

MEETING

JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

DATE AND TIME

FRIDAY 21ST APRIL, 2017

AT 10.00 AM

VENUE

COMMITTEE ROOM 4, ISLINGTON TOWN HALL, UPPER STREET, LONDON N1

**TO: MEMBERS OF JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE
(Quorum 3)**

Councillor Alison Kelly (LB Camden) (Chair)
Councillor Martin Klute (LB Islington) (Vice-Chair)
Councillor Pippa Connor (LB Harringey) (Vice-Chair)
Councillor Alison Cornelius (LB Barnet)
Councillor Graham Old (LB Barnet)
Councillor Richard Olszewski (LB Camden)
Councillor Abdul Abdullah (LB Enfield)
Councillor Anne Marie Pearce (LB Enfield)
Councillor Charles Wright (LB Harringey)
Councillor Jean-Roger Kasek (LB Islington)

You are requested to attend the above meeting for which an agenda is attached.

Andrew Charlwood – Head of Governance

Enquiries to Vinothan Sangarapillai, Committee Services (London Borough of Camden)
Telephone 020 7974 4071 (text phone prefix 18001)

Media Relations contact: Sue Cocker 020 8359 7039

ASSURANCE GROUP

ORDER OF BUSINESS

Item No	Title of Report	Pages
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Redeveloping the Camden and Islington estate



The best **care** for local people
The best **research** for the world

Our vision



- Provide state-of-the-art mental health facilities across Camden and Islington
- Move more of our services into the community so they're closer to where you live and to the other ones you may use
- Build really good, up-to-date, warm and welcoming inpatient facilities if you need to come into hospital
- Create world-class research facilities to help us deliver the very best care

How we could do this

- Sell part of our St Pancras site to other NHS organisations, and for housing, which would include the development of affordable and key-worker accommodation
- Invest the proceeds in new inpatient and community services across Camden and Islington

Background



The Trust has 35 sites including:

- Inpatient beds at St Pancras Hospital and Highgate Mental Health Centre
- Community facilities, offering a wide variety of clinical services across multiple sites

Where we are now



- Many of our buildings are old, not fit-for-purpose and highlighted as a problem by the CQC
- Our St Pancras site – part of its pre-war buildings - was never designed for mental health inpatient beds.
- It is no longer viable to bring our existing St Pancras buildings up to 21st century standards

Now



Your partner in
care & improvement 

The Future?



Your partner in
care & improvement 

Three feasible options for St Pancras



1. Just repair and maintain all our current buildings, including on our St Pancras site
2. Move our inpatient beds from St Pancras to a site behind the Whittington Hospital, invest in our community services, build new facilities, and bring our researchers and academics together on a single site
3. Move our inpatient beds from St Pancras to the St Ann's site, next to Barnet, Enfield and Haringey Mental Health Trust, invest in our community services, build new facilities, and bring our researchers and academics together on a single site

How the process works



- We will submit an 'outline business case' to NHS Improvement in the early summer
- They will score the three options against criteria including feedback from service users and staff
- Once an option has been chosen, there will be a full, formal public consultation
- No building work will commence before 2019
- We will keep you informed and offer opportunities to give your input throughout this process

How we're getting input now



<i>Date</i>	<i>Group</i>
14 March	Union briefing
20 March	Islington Healthwatch
24 March	cBug, iBug, Nubian Forum, Women's Strategy Groups
24 March	Letter and survey sent to all service users
28 March	All staff briefing, Peckwater Centre
31 March	Service User Alliance
4 April	All staff briefing, HMHC
5 April	All staff briefing, St Pancras site
5 April	All staff briefing, Lowther Road
13 April	Service Users' conference
April/May	Carers meetings tbc
TBC	Other groups

JHOSC 21 April 2017
10:00am, Islington Town Hall

NCL STP update – Estates
Additional information

JHOSC comments/questions:

