A prescription for our Ailing Health & Social Care services

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Westminster residents and patients know that the NHS is under huge strains and are struggling to cope with the pressures they facing. The impact of almost 7 years of underfunding by this Conservative Government, constant service reorganisations and creeping privatisation, have combined with an aging population and huge cuts to council adult social care budgets and other support services to create queues at A&E and delays in operations that we haven’t seen for a generation, since the Conservatives were last in Government. There is much that can and must be done at a national level to ensure that both the NHS and the adult social care systems are properly funded and organised however there is much that can and should be done at a local level to help limit the damage and improve outcomes for patients. It is with that in mind that Westminster Labour Group sets out a short practical ‘prescription’ of ways in which Westminster Council and the local NHS can improve their performance.

PUBLIC ACCOUNTABILITY
Labour supports the need for a local review of consultation and engagement procedures strategies for Westminster residents. Westminster Labour Group has noted that Health and Wellbeing Boards (HWBs) are seen to be critical in local leadership of the health and care system, but that there needs to be greater consideration of how health services are held to account locally.

One example of poor consultation has been the meagre public involvement in respect of the 2016 Westminster Health & Wellbeing Strategy. It was wholly overshadowed by decisions made beyond the local democratic process for Westminster – either Tri-Borough or NHS multi-Borough planning - NW London Sustainability & Transformation (STP) plan – on which severe criticisms have been made about the poverty of public consultation. Crucially the local consultation on the impact of the STP was buried within discussions around the Health and Wellbeing Strategy, limiting the ability for the wider public to get engaged directly in these vital NHS issues.

Westminster Labour Group note that the NW London STP “footprint” is merely a discussion forum - not a statutory body, but it is process that is gaining a significant amount of power to decide the future of health services in our area. Having noted the serious criticisms made of the lack of consultation in respect of the plan we call for this and other plans to be subject to equivalent public scrutiny – as has been afforded to other strategic NHS substantial variation plans that are subject to formal processes (e.g. ‘Shaping a Healthier Future’). We further note the detailed criticisms raised by the Independent Healthcare Commission Review of ‘Shaping a Healthier Future’ and we understand and support the reasons why Hammersmith and Fulham and Ealing Councils are, therefore, not able to support an STP that would see the loss of A&E services at Charing Cross and Ealing Hospitals, something that could have a significant impact on blue light pressures at St Mary’s Hospital in Westminster.

WINTER PRESSURES
Westminster Labour Group notes the severe state in A&E and social care services in Westminster and have particular concerns about the plans to deal with ‘Winter Pressures’. All major UK political parties accept the priority need to integrate health with social care service provision. In respect of the 70 or so patients waiting, ready for discharge on most days at St Mary’s Hospital and the £35m social care deficit identified by the STP until 2020. Unless additional funds are provided (in addition to planned changes), it is our opinion that there is a need for immediate action to improve the use / levels of acute hospital beds at the hospital (especially during the Annual Winter Pressure period) at the same time as making significant improvements to the infrastructure for integrated social & and healthcare services and efficiency in community discharges. In conjunction with NHS & local Care agencies, we call for the introduction & publication of an Annual Winter Pressures report each September - to explain actions being used to overcome yearly pressures.
WESTMINSTER SOCIAL SERVICES

ADSS concluded in their 2016 Annual survey that “we are at the tipping point where social care is in jeopardy and this impacts on the millions of people needing care and support. More people work in adult social care than in the NHS” Such a dire warning deserves to be heard and acted upon.

We are disappointed to note that Westminster Council made cuts to Social Services in 2016/17 amounted to 29.8% in cash terms and 35.5% in prices – making Westminster the 4th highest level of cuts in all 152 Authorities in England. This compares with our relatively high level of total yearly resourcing (£1.3bn ) – made up of RSG Government taxes (£58m) and local Council taxpayers (£40m). Further cuts and new savings of over £5million for 2017/18 are planned in the upcoming budget, with more pain to come in future years due to continued government cuts and rising costs.

We are strongly of the opinion that there is a clear and vital need for improved government investment in NHS and Adult Social care funding in Westminster. For its part, Westminster Council should resolve to assist the process by focusing on issues within its own remit and we call upon the Council to:
• take steps to actively lobby the Conservative government to provide extra funding in the upcoming budget, in order to tackle our growing shortfall in social care funding
• note that, whilst Social Care funding remains a responsibility of central government, we support the continued full use of the government’s adult social care precept, to ensure that the council brings a year on year increase adult social care funding from the sources under its control

SOCIAL CARE PRECEPT PLANS – 2017 ONWARDS

The government has announced a new package of changes (Dec 2016) for 2017-2019. A £240m ‘adult social care support grant’ will be introduced next year - to be divided by local authorities based on need. Councils are to be given more flexibility in how they use the precept. From next year local authorities will be allowed to use the precept to raise council tax bills by 3% in 2017-18 and a further 3% 2018-19. The support grant is to be funded via savings to the central ‘new homes bonus’ scheme, something that Westminster had also relied on to plug gaps in its funding.

