Decisions of the Health Overview and Scrutiny Committee

7 July 2014

Members Present:-

Councillor Alison Cornelius (Chairman) Councillor Graham Old (Vice Chairman)

Councillors:

Val DuschinskyAmy TrevethanGabriel RozenbergPhillip CohenCaroline StockArjun MittraBarry RawlingsPaul Edwards

1. MINUTES (Agenda Item 1):

RESOLVED that the minutes of the meeting on 12 May 2014 be agreed as a correct record.

2. ABSENCE OF MEMBERS (Agenda Item 2):

None.

3. DECLARATION OF MEMBERS' INTERESTS (Agenda Item 3):

The Chairman declared a non-pecuniary interest by virtue of being a Chaplin's Assistant at Barnet and Chase Farm Hospital.

Councillor Barry Rawlings declared a non-pecuniary interest in relation to Agenda Item 9 (HealthWatch Barnet Enter and View Reports)

4. PUBLIC QUESTION TIME (IF ANY) (Agenda Item 4):

None.

5. MEMBERS' ITEMS (IF ANY) (Agenda Item 5):

- (a) **MEMBER'S ITEM: 18 WEEK REFERRAL TO TREATMENT TARGET** The Committee considered the Member's Item in the name of Councillor Trevethan, which requested an update report on the 18 week Referral to Treat Target at Barnet and Chase Farm Hospitals, to include any action that had been taken to:
 - Reduce the number of patients having to wait more than 18 weeks for surgery
 - Improve the accuracy of data

• Any further actions to be taken

A Member requested data provided by the Trust be separated between Barnet Hospital and Chase Farm Hospital.

The Chairman advised that the Committee could request a report from the Royal Free London NHS Foundation Trust which could be circulated to the Committee electronically and would allow Councillor Trevethan to determine if she wished to receive a full report at the next meeting of the Committee.

RESOLVED that:

- 1) The Committee note the Member's Item
- 2) The Committee request that the Royal Free London NHS Foundation Trust provide a written report to be circulated by e-mail to the Committee, for their consideration in advance of determining if the Committee wished to receive a formal update at the next meeting.

(b) MEMBER'S ITEM - BUS SERVICE FOR FINCHLEY MEMORIAL HOSPITAL

The Committee considered the Member's Item in the name of Councillor Arjun Mittra which sought an update an update on the possibility of a bus service at Finchley Memorial Hospital, including the status of the $\pounds 20,000$ agreed under Section 106 for TfL to use for bus shelters and whether this could be offered to Barnet Community Transport to run a pilot project to provide a bus service to the hospital.

The Chairman invited Martin Cowie, the Assistant Director for Strategic Planning, Regeneration and Transport at Regional Enterprise (Re) to the table.

At the invitation of the Chairman, Mr. Cowie advised the Committee that the funding referred to in the appended Planning Application Report was committed to be spent by TfL on works relating to the implementation of bus stop countdown displays and towards upgrading five bus stops within the vicinity of the hospital to ensure compliance with the Disability Discrimination Act.

A Member advised that he noted that the money was earmarked for a particular use, but commented that no work was ongoing, and requested that this be fed back to Transport for London. Mr. Cowie advised the Committee that he would pass this information on to TfL.

The Chairman questioned if it was possible for this Section 106 money to be transferred to Barnet Community Transport to provide a bus service for the hospital. Mr. Cowie advised that this was not possible. Responding to a question from a Member, Mr. Cowie advised the Committee that the Section 106 money had been identified, in consultation with TfL, as part of the assessment of the hospital development for improvements to local transport facilities and therefore could not be used to fund a new bus service.

The Chairman noted that the issue of a bus service at Finchley Memorial Hospital would be considered by the Committee at Agenda Item 7 and suggested that the Committee give their instruction on this topic following the consideration this item.

RESOLVED that the Committee note the Member's Item.

(c) MEMBER'S ITEM - MENTAL HEALTH CHARTER

At the invitation of the Chairman, Councillor Barry Rawlings noted that the topics covered in his Member's Item as set out in the report were relevant to the Terms of Reference of the Adults and Safeguarding Committee. Councillor Rawlings advised the Committee that he intended to withdraw his Member's Item from the Health Overview and Scrutiny Committee and take the Member's Item forward to the next meeting of the Adults and Safeguarding Committee on 31 July 2014.

RESOLVED that the Committee note that Councillor Rawlings will submit the Member's Item in his name to the next meeting of the Adults and Safeguarding Committee.

