THE LONDON BOROUGH OF CAMDEN

At a meeting of the **NORTH CENTRAL LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE** held on **FRIDAY, 30TH NOVEMBER, 2018** at 10.00 am in Conference Room, Enfield Civic Centre, Silver Street, Enfield EN1 3XA

MEMBERS OF THE COMMITTEE PRESENT

Councillors Alison Kelly (Chair), Tricia Clarke (Vice-Chair), Pippa Connor (Vice-Chair), Huseyin Akpinar, Alison Cornelius, Lucia das Neves, Clare De Silva and Val Duschinsky

MEMBERS OF THE COMMITTEE ABSENT

Councillors Julian Fulbrook and Osh Gantly

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 for absence were received from Councillor Julian Fulbrook. Apologies for lateness were received from Councillors Lucia das Neves and Pippa Connor.

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 worked as a GP in Tottenham.

3. ANNOUNCEMENTS

There were no announcements.

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

There were no notifications of urgent business.

5. MINUTES

Consideration was given to the minutes of the meeting held on 5th October 2018.

With regard to the reference to a pending Moorfields item in the minutes, members said that they had been advised that the Moorfield item could not go to the Camden and Islington joint committee as it was not in its terms of reference. They wished those authorities to amend the terms of reference so that committee could consider it. If this was not possible, then the item would have to go to JHOSC.

RESOLVED -

THAT the minutes of the 5th October 2018 meeting be approved and signed as a correct record.

6. **DEPUTATIONS**

LUTS deputation

A deputation was received from Dr Kate Middleton and Kate Dwyer on behalf of the LUTS patients' group.

They welcomed the fact that new adult referrals were taking place, but were concerned that there were limitations on the number of new referrals and said they felt there had been poor communications with the patients' group. A scheduled meeting had been postponed to February 2019.

With regard to child patients, they said that Great Ormond Street had not been referring child patients to the LUTS clinic. They said patients who had not been cured by existing treatments should be referred to the LUTS clinic as it had greater expertise with these types of cases. They said that paediatricians had not been able to successfully treat these patients but they might be able to benefit from Dr Malone-Lee's treatment in the LUTS clinic. They said they had raised the matter with the CCGs but not had been able to get them to progress referrals.

Jennie Williams, Director of Quality and Nursing (Haringey & Islington CCGs), led on the response from health officers. She said that health bodies were trying to work in a co-ordinated manner on the LUTS issue.

She noted that the wait for adult patients was too long and hoped that the capacity of the clinic could increase as the new doctor recruited settled into her role.

With regard to the child patients, Ms Williams noted that Dr Malone-Lee was not a paediatrician and that the Royal College report had recommended that children be seen by a paediatrician in LUTS cases. As such, Great Ormond Street hospital was the tertiary provider for these cases and the staff there had to use their clinical judgement as to whether to refer children onto the LUTS clinic. Ms Williams said the CCGs would not wish to interfere with the clinical judgement of paediatricians in these cases.

Members noted the deputation and the response. They welcomed the progress being made in adult LUTS cases. They noted the disagreements around the approach to be taken to child patients, but highlighted that the JHOSC was not in a position to recommend a course of treatment. They asked that liaison with NHS England and NHS Improvement continue in order to find a beneficial solution to the patients involved.

ACTION: CCGs and Great Ormond Street Hospital

NHS Watch estates deputation

A deputation was received from Alan Morton and John Lipetz. They expressed discontent with the paper at Item 8 and said it did not answer the questions that they as members of the public had about the future of NHS estates in the sub-region.

They wanted to be clear on what percentage of revenue from sales was going towards revenue spend. They said the national level was two-thirds and wanted to know if it was higher locally.

They said that 50% of publicly owned land had been sold since 1979 and they felt that a focus on disposals was meaning that organisations were becoming too keen to identify land and buildings for sale rather than considering how to make the best use of their facilities.

They added that the provision of match funding by NHS England meant that organisations were being incentivised for disposals.

They asked that there be oversight at the London-wide level of property disposals taking place in the health service. They argued that, given the growing population of London, and an increase in the number of elderly people who might have more demand for health services, there was more need for land and property for medical purposes in the future.

