
  - hospital social care team liaison
  - care home liaison
  - ambulance admission
  - referral by GP or social worker
  - front of house arrangements
2. What processes are in place, across all relevant partners to plan discharge once a patient is admitted to a ward? This to include
  - discharges requiring no other agencies for support
  - liaison with integrated discharge support for more complex discharges (e.g. HILS, social care, HCT)
3. What joint oversight and monitoring is in place to ensure timely discharge and to prevent re admittance?

## Appendix 2

**SCRUTINY REMIT:** As at 24 April 2018

### Hospital Patient Flow Topic Group

**OUTCOMES:** That good practice and learning has been identified and is implemented to improve patient flow and the patient experience.

**CONSTRAINTS:** What are the topics that are irrelevant to the objective or that do not answer the questions?

- It will not include MH issues
- It will only address WHHT and ENHT
- No individual cases

**RISK & MITIGATION AFFECTING THIS SCRUTINY:** i.e. how confident are members that the department/organisation has identified risks, impact to services, the budget proposals and has mitigation in place.

**RISK/S:** pressures places on other services and organisations;

**MITIGATION:** e.g. what mitigation does the department/organisation have in place if a partner pulls out? What is in place to manage at times increased pressure e.g. winter, major incident

#### EVIDENCE

<a href="https://improvement.nhs.uk/resources/matthews-story/">https://improvement.nhs.uk/resources/matthews-story/</a>	EEAST
Lister GP helpline	ACS
PTS (passenger transport service)	ENHT
Princess Alexandra, Harlow Journey	WHHT
Trust discharge policies	CCGs
	HCT

**METHOD:** 1 day Topic Group      **DATE:** 18 May 2018

#### SITE VISITS: Prior to the Topic Group

Half day seminar at the Watford (WHHT clinical colleagues, A&E practitioners, social worker team) **WATFORD – 11 May**

Half day seminar at the Lister (ENHT clinical colleagues, A&E practitioners, social worker team) **LISTER – 15 May**

**MEMBERSHIP:** Bob Deering, Richard Smith, Ron Tindall,

#### SUPPORT:

**Scrutiny Officer:** Charles Lambert

**Lead Officer:** Ed Knowles Assistant Director: Integrated Health

**Democratic Services Officer:** Elaine Manzi

**HCC Priorities for Action:** how this item helps deliver the Priorities *delete as*

## Appendix 2

SCRUTINY REMIT: **As at 24 April 2018**

### Hospital Patient Flow Topic Group

*appropriate*

1. Opportunity To Thrive ✓
2. Opportunity To Prosper ✓
3. Opportunity To Be Healthy And Safe ✓
4. Opportunity To Take Part

**CfPS ACCOUNTABILITY OBJECTIVES:** *delete as appropriate*

1. Transparent – opening up data, information and governance ✓
2. Inclusive – listening, understanding and changing ✓
3. Accountable – demonstrating credibility ✓