6. MINUTES OF THE NORTH CENTRAL SECTOR LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (Agenda Item 6):

The Chairman introduced the minutes of the meeting of the North Central Sector London Joint Health Overview and Scrutiny Committee (JHOSC) which took place on 24 March 2014. The Chairman advised the Committee that at that meeting, the JHOSC had considered A&E performance and noted that the JHOSC had sought further information from the London Ambulance Service on the number of conveyances of people from care homes to A&E that had taken place during the inter period.

The Chairman advised the Committee that the JHOSC had also considered a Mental Health Strategies Report reminded the Committee that any Member was able to attend JHOSC meetings.

A Member noted that the minutes had stated that Barnet and Chase Farm Hospitals NHS Trust was in the lowest performing five acute Trusts in London in terms of its A&E performance and 18th out of 22 Trusts in London.

7. FINCHLEY MEMORIAL HOSPITAL BUS SERVICE: PRESENTATION FROM THE FINCHLEY SOCIETY (Agenda Item 7):

The Chairman invited Mr. Robert Newton and Mr. Mike Gee from the Finchley Society Environment & Transport Committee and Ms. Gill Green from Friends of Finchley

Memorial Hospital to the table to present the results of a survey undertaken by The Finchley Society and the Friends of Finchley Memorial Hospital in relation to the distance between Finchley Memorial Hospital and existing bus stops in the area.

In introducing the report, Mr. Newton advised that the aims of the survey were in line with the Mayor of London's Local Implementation Plan.

Outlining results from the survey, Ms. Green noted that most GP Services have a bus stop nearby, and noted that the future GP Services on site at the Finchley Memorial Hospital would increase demand for a bus stop.

Mr. Gee advised the Committee that in order to reduce the number of people using cars to get to the hospital, the transport arrangements needed to be improved. Mr. Gee noted that whilst a bus diversion would be unlikely, a dedicated service could be considered. Referring to the report, Mr. Gee advised that Finchley Community Transport had proposed the idea of a circular "hoppa" bus route that could include the North Finchley Bus Station.

The Chairman informed the Committee that she had undertaken a mini survey with Peter Cragg, a member of the Finchley Memorial Hospital Estates Group in early March, and that the survey had noted the following:

- That a large proportion of people attended the Walk-in Clinic in cars;
- That if it was raining, people would be more inclined to use a car than a bus or walk.

The Chairman noted that the survey undertaken by The Finchley Society and the The Friends of Finchley Memorial Hospital had not asked how long people had had to walk from their home to the bus stop where they had begun their journey.

A Member of the Committee noted that the survey showed that there was a clear desire for a bus service.

A Member of the Committee noted that he had walked from the nearest bus stop to Finchley Memorial Hospital and advised that the walk could be challenging for people with physical problems.

A Member advised that he had walked from the nearest bus stop to Finchley Memorial Hospital in 3.5 minutes.

The Chairman advised the Committee that the GPs had not yet moved into the site at Finchley Memorial Hospital and noted that that the GPs being in residence was key to the viability of a self-sufficient bus service. The Chairman also suggested that any professional surveys conducted into the possibility of a bus service should be conducted once the GPs had moved in to give an accurate picture of demand.

A Member questioned when the GPs would be moving into the premises at the Finchley Memorial Hospital. The Chairman advised that this date was still not known, but that she was continuing to raise this question with NHS England, who are responsible for commissioning GP Services. The Chairman reminded the Committee that at the meeting of the Health Overview and Scrutiny Committee on 12 March 2014, Dean Patterson, the Head of Property and Asset Management at Community Health Partnerships had advised the Committee that as the Head Leaseholder, he was prepared to Commission a survey to gauge demand for a bus service when the timing was appropriate.

RESOLVED that:-

- 1) The Committee thank Mr. Robert Newton, Mr. Mike Gee and Ms. Gill Green for their presentation;
- 2) The Committee request that the Environment Committee consider this topic and the reports as set out the agenda item.

8. ROYAL FREE LONDON NHS FOUNDATION TRUST HOSPITAL ACQUISITION OF BARNET AND CHASE FARM HOSPITALS NHS TRUST (Agenda Item 8):

The Chairman introduced the report, which provided an update on the acquisition of Barnet and Chase Farm Hospitals NHS Trust by the Royal Free London NHS Trust.

Mr. Kim Flemming, the Director of Planning at the Royal Free London NHS Foundation Trust advised the Committee that the acquisition had become effective from 1 July 2014.

Referring to the report, Mr. Flemming advised that, as part of the acquisition, one of the next steps would to be to introduce "The Royal Free way of doing things" Mr. Flemming outlined that this meant working towards a clinically led organization.

