

Council: 1 November 2016

Agenda item 15.4 – Amendment in the name of Phil Cohen

STPs and local political involvement in health and social care integration

Delete ‘(if willing)’ from final paragraph and add at the end:

Council also notes the joint-letter dated 28 September to the Regional Director for London of NHS England from the Leaders of LB Camden, LB Haringey, LB Islington, LB Enfield and LB Barnet calling for greater transparency and political accountability of the STP process which also stated that:

“We are fully aware of the financial challenges facing health and care services and we want the STP process to enable us to take ambitions (sic) and truly transformational decisions across health and council services for the longer term benefit of our residents. There is a risk that a focus on short term financial challenges, alongside the imposition of possibly unrealistic timescales for resolving these risks, will prevent us from investing in the prevention and transformation needed to deliver improved health and care outcomes and greater, although medium term, financial benefits.”

Council welcomes the sentiments of this letter to tackle health inequality and make services more efficient through greater integration, but recognises the difficulty of the financial challenge caused by substantial deficits in the coming years.

Council therefore also asks that in their joint letter to the Secretary of State for Health, the Leader of the Council and the Leader of the Opposition call for the government to review the funding deficits against the level of need in North Central London and address these accordingly.

Substantive motion to read:

Council notes, with some concern, the significant demographic changes that are creating pressures for adult social care and health services in the North Central London (NCL) region and more widely.

For example, Council notes that in Barnet the over-65 population is forecast to grow three times faster (at 34.5%) than the overall population from 2015 to 2030, with the over-85 population set to increase by two-thirds (66.6%) during that time.

Council notes that residents are not only living longer, but longer with complex needs and disabilities. There has been a rapid increase in the number of people living with

dementia in the borough and, with over 3,000 beds in residential units, Barnet continues to be a large net importer of people in need of care.

Council recognises the imperative of not only meeting such demand challenges but ensuring those residents are able to access the quality care required to meet their needs.

Council further recognises the relationship between the care sector and the health service and notes that, despite the £12bn in additional funding supplied to the NHS by the government, many areas like North Central London (of which Barnet is a part) are facing substantial deficits in the coming years unless action is taken.

Council notes the Sustainability and Transformation Plan (STP) produced by the local health service to consider its challenges and how to address them.

Council believes that greater integration between health and social care must be a key part of the solution and that local authorities should be able to play a more leading role than they are currently afforded.

Council believes that the interests of residents, patients and taxpayers, would be better served by increased local political involvement. Whilst welcoming the ambitions of the NCL STP to work in partnership to transform services, improve patient outcomes and tackle the large forecast deficits,

Council believes it would benefit from greater input and scrutiny from the council, its elected members and the public.

Council, therefore, calls for the STP to be made open for political and public consideration and for it to be discussed and scrutinised at the Health and Wellbeing Board, the Health Overview and Scrutiny Committee and the subsequent Policy and Resources Committee.

Council also asks the Leader of the Council and the Leader of the Opposition to write together to the Secretary of State for Health to call for more meaningful local political involvement at the earliest stage in the integration of health and social care and the response to the financial and demographic challenges being faced.

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Under Full Council Procedure Rule 23.5: if my item is not dealt with by the end of the meeting I ask that it be voted upon at the Council meeting