

## **THE LONDON BOROUGH OF CAMDEN**

At a meeting of the **NORTH CENTRAL LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE** held on **TUESDAY, 19TH SEPTEMBER, 2017** at 6.30 pm in Committee Room 4, Town Hall, Judd Street, London WC1H 9JE

### **MEMBERS OF THE COMMITTEE PRESENT**

Councillors Alison Kelly (Chair), Pippa Connor (Vice-Chair), Martin Klute (Vice-Chair), Jean Kaseki and Graham Old

### **ALSO PRESENT**

Councillor Samata Kahtoon (LB Camden)

**The minutes should be read in conjunction with the agenda for the meeting. They are subject to approval and signature at the next meeting of the North Central London Joint Health Overview and Scrutiny Committee and any corrections approved at that meeting will be recorded in those minutes.**

### **MINUTES**

#### **1. APOLOGIES**

Apologies were received from Councillors Beales, Wright, Cornelius, Abullahi and Pearce, and from Councillor Revah who was a substitute member of the Committee. It was noted that the meeting was quorate with representatives from four boroughs present.

#### **2. DECLARATIONS BY MEMBERS OF PECUNIARY, NON-PECUNIARY AND ANY OTHER INTERESTS IN RESPECT OF ITEMS ON THIS AGENDA**

Councillor Connor declared that her sister was a GP in Tottenham. Councillor Kaseki declared that he was a former governor of the Camden and Islington NHS Foundation Trust.

#### **3. ANNOUNCEMENTS**

There were no announcements.

#### **4. NOTIFICATION OF ANY ITEMS OF BUSINESS THAT THE CHAIR CONSIDERS URGENT**

There were no items of urgent business.

#### **5. ST ANN'S HOSPITAL SITE REDEVELOPMENT**

Consideration was given to a presentation by Andrew Wright, the Director of Strategic Development for the Barnet, Enfield and Haringey Mental Health Trust.

Mr Wright explained that the Trust wanted to replace their old in-patient mental health wards with new facilities. St Ann's hospital site encompassed 23 acres, much of which was underused. That size of site was not required any more and they would be putting two-thirds of the current site up for sale.

Mr Wright said the current buildings were outdated and not fit for purpose. They had been designed in the 1930s. He informed the Committee that there had been eight workshops with patients and carers to discuss the proposed new building. The aim was to modernise the site and improve the layout. The plan was affordable in capital terms.

He said that design was such that it could accommodate twice as much clinical floorspace in future if required.

Mr Wright outlined that the development fitted in with Haringey Council's plans for wider regeneration of the area. Planning consent had been obtained from the Council in 2014. The surplus land sold on the open market would have 470 housing units, 14% of which would be affordable housing. The aim was to commence building in early summer 2018 and to finish in summer 2020.

The Chair asked if the development fitted in with the estates principles the Committee had articulated previously. She asked if the estates planning had been integrated with the rest of the STP programme.

Mr Wright said that it was part of the estates workplan and there was flexibility built in for future expansion, if there was separate funding available for it. He said that the development would improve services for patients and working conditions for staff.

The Chair highlighted the Committee's view that no estates disposal should take place unless the full benefit goes to the community. She asked if this was the case.

Mr Wright said that the scheme was awaiting NHS Improvement approval. The Trust wished to retain the whole surplus to reinvest in the site. The scheme was based on this. He was asked if capital receipts would be used for revenue expenditure and he said they would not be.

Mr Wright was asked if their measures maximised the possibility of creating community hubs. He said that was not the aim of this scheme, however it was part of a broader Mental Health workstream which was focussing on reducing pressure on mental health in-patient services and providing services in the community.

Councillor Connor welcomed the new hospital building but expressed disappointment that there were no new beds. She noted that there would be 16 new

beds in another borough, but thought that the construction of a new building was a missed opportunity to provide more bedspace, particularly as occupancy sometimes exceeded 100% and so patients were being sent to East London.

Mr Wright clarified that the 16 new beds the Mental Health Trust would be providing would be in Barnet. These beds would replace the ones that were being bought in from East London. Funding more beds at St Ann's would require ongoing funding from the CCGs and was not affordable otherwise.

He said there was some flexibility in the layout and the eating disorders unit could be reprovisioned as an acute ward.

Councillor Klute queried the nature of the contract being entered into with the private firm IHP.

Mr Wright said it was a contract that was in compliance with the national procurement framework. It was a 'design and build' contract and an 'open book' approach would be taken.

In response to questions about how it differed from PFI agreements, Mr Wright said that the funding for this scheme would come from the sale of assets, not from borrowing from private investors as in PFI deals. As such, the Trust would not be borrowing money and would own the buildings, rather than lease them, when they were completed. The contractors' involvement in this contract would not cover facilities management arrangements but would be restricted to dealing with defects.

A member asked questions about education and training on site. Mr Wright clarified that students did come to the site for placements and training, but it was not a medical school.

Members asked for figures on the revenue from the sale of land. Mr Wright said it was being put on the open market and would be sold for the best offer.

Councillor Connor queried whether the government would give match funding if sales of land were conducted quickly, as she had heard information to that effect. Mr Wright said the idea of the provision of match funding had been floated as national policy, but no scheme had been agreed yet. He felt the St Ann's process was probably beyond the point at which would be eligible to apply if such a scheme was created.

Members expressed concern that 14% affordable housing on the site was too low a figure. They commented that the government's definition of affordable housing as being at 80% of market rents was not genuinely affordable for many people on low and middle incomes in London. They were also concerned about the need for housing for key workers.

Mr Wright said as part of their agreement with Haringey Council, if the Trust obtained more revenue than they needed for their scheme, 60% of that money would go towards funding affordable housing in the area up to the level needed to fund units equivalent to what the site would have had if it had 50% affordable housing.