The Committee noted that the issue of waiting times was a top priority at Barnet and Chase Farm Hospital.

Mr. Flemming advised the Committee that he wished to see continued improvement in Accident and Emergency.

Responding to a question from a Member, Mr. Flemming advised that he would be able to provide current and historical statistics on the number of people waiting on a trolley at A&E for over 12 hours.

A Member expressed concern that whilst she was at Barnet General recently, she had seen at least seven ambulances waiting outside the hospital.

A Member asked for more clarity on "The Royal Free way of doing things" as set out in the report. Mr. Flemming advised the Committee that there were currently four clinical divisions at the Royal Free London NHS Foundation Trust. The Committee noted that the head of each division was a working clinician, whose role would involve both looking after patients and management of the division.

Responding to a question from a Member, Mr. Flemming informed the Committee that the vast majority of staff were in post by 1 July 2014 and that the Trust had made efforts to ensure that staff knew who their manager would be.

A Member questioned how the Trust would be governed following the acquisition. Mr. Flemming advised the Committee that the Board of Governors would become much bigger and that there would be elections in the Autumn for the new Council of Governors.

A Member questioned how in practice the Trust worked with social care organisations to keep people out of hospital. Mr. Fleming advised that today people had a much better understanding of social care and noted that The Better Care Fund would also assist with providing more integrated care.

The Chairman questioned how much money the Royal Free London Hospital NHS Trust would receive should the acquisition go ahead. Mr Flemming advised that the figure was expected to be approximately £263 million, the majority of which would come from the Department of Health. The Committee noted that some money was earmarked to deal with the financial deficit. The Committee were also advised that some of the money would fund the new Chase Farm Hospital.

The Chairman invited Selina Rodrigues, the Head of Healthwatch Barnet to the table in order to provide Healthwatch Barnet's perspective on the proposed acquisition. Ms. Rodrigues advised the Committee that Healthwatch Barnet was concerned about the issues surrounding Referral to Treatment and A&E waiting times. The Committee noted that Healthwatch Barnet also planned to scrutinise trolley waits.

Ms. Rodrigues advised the Committee that the Healthwatch Barnet would be keen to see formal structures for patient engagement in relation to the proposed acquisition.

RESOLVED that:

- 1) The Committee note the update from the Royal Free London NHS Trust on the potential Acquisition of Barnet and Chase Farm Hospitals NHS Trust
- 2) The Committee note the Update from Healthwatch Barnet
- 3) The Committee request to be provided with the current and historical statistic's on the number of people waiting on a trolley at A&E for over 12 hours

9. HEALTHWATCH BARNET ENTER AND VIEW REPORTS (Agenda Item 9):

Selina Rodrigues, the Head of Healthwatch Barnet introduced a report conducted by the "Enter and View" team concerning Woodfield House. In introducing the report, Ms. Rodrigues advised the Committee that the aim of Healthwatch Barnet was to be the voice of Barnet residents.

The Committee noted that the visit undertaken to Woodfield House was a re-visit, where the Enter and View Team were able to see if recommendations from thier previous visit had been implemented.

Julie Pal – CEO for CommUNITY Barnet informed the committee that Healthwatch Barnet had won the 'Best Healthwatch Volunteer' Award from Healthwatch England and that the team was also highly commended for 'Outstanding Healthwatch Team 'at the same awards ceremony. The Chairman offered her congratulations and those of the Committee.

RESOLVED that the Committee note the report.

10. BARNET, ENFIELD AND HARINGEY MENTAL HEALTH TRUST: ADDRESSING QUALITY AND SAFETY ISSUES (Agenda Item 10):

Mary Sexton, the Executive Director of Nursing, Quality and Governance – Barnet, Enfield and Haringey Mental Health Trust provided the Committee with a verbal update in relation to quality issues at the Trust.

Ms. Sexton advised the Committee that in respect of the following;-

1) Inappropriate use of seclusion rooms at St Ann's Hospital:

The Committee noted that the CQC had revisited the Trust on 11 April 2014 and that the Enforcement Notice had been rescinded.

2) Dementia and Cognitive Impairment Service Line:

The Committee noted that the CQC had visited the older adults mental health wards at Chase Farm Hospital in September 2013 and judged the Trust to be non compliant in the areas of Outcome 4 (Care and Welfare), Outcome 10 (Safety and Suitability of Premises), Outcome 16 (Assessing and Monitoring Quality of Services) and Outcome 21 (Records). The Committee were informed that an action plan was put in place and submitted to the CQC. The Committee noted that in April 2014, the Trust advised the CQC they were fully compliant and the CQC were invited to re-inspect. The Committee were informed that the Trust was awaiting a further re-inspection of the services by the CQC.