7. ADULT ORTHOPAEDIC SERVICES REVIEW

Consideration was given to a presentation on the Adult Orthopaedic Services review.

Rob Hurd and Anna Stewart introduced the item to the committee. They highlighted that there were 11 sites which provided orthopaedic services at the moment. The aim was to consolidate and improve services to patients.

Mr Hurd said that they were at Stage 1 of the process so far, so no definitive proposals were being made.

Ms Stewart added that health officers had heard from colleagues from Manchester and from South-West London and wanted to learn from their experiences.

They added that they were communicating with residents from an early stage. Ms Stewart said that they had been sharing information on social media and via email lists. She noted that there had been concerns voiced about travel times to hospitals.

Members made a number of points in discussion:

- They wanted to see responsiveness to the needs of those with learning disabilities.
- They were concerned about the poor quality of outcomes reported for some private hospitals
- There were concerns about the quality of implants and members wanted to ensure that there was good record-keeping as to which exact type of implants had been used for patients.
- They wanted to see a transport analysis if there were plans to relocate services. Members had particular concerns about transport to Chase Farm.
- Members asked that account be taken of the projected growth of population in the sub-region
- They wanted to ensure that there was co-ordination with the 5 local authorities and their health and social care functions.
- They were concerned about a gap in east Barnet and west Enfield where there were no institutions providing orthopaedic treatment.

Officers said they were liaising with the lead members for health in the five North-Central London boroughs. In terms of concerns about private hospitals, members said that they were used for 'overspill' provision in situations where there were more patients that needed to be treated than NHS hospitals had capacity for. They said there might be poor outcomes in some cases where institutions had a relatively small caseload – as doctors were less likely to have experience in treating that particular kind of work. They wanted to see more operations carried out in larger centres.

Members asked if they could have more statistics about the cancellation of operations and measures being taken to reduce the number of cancellations. They also asked that an update come to the Committee in spring 2019.

RESOLVED -

- (i) THAT the presentation and the comments above be noted.
- (ii) THAT information be provided to members about the number of cancellations and measures being taken to reduce this.
- (iii) THAT a report come to the Committee in Spring 2019 updating members on the review.

ACTION: North London Partners

8. FINANCIAL UPDATE: ESTATES

Consideration was given to a presentation on NHS estates.

Members expressed disappointment at the lack of information available in the papers. Health officers said that land owned by NHS foundation trusts could be disposed of by those trusts, subject to the agreement of NHS Improvement.

What foundation trusts did with the revenue from sales was a matter for them, not for the STP – as the STP was not a statutory body. As such, the detail of how profits on disposals were used was held by the trusts.

Officers said that there were £102m in gains on disposal which had been made in 2017-18. Figures for 2018-19 were not yet available. Members asked STP officers to request the relevant information from the Trusts and to agree the wording of this request in advance with the Chair.

Members said that they wanted to see more transparency on estates and their disposal.

A member said that there had been a lack of consultation on the estates strategy for the St Pancras site, something that members on the Camden and Islington joint committee were now trying to remedy.

Members suggested that there needed to be scrutiny at the GLA level, since many estates issues were pan-London and not confined to the sub-region.

RESOLVED -

THAT the presentation and the comments above be noted.

9. GENERAL PRACTICE AS THE FOUNDATION OF THE NHS: A STRATEGY FOR NORTH-CENTRAL LONDON

Consideration was given to a presentation on the GP strategy.

Dr Katie Coleman introduced the item. She highlighted the drive in North-Central London to tackle unwarranted variation in health care and deal with the sub-region's changing demographics and patient demand.

Members highlighted the desire of patients to see GPs promptly and the long waits some patients had before they could see a doctor. One member suggested that greater use of hubs could help, as it would enable people to receive medical attention without having to specifically wait for a GP appointment slot to be available.

Members and the attendee from Enfield Healthwatch urged North London Partners to be proactive in engaging in the public on the GP strategy. They wanted them to be receptive to patients' views.

Councillors Cornelius and Duschinsky cited good practice from the Care Closer to Home Integrated Networks (CHINs). CHINs in Barnet grouped together a network of GP practices. They could