

Transfer of Commissioning Responsibility for Healthwatch to Cambridgeshire County Council
Diane Lamb, Cabinet Member for Public Health
March 2017
Deadline date: March 2017

Cabinet portfolio holder: Responsible Director:	Councillor Diane Lamb - Cabinet Member for Public Health Wendi Ogle-Welbourn – Corporate Director for People and Communities
Is this a Key Decision?	YES If yes has it been included on the Forward Plan : YES Unique Key decision Reference from Forward Plan : KEY/06MAR17/07
Is this decision eligible for call-in?	YES
Does this Public report have any annex that contains exempt information?	NO
Is this a project and if so has it been registered on Verto?	NO Verto number: N/A

RECOMMENDATIONS

It is recommended that the Cabinet Member approves the transfer of commissioning responsibility for Healthwatch services from Peterborough City Council to Cambridgeshire County Council.

1. SUMMARY OF MAIN ISSUES

- 1.1 Peterborough City Council's contract with Healthwatch Peterborough will expire on 31st March 2017. Discussions on how the service may continue after 1st April have been ongoing for several months. A number of possible options have been considered but transference of commissioning responsibility to Cambridgeshire County Council has been identified as the best option for the reasons set out in section 7.
- 1.2 In late 2016, following an in-depth options appraisal, Healthwatch Peterborough and Healthwatch Cambridgeshire decided to merge to create a larger, single Healthwatch.
- 1.3 Healthwatch is a key statutory function; it is essential that provision is sustained as effectively as possible, given the current challenges within the health and social care system and the need to ensure that the voice of the patient/ service user continues to be heard. Options that minimise destabilisation of the service are preferred for this reason.

- 1.4 The partnership and organisational health and social care landscape across Peterborough and Cambridgeshire is becoming increasingly interlinked. Therefore the natural expiry of Peterborough City Council's current contract is an excellent opportunity to develop a joint Healthwatch function which spans both local authority and CCG boundaries.

2. PURPOSE OF THIS REPORT

- 2.1 This report is for the Cabinet Member for Public Health to consider exercising delegated authority under paragraph 3.4.3 of Part 3 of the constitution in accordance with the terms of their portfolio at paragraph (a).

3. TIMESCALE

Is this a Major Policy Item/Statutory Plan?	NO	If Yes, date for relevant Cabinet Meeting	N/A
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4. DETAILS OF DECISION REQUIRED

- 4.1 To approve the local authority transfer of commissioning responsibility for Healthwatch services from Peterborough City Council to Cambridgeshire County Council.

5. CONSULTATION

- 5.1 Significant consultation has been undertaken as part of the options appraisal undertaken on behalf of the two Healthwatch. It included interviews with the respective Chairs of Directors and Chief Officers, an online public survey and stakeholder interviews.

6. ANTICIPATED OUTCOMES

- 6.1 The anticipated outcome will be a single, larger Healthwatch covering Cambridgeshire and Peterborough that is jointly funded by both local authorities. The service itself will be contracted by way of a grant agreement administered by Cambridgeshire County Council on behalf of the two local authorities. Funding, specifications and monitoring arrangements will be set out in a service level agreement between the two local authorities and enshrined in a Section 113 agreement.

7. REASONS FOR RECOMMENDATIONS & ANY RELEVANT BACKGROUND INFORMATION

Increased efficiency and value for money

- 7.1 Combining resources and strategic approaches will increase capacity and improve efficiency in Healthwatch provision thus ultimately providing better value for money for commissioners.
- 7.2 Increased capacity is essential to the effectiveness of Healthwatch, particularly as demand for the service grows and the local population continues to increase. Operating as one Healthwatch allows back office functions to be combined and economies of scale realised. This includes one Information and Signposting Service, one website, one central administrative centre and a combined approach to communications. This also frees up additional capacity to focus on frontline delivery.
- 7.3 Currently both Healthwatch are represented at many meetings and groups, including the STP, Area Executive Partnerships and the CCG, which operate on a Cambridgeshire and Peterborough footprint. At present, Healthwatch Peterborough struggles to service all the required meetings. By combining resources the burden of representation will be reduced freeing up more capacity. Partnership working will also be simplified and strengthened as many organisations and projects work across both areas.