- i) **The Committee has had numerous verbal reassurances that the St Ann's and St Pancras sites were being looked into as a top priority: The Committee would like an update on where this is at both in terms of estates and services that would be going into the sites as these are both intertwined.**

Response: The main report sets out the timescales and latest developments for the St Ann's and Whittington developments. Information about the St Pancras development is appended to this supplementary report. The St Pancras scheme is currently testing three options with stakeholders as part of pre-consultation, as part of the development of the strategic outline case (SOC) for the scheme. These are set out in the attached slide pack. Both the C&I and BEH schemes are being taken forward in the context of close working between the two organisations. This is so that the option for locating services delivered by both trusts on the St Ann's site remains an option whilst neither delaying the re-development of the St Ann's site nor limiting the consideration of other options in respect of the St Pancras redevelopment.

The Committee would also like an update on:

- ii) **How far are the estates' development of St Ann's, Camden & Islington NHS Foundation Trust, and The Whittington being guided and held to account in relation to the JHOSC recommendations**

Estates recommendations: The Transformation Board needs to:

- *Integrate estates planning with the rest of the STP process so it focuses on delivering better health and wellbeing outcomes and full staffing and VFM*
- *Put pressure on Central Government so all decisions about NHS estates in London are taken by London NHS commissioners, providers and London councils working together, with devolved powers, for the good of local people*
- *Provide assurance that no estates disposals will take place unless the full benefit goes to the NCL community or is retained for their future use.*
- *Explore options to maximise the potential of community hubs e.g. expanding GP settings with Keeping Well facilities, the voluntary and community sector, council services and funding mobile clinics.*

Response:

The North Central London STP is in the process of updating its governance structures. This includes a programme delivery board which oversees the delivery of STP work programmes

and the establishment of an oversight group which will include elected members from all five councils and non-executives from STP NHS organisations. The governance structures will act as the accountability mechanism for the delivery of the STP. The consideration of, and action in response to, JHOSC recommendations will take place through STP governance structures. At the same time, individual organisations will also continue to be accountable for responding to JHOSC and JOSC recommendations through their own governance and leadership arrangements.

The NCL STP has worked closely with the GLA and London devolution colleagues on the development of the memorandum of understanding for London devolution, which has at its core the goal of “*all decisions about NHS estates in London are taken by London NHS commissioners, providers and London councils working together, with devolved powers*” (quoted from JHOSC recommendations). In anticipation of the completion of the London devolution agreement, a London estates board has been established. This includes representatives from the GLA, London Councils, each STP, and London NHS. The board reports into the Mayor’s Health Board. The London Estates board includes representatives from the DH, HMT, NHSE (national) and NHS Improvement (national), with the aim that it will be the forum where decisions about London NHS estates are taken.

The North Central London STP is committed to using devolved powers to secure local retention of capital receipts that would otherwise be held centrally, and has set this out explicitly in the business case for devolved estates powers submitted as part of the development of the devolution agreement.

The STP is also continuing to work on the development of community hubs. The Care Closer to Home workstream of the STP has the aim of providing enhanced services based in primary care and each CCG is developing plans to deliver multi-disciplinary services from and increased access to primary care. As part of this, each CCG has developed proposals for capital schemes for primary care hubs.

Since the last JHOSC meeting on estates

- iii) What controls are there around estates’ development and the need to keep the resources for public benefit in the long-term?
- iv) How far the Whittington is bound by the controls / desired outcomes as the other local developments?

Response:

NHS Estates development is governed by regulations and guidance specific to the NHS along with town planning controls. The London devolution agreement, when implemented, would bring some decision making to the London and sub-regional level. NHS organisations, including the national NHS estates organisations (NHS Property Services and Community Health Partnerships) are required to achieve best value in any property disposal.

The implementation of STPs by NHSE as the method for longer term NHS financial planning sets a framework for NHS capital planning on the NCL footprint. All NCL NHS organisations have worked together to produce a shared financial plan, which includes capital expenditure, linked to the achievement of the STP outcomes. This therefore includes the Whittington.

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