

Item 5: North Kent: Adult Community Services

By: Peter Sass, Head of Democratic Services

To: Health Overview and Scrutiny Committee, 5 June 2015

Subject: North Kent: Adult Community Services

Summary: This report invites the Health Overview and Scrutiny Committee to consider the information provided by NHS Dartford, Gravesham and Swanley CCG and NHS Swale CCG.

There are a number of items on the Agenda relating to community services. General information on community services is included in the covering report to this item as the first of these.

1. Introduction

- (a) On 11 April 2014, the Committee considered the redesign of community services and out-of-hours services in the NHS Swale CCG area. At the end of the discussion, the Committee agreed the following recommendation:
- *RESOLVED that the Committee determines the proposed service change as a substantial variation of service and that a timetable for consideration of the change would be agreed between the HOSC and NHS Swale CCG after the meeting.*
- (b) On 10 October 2014, the Committee considered an update on the out-of-hours proposals as part of the wider reconfiguration and recommissioning of emergency and urgent care services by NHS Medway CCG, NHS Swale CCG and NHS Dartford, Gravesham, Swanley CCG. At the end of the discussion, the Committee agreed the following recommendation:
- *RESOLVED that:*
 - (a) *the Committee do not deem this change to be substantial.*
 - (b) *the guests be thanked for their attendance at the meeting, that they be requested to take note of the comments made by Members during the meeting and that they be invited to attend a meeting of the Committee in six months*
- (c) On 6 March 2015, the Committee considered an update report on proposals for adult community services by NHS Dartford, Gravesham and Swanley CCG and NHS Swale CCG. At the end of the discussion, the Committee agreed the following recommendation:
- *RESOLVED that the report be noted and NHS Dartford, Gravesham and Swanley CCG and NHS Swale CCG be invited to attend the June meeting of the Committee.*

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2. Community Services

- (a) Community health services cover a range of services provided by a variety of organisations and staff including:
- Community nurses;
 - Health visitors;
 - Community dentistry;
 - Podiatry;
 - Physiotherapy;
 - Speech and language therapy;
 - Family planning services;
 - Community rehabilitation.
- (b) Prior to 2009, the vast majority of Primary Care Trusts (PCTs) both commissioned and provided community health services. By 2009, PCTs had to organisationally split their commissioning and provider arms.
- (c) A wide range of options for the future organisational form of provider arms was set down in the 2009 Transforming Community Services programme. The “most likely options” were given as integration with an NHS acute or mental health provider; integration with another community-based provider; or a Social Enterprise.
- (d) By April 2011 PCTs had to divest themselves of their provider arms. A number of Community Health Trusts were created following the merger of community-based providers.
- (e) The Health and Social Care Act 2012 established Clinical Commissioning Groups (CCGs) which replaced PCTs on 1 April 2013. CCGs are now responsible for the planning and commissioning of health care services for their local area including community services; whilst NHS England is responsible for directly commissioning primary care and specialised services.
- (f) Monitor approved the Foundation Trust applications of Derbyshire Community Services NHS Trust and Bridgewater Community Healthcare NHS Trust on 30 October 2014. They became the first community health trusts to achieve foundation trust status.

2. Kent Community Health NHS Foundation Trust

- (a) Kent Community Health NHS Trust was formed on 1 April 2011 from the merger of Eastern and Coastal Kent Community Services NHS Trust and West Kent Community Health.
- (b) It is one of the largest NHS community health providers in England, serving a population of two million; 1.4 million living in Kent and 600,000 people in areas outside of Kent. The Trust employs 5,500 staff including community nurses, physiotherapists, dietitians and many other healthcare professionals. The Trust’s budget was £229 million in 2013/14.
- (c) The Trust provides wide-ranging NHS care for people, in their community, in a

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range of settings including people's own homes; nursing homes; health clinics; community hospitals; minor injury units; a walk-in centre and in mobile units. The Trust has three million contacts with patients a year.

- (d) Monitor authorised Kent Community Health NHS Trust to become an NHS Foundation Trust on 1 March 2015.

3. Medway Community Healthcare

- (a) Medway Community Healthcare was formed as a social enterprise Community Interest Company (CIC) on 1 April 2011 on the transfer of services previously provided by NHS Medway PCT.
- (b) Medway Community Healthcare is a £57 million business with 1,250 staff providing a wide range of both planned and unscheduled care in local settings such as healthy living centres, inpatient units and people's homes.

4. Potential Substantial Variation of Service

- (a) It is for the Committee to determine if the changes to Adult Community Services constitute a substantial variation of service.
- (b) Where the HOSC deems the change as not being substantial, this shall not prevent the HOSC from reviewing the proposed change at its discretion and making reports and recommendations to the CCGs.
- (c) Where the HOSC determines the change to be substantial, a timetable for consideration of the change will need to be agreed between the HOSC and CCGs after the meeting. The timetable shall include the proposed date that the CCGs intends to make a decision as to whether to proceed with the proposal and the date by which the HOSC will provide any comments on the proposal.

5. Recommendation

If the change is *not substantial*:

RECOMMENDED that:

- (a) the Committee does not deem the changes to Adult Community Services to be a substantial variation of service.
- (b) North Kent CCGs be invited to submit a report to the Committee in six months.

If the change is *substantial*:

RECOMMENDED that:

- (a) the Committee deems the changes to Adult Community Services to be a substantial variation of service.
- (b) North Kent CCGs be invited to attend a meeting of the Committee in three months.

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Background Documents

Department of Health (2013) '*Transforming community services transformational guides (08/02/2011)*',
<https://www.gov.uk/government/publications/transforming-community-services-transformational-guides>

Kent Community Health NHS Foundation Trust (2015) '*About (01/03/2015)*',
<http://www.kentcht.nhs.uk/home/about-us/>

Kent County Council (2014) '*Agenda, Health Overview and Scrutiny Committee (11/04/2014)*', <https://democracy.kent.gov.uk/mgAi.aspx?ID=27880>

Kent County Council (2014) '*Agenda, Health Overview and Scrutiny Committee (10/10/2014)*',
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=5400&Ver=4>

Kent County Council (2015) '*Agenda, Health Overview and Scrutiny Committee (60/03/2015)*',
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=5838&Ver=4>

NHS Trust Development Authority (2014) '*Monitor approves 3 FT applications (30/10/2014)*', <http://www.ntda.nhs.uk/blog/2014/10/30/monitor-approves-3-ft-applications/>

Medway Community Healthcare (2015) '*About Us (23/04/2015)*',
<http://www.medwaycommunityhealthcare.nhs.uk/about-us/>

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