The Chair commented that it was a shame key worker housing was not being provided, as in the past there had been health sites where staff had lived in accommodation on site.

Mr Wright said the Trust was aware of the difficulties staff had with housing, particularly as an Outer London employer which paid less London Weighting than Inner London health employers, and noted the concerns about affordable housing that members had articulated. However, he said that staff had said to health employers that they preferred not to live on the site where they worked. As such, he said he was not able to give members a commitment about the provision of staff housing.

Members queried why the full business case would not be available until November or December. Mr Wright answered that this was because it needed a final price for the new building and a contractual arrangement to be reached with a developer about buying the land.

Members were keen to see figures about the revenue from the sale of land and the amount of money the developer would be making from the deal. Mr Wright said that an open book accounting policy was being followed and these figures should become available.

**RESOLVED –**

- (i) THAT the presentation and the comments above be noted
- (ii) THAT the full business case come to the Committee when available.

**6. ST PANCRAS HOSPITAL SITE REDEVELOPMENT**

Consideration was given to an amended presentation from the Camden and Islington Foundation Trust.

Malcolm McFrederick, the Project Director, was the lead presenter. He explained that they were not as far in the process for the St Pancras site as the Barnet, Enfield and Haringey Mental Health Trust were for St Ann's. They had submitted an outline business case to NHS Improvement and were waiting for it to be approved. They were anticipating it would be approved in October. If approval was granted, there would be a full CCG-led public consultation.

Mr McFrederick highlighted that the existing buildings were not fit for purpose and it was not viable to bring the St Pancras buildings up to date.

They wanted to see good and vibrant community facilities and mental health research taking place. A modern therapeutic environment would be good for patients and safer for staff. In-patient beds would be moved from the St Pancras site and there would be two new 'community hubs'.

Mr McFrederick said there had been consultation with service user groups, CCGs and local councils.

Members were informed that the preferred option of moving in-patient beds to the Whittington, establishing community hubs and bringing researchers and academics onto one site had been reached by considering it against 12 Quality Critical Success Factors.

There were benefits from co-locating mental and physical health services. They had also researched the travel patterns of their patients, and had wanted to find a site which was easily accessible to those who used public transport and did not have a car.

There was discussion about what would be in community hubs. There would be an office area, clinical space (for mental health services and for other health services), and a community space. The community space could include a café or gallery for service users to spend time in and for voluntary sector organisations to operate in.

The Chair mentioned that the Adult Education strategy made mention of community hubs. She asked whether the Trust were working with Camden and Islington on this. Mr McFrederick said that they had spoken to Islington about this and would also speak to Camden in future.

Trust officers said that they wished to align their plans for the surplus land in the St Pancras site with the borough's plans for housing.

Members asked how the redevelopment would fit in with wider STP matters. The Trust felt that community hubs would help with the linking of mental and physical health services.

The Chair asked where the revenue from estates disposals would go. Mr McFrederick said that the sales proceeds would be used to fund the redevelopment plans.

The Trust would be selling 80% of the St Pancras site and retaining 20%. Some of the land would be used for housing and some would be used by Moorfields Eye Hospital.

Members sought clarification that sales proceeds would not be used for revenue spending. They were assured that this would not be the case.

The Trust representatives were asked if a developer had been appointed. They said that this would take place after the outline business case was approved and would then go through the OJEU process.

Members asked about the progress Moorfields were making in terms of their business case for locating on part of the St Pancras site. The Trust representatives said that the two bodies were working together in terms of the timing of their work and submissions. However, they were two distinct schemes and not integrated.

Angela McNab, the Trust Chief Executive, confirmed that land which was surplus to Camden & Islington Foundation Trust requirements would be offered to other health bodies. Members said that there was pent-up demand for GP surgery sites in the area, and they hoped that some of the surplus land could be used for this.

Councillor Connor asked if the number of beds would increase following the move of in-patient facilities from St Pancras to the Whittington. She was informed that they would not decrease, however there had been no indication from commissioners that they would purchase enough beds to allow for the creation of a whole new ward. She expressed disappointment at this and felt it was important to ensure there were more in-patient facilities available for mental health patients, as demand for these had not fallen.

Members also wished to avoid patients having to be placed out of area. Officers said that, on average, the number of Camden and Islington patients who had to be placed outside of those boroughs was low. Ms McNab said the Trust had noted that people were being kept in beds here long than elsewhere and that they could be moved into intermediate care.

Councillor Khatoon, who was a ward councillor for the area, addressed the meeting. She wanted to see consultation with local residents and attention given to how more social housing could be provided on the site and if employment opportunities could be created for local residents. Trust officers agreed to arrange an opportunity for Councillor Khatoon to have a walkabout around the site.

Members expressed concern about the availability of key worker housing, and they felt that this was important to recruit and retain staff.

Members welcomed the proposals to move beds to the Whittington and felt that it was a suitable site. They wished the final business case to come back to the Committee at a future date.

**RESOLVED –**

- (i) THAT the presentation and the comments above be noted.

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- (ii) THAT the final business case when produced be submitted to the Committee at a future date.

**7. ANY OTHER BUSINESS THAT THE CHAIR CONSIDERS URGENT**

There was no other business.

**8. DATES OF FUTURE MEETINGS**

Future meetings would be:

- Friday, 22<sup>nd</sup> September 2017 (Barnet)
- Friday, 24<sup>th</sup> November 2017 (Enfield)
- Friday, 26<sup>th</sup> January 2018 (Camden)
- Friday, 23<sup>rd</sup> March 2018 (Islington)

The meeting ended at 8.25pm.

**CHAIR**

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**MINUTES END**