The Committee were advised that over the last 9 months, the Trust had demonstrated improved compliance, which is a reflection in moving from a position of 11 areas of non compliance to 4 (at the time of this meeting) and that those 4 were awaiting re-inspection by the CQC. The Committee noted that the Trust was working closely with the three Clinical Commissioning Groups.

Vivienne Stimpson, the Director of Quality and Governance at Barnet Clinical Commissioning Group (CCG) noted that there was an on-going level of concern about quality at the Trust and advised that the CCG would continue to work with the Clinical Quality Review Group (CQRG) to assess the service. Ms. Stimpson noted that effort had been made to make improvements at the Trust.

The Committee noted that some services at the Trust were commissioned by NHS England and others by the CCG, which presented a need to share joint commissioning intelligence.

Ms. Stimpson advised the Committee that Barnet CCG would be working closely with the Trust and through NHS England and advised that the Trust were on "enhanced monitoring."

Referring to the report, a Member noted that the CQRG had agreed to extend the role of the Task and Finish Group (TFG) to Project Manage the "Bay Tree, Cornwall Villas, Silver Birches Improvement Plan" and questioned if CQRG were confident that the TFG would show the outcomes as they should be. Ms. Sexton advised that the Task and Finish Group was meeting regularly and that assurance had been sought that an action plan was in place.

A Member noted the seclusion rooms had been used partly because of pressure. The Member questioned how confident the Trust could be about holding onto the improvement with decreasing money because of tariffs. Ms. Sexton advised that she shared that concern and noted that any patient who had needed the seclusion room would have been able to use it. She also pointed out that the organisation had to balance funding with demand.

A Member noted that the role of commissioners in making the right decision at the right time and commented that demand could increase as people live longer.

A Member commented that as a Committee, this was a topic that they would be likely to want to review in future.

RESOLVED that the Committee note the robust approach in dealing with quality and safety issues at the Barnet Enfield and Haringey Mental Health Trust and request to kept updated.

11. REPORT OF THE DIRECTOR OF PUBLIC HEALTH (Agenda Item 11):

Dr. Andrew Howe, the Director of Public Health for Barnet and Harrow Councils, introduced a report which provided an update on the Outdoor Gyms within the Borough, and Outdoor Gym Activators. The Chairman also invited the Chairman of the Health and Well-being Board to attend the table.

The Committee noted that there were between seven to nine pieces of equipment at each gym.

A Member of the Committee commented that there was a gap in outdoor gym facilities in the Finchley area and requested that the area be considered as a priority for future gyms.

Responding to a question from a Member, Dr. Howe advised the Committee that the Outdoor Gym Activator Programme used volunteers who had undergone training to encourage people to use the gyms with the correct technique. The Committee noted that the training undergone by the volunteers could be used in other gyms, which would in turn help people to get jobs in the fitness industry.

A Member commented on the benefit of "measured walks", noting that that they were suitable for people of all ages. Councillor Helena Hart, the Chairman of the Health and Well-being Board, advised the Committee that there could be problems with signage for such walks. The Director for Public Health advised the Committee that walking was a good preventative activity.

RESOLVED that the Committee note the report from the Director for Public Health.

12. HEALTH OVERVIEW AND SCRUTINY FORWARD WORK PROGRAMME (Agenda Item 12):

The Committee considered the work programme as set out in the report. The Chairman noted that the Committee could request a report from the Royal Free London NHS Foundation Trust which would then be circulated to the Committee electronically and would allow Councillor Trevethan to determine if she wished to receive a full report at the next meeting of the Committee.

The Chairman noted that there was an item on the Forward Work Programme for the October meeting on Accident and Emergency and Winter Preparations. The Chairman commented that Fiona Smith, the Chief Operation Officer at Barnet and Chase Farm

Hospitals NHS Trust, had undertaken a piece of work on the number of elderly people attending A&E from care homes. The Chairman suggested that the Committee request an update report on the progress of that piece of work, outlining which homes had been identified as having high numbers of elderly people attending A&E, the diagnoses that they were being admitted with and what measures were being put in place for the coming winter.

RESOLVED that the Committee note the Work Programme and request that the Governance Service arrange for the reports to be received as set out above.

13. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 13):

None.

The meeting finished at 10.00 pm

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