A wide range of eminent commentators have poured scorn on the scheme:
• “The emphasis on the precept risks increasing inequalities - the wealthiest parts of the country being able to raise up to three times as much as poorer areas. Simply passing the problem to councils to solve is inadequate.” (Kings Fund)
• “The changes were “nowhere near enough” to address the funding gap facing authorities. (Kings Fund)
• “This money will provide a temporary injection, but will not future-proof this sector. There has to be better accountability of how local authorities spend the precept: at present, few providers of frontline services have seen a meaningful change in the resources they have to provide care. A clear accountability trail is essential to progress.” (Even private Care Home executives disagree with the Government)

The Fair Funding Review by the Prime Minister - to find a sustainable long-term solution is welcome, but there is an urgent need to explain how this will be achieved. In the meantime, older people, families and carers are being let down by a failure of political leadership. It underlines the need for fundamental reform and to put social care on a sustainable footing for the future.

PUBLIC HEALTH

During the year, we observed obfuscation and a lack of transparency surrounding public consultation on the arbitrary mid-year Government cuts to our Public Health budget. We are concerned that this is yet another policy area affecting Westminster residents that requires adequate scrutiny and accountability. We call upon
the Cabinet member responsible for the Public Health budget to initiate a yearly public consultation procedure.

MENTAL HEALTH SERVICES
We have not seen any evidence of similar winter pressures to those being reported by Acute Hospitals in respect of Mental Health discharges and community support. We are conscious that this might be the case and will be seeking clarification on the circumstances in Westminster with our local Mental Health Trust.

GENERAL PRACTITIONERS
We note the intention of the Government to secure a further 5000 GPs nationally before 2020, but would request that details are published by our two CCGs as to the likely numbers required in Westminster. In addition, we anticipate that, should it prove difficult to either train / recruit the relevant number of GPs, that serious consideration be given to GP Practices employing more Nurse Practitioners / Community Mental Health workers to support practices in known specialities (e.g. Diabetes / Mental Health) to reduce the workloads of GPs. In Westminster the future of GP services are under threat due to rising rents that exceed NHS England’s budget to support them putting the future of community health services in jeopardy and the council must act to address this in collaboration with the NHS. We also note that it is not in the gift of CCGs to address the issues of levels of GPs or their premises – as this is a duty of central government (NHSE).

IMPROVING THE ESTATE
The council looks to use its property portfolio and money raised from developers (particularly from the growing number of luxury apartments), to help provide new and replacement community health infrastructure to ensure the future of these services and work to take the pressure off hospital beds. The Council also should use its influence on Central Government to push NHS England expedite and ‘front load’ new capital funding to support physical improvements to the St Mary’s Hospital site, particularly given huge windfalls the NHS is likely get from the sale of existing properties within Westminster. We will press for Westminster Council to:

- Examine the future health and social care uses of existing public property (particularly that which is already serving the sector) as part of Westminster Council’s Property strategy and working being undertaken by CityWest Homes about the future use of their assets, as well as working with the NHS around the use of their land.
- Use funds raised from developers via Section 106 agreements or Community Infrastructure Levy to maintain and expand local health and social care facilities, with a focus on new opportunities for integrated care.
- Respond to the NHS 5 year futures plan, STP aims and Westminster’s Health & Well Being strategy, by setting a target to develop at least two Health & Wellbeing Centres in Westminster – not only for integrated health and social care services, but with a wider remit that accommodates healthier lifestyle activities –including mental health and sports / leisure services.
- Encourage developers more forcefully to build such infrastructure as part of planned development’s (not merely private sports facilities), This is already taking place in other parts of London.
- Call on NHS England to make available predicted receipts of land sales, especially the estimated £50m+ value of the derelict-‘Samaritans Hospital for Women’ site - for use in the immediate future to allow Imperial NHS Trust to activate plans for physical improvements to the infrastructure at St Mary’s.

Westminster Labour Group has previously called for WCC to take such a lead (Jan 2015) - inviting the NHS to collaborate with WCC to set up a common capital fund to help develop the appropriate infrastructure - putting to good use of the value of our current public assets owned by health and social care.