



**Brighton & Hove  
City Council**

**HEALTH OVERVIEW & SCRUTINY  
COMMITTEE  
ADDENDUM**

**4.00PM, WEDNESDAY, 18 MARCH 2020**

**COUNCIL CHAMBER, HOVE TOWN HALL**



# ADDENDUM

ITEM		Page
33	PUBLIC INVOLVEMENT	5 - 6



## Public Questions: HOSC 18 March 2020

### 1 Clare Jones

Question for HOSC concerning the Substance Misuse service – new contract April 1<sup>st</sup> 2020:

Despite the ringing endorsement of the current substance misuse service provider (Pavillions) at the January 2019 Health and Wellbeing board, they have failed to secure the new contract that will come into force in April 2020.

I am aware that the January 2019 Health and Wellbeing board gave delegated authority to the Executive Director of Health and Adult Social care for both the procurement process and the awarding of the contract. This means, of course, that no details at all of the new contract, the supposed failings of the current provider or the examination of the track record of the new provider, CGL, has been subject to democratic scrutiny or oversight. My question is – what overview and scrutiny has the HOSC done of this service and the new contract, especially in the light of staff and service cuts. (For instance the current services offered at 9 the Drive are to close).

### 2 Pat Kehoe

Regarding the HOSC agenda item 36, **SUSSEX HEALTH & CARE PLAN: LOCAL RESPONSE TO THE NHS LONG TERM PLAN**. The HOSC have been asked to 'note' the 'plans' for both Brighton & Hove City and Sussex, which, with the Sussex Care and Health Partnership being on the ICS Accelerator Programme, will come into being from April, 2020. At the end of the item it says that no 'direct' public engagement has taken place and that the financial implications are 'not relevant'. If these 'plans' are starting in April 2020,

- a) what scrutiny/investigations/proof/evidence have been undertaken/reviewed by the Council to substantiate that the 'plans' will improve health and care outcomes for the residents of Brighton & Hove City?
- b) when does the Council consult with its residents regarding this fundamental change to the delivery of Primary Care? Is this not a Substantial Variation in Service?
- c) when does the Council sign its agreement to being a partner in the 'plans'? If the Council is committing to these 'plans' there must be a formal signing of an agreement to action them.
- d) what are the financial, manpower, estate implications for the Council of being a partner? Surely, for budgeting purposes the Council must know this information.

### 3 Madeleine Dickens

By the CCG's own admission in the report to their Primary Care Commissioning meeting of 10th March some Primary Care Networks require substantial work,

entailing "a radical workforce transformation and a complete re-design of primary care clinical pathways".

The need for this is made even more urgent by other admissions in the report - namely *The current consultation document demonstrated that PCNs would increase workloads and put practices at financial risk so it required a fundamental rethink around the original premise of what a PCN would be for and how it would work.*

This is a clear admission of the need for the HOSC and Brighton and Hove Council to raise a Substantial Variation in Service order in relation to the changes in NHS services being proposed by the CCG. It also highlights the need to subject the as yet unworked out arrangements to the most meticulous scrutiny and public consultation before reaching any binding decision to approve any Council cooperation in these arrangements whatsoever. No less than the future health of our city is at stake.