- 7.4 A larger Healthwatch with more capacity will be easier for smaller providers to engage with, particularly GPs and social care providers.
- 7.5 The merger will also allow a planned approach to accessing a variety of funds including from external sources, bringing money into the area to support patient and public involvement activities and improve capacity and capability.

Increase local people's engagement with Healthwatch and influence on strategic commissioning

- 7.6 Separately the two Healthwatch are struggling to reach all communities, particularly some seldom heard groups. By freeing up capacity through improved efficiency and smarter working, Healthwatch will be able to recruit and support more volunteers and directly enable more grassroots community engagement. This is important given the complex health inequalities within Peterborough. The increased reach and capacity will enable more local people to share their views and experiences to influence the policy, planning, commissioning and delivery of publicly-funded health and social care. It will also allow more local people to receive information and advice regarding access to and making choices about services.

Innovation and development

- 7.7 Combining the two Healthwatch will lead to development and innovation in service delivery as the organisations share skills and knowledge. The merger will also allow Healthwatch Peterborough to play a greater role in the region. For example, Healthwatch Cambridgeshire have worked with the other Eastern County Healthwatch to hold the first ever regional Healthwatch conference. As a merged organisation, Peterborough would have had a greater role in this type of network development and increase its influence especially with bordering Healthwatch in Lincolnshire, Rutland and Leicestershire.

Co-terminus with key strategic and delivery partners

- 7.8 Both Healthwatch share a Clinical Commissioning Group and the Sustainability and Transformation Plan. A number of key delivery partners operate across both areas (Cambridgeshire and Peterborough Foundation Trust, Cambridgeshire Community Services NHS Foundation Trust and the merger of Peterborough and Stamford Hospitals NHS Foundation Trust and Hinchingsbrooke Healthcare NHS Trust). Therefore it seems sensible for Healthwatch to be co-terminus with key strategic and delivery partners and have a single voice in conversations about health and social care across Cambridgeshire and Peterborough.

Continued focus on Peterborough

- 7.9 Ensuring Peterborough retains a quality and effective Healthwatch service is of the utmost importance. The service level agreement and service specification will be drafted to ensure continued representation of Peterborough's voice in strategic forums and local presence to deliver services and support local volunteers.

Employee benefits

- 7.10 Staff at Healthwatch Peterborough will benefit from integration into Healthwatch Cambridgeshire regarding Terms and Conditions of Employment, such as sick pay and pension entitlements and contributions, enabling a more stable and supported workforce.

Background Information

- 7.11 The Health and Social Care Act 2012 set out the requirement for first tier local authorities to have a local Healthwatch organisation in place. The local Healthwatch is the local Health and Social Care consumer champion and watchdog representing the views of local residents of all ages, advocating and influencing the delivery and commissioning of Health and Social Care services.
- 7.12 A representative of local Healthwatch has a statutory place on the Health and Wellbeing board, ensuring that the views and priorities of local people are represented in strategic commissioning, the Health and Wellbeing strategy and in the development of local Joint Strategic Needs Assessments.
- 7.13 Local Healthwatch have a range of responsibilities to various groups and organisations: representing the views of the local population in relation to health and social care services, delivering the local Healthwatch service as commissioned by the Council, reporting local issues and concerns to Healthwatch England who act as the health and social care consumer champion at a national level and sits within the Care Quality Commission. Healthwatch England will advise the NHS Commissioning Board, English local authorities, Monitor (health sector regulator) and the Secretary of State. It will also have the power to recommend that action is taken by the Care Quality Commission (CQC) when there are concerns about health and social care services.
- 7.14 The local Healthwatch (Healthwatch Peterborough) is representative of the diverse communities of Peterborough. It provides intelligence, including evidence from people's views and experiences, to influence the policy, planning, commissioning and delivery of publicly-funded health and social care. It provides information and advice to help people access and make choices about services.
- 7.15 Healthwatch Peterborough represents the views of patients, Services Users and local people through the Peterborough Health and Wellbeing Board. As such Healthwatch Peterborough supports statutory partners to understand local need and develop effective and efficient responses through influencing the development of local commissioning strategies and plans.
- 7.16 **Healthwatch Cambridgeshire** (HWC) is run by a Community Interest Company (CIC) incorporated in 2013. It was established with significant support from Cambridgeshire County Council. The CIC hold a grant agreement with Cambridgeshire County Council for the delivery of HWC functions which is renewed annually, the next renewal due on 1st April 2017. There are 12 paid staff and 29 volunteers.
- 7.17 **Healthwatch Peterborough** (HWP) is run by a CIC incorporated in 2012, drawing much of its membership from the previous Link board (Link was the predecessor organisation prior to the requirement by the 2012 Act to establish Healthwatch nationwide). The CIC hold a contract with Peterborough City Council for the delivery of HWP functions. Day-to-day delivery is outsourced to a local charity, Citizen's Advice Peterborough, through a services agreement. The agreement is to deliver the services of HWP by employing and hosting the staff and logistical functions. This agreement comes to an end on 31st March 2017. There are 3 paid staff and 35 volunteers.
- 7.18 A comprehensive options appraisal exploring how the two Healthwatch may work together was commissioned by HWP and HWC and undertaken by an independent consultant in 2016. The recommendation was for both organisations to merge equally, at director level and staff level with a staff structure that meets the merged needs of the whole area. The two Healthwatch Boards agreed this and made a recommendation to merge the two organisations to the two commissioners, Peterborough City Council (PCC) and Cambridgeshire County Council (CCC) in January 2017. The recommendation was

supported by Wendi Ogle Welbourn and Sue Grace and for expediency proposed using the Cambridgeshire Healthwatch CIC as the base organisation for the newly merged organisation to minimise the risk of destabilising the service and allow for a swifter transition.

8. ALTERNATIVE OPTIONS CONSIDERED

- 8.1 Option 1 - Do nothing and let the contract end. This option was excluded as the local authority would not fulfil its statutory responsibility to provide a Healthwatch service. It would also limit the voice of the people in Peterborough being heard with regard to local health and social care services.
- 8.2 Option 2 - Maintain a distinct Healthwatch Peterborough and extend the current provider's contract. This option was excluded as it is contrary to the Public Procurement Regulations.
- 8.3 Option 3 - Maintain a distinct Healthwatch Peterborough and undertake a competitive procurement exercise to award a new contract. This option was considered but ultimately excluded as it doesn't enable the creation of a single Healthwatch across the area.

9. IMPLICATIONS

Financial Implications

- 9.1 The level of funding available for Healthwatch is likely to remain the same. Peterborough City Council will ultimately benefit from increased the value for money from the innovations and improvements achieved by combining investment and service delivery with Cambridgeshire colleagues.

Legal Implications

- 9.2 A joint specification will be enshrined within a legally robust Service Level Agreement (Section 113) between the two local authorities, ensuring all responsibilities and contributions are explicit.

Equalities Implications

- 9.3 By definition, Healthwatch seeks to ensure the views and priorities of local people are incorporated into strategic commissioning across the health and social care sector. This includes the views of seldom heard groups.
- 9.4 Requirements within the specification will also ensure that Peterborough residents continue to receive an equitable share of the overall Healthwatch provision with a continued Peterborough presence and support for local volunteers.

10. DECLARATIONS / CONFLICTS OF INTEREST & DISPENSATIONS GRANTED

- 10.1 None.

11. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985) and The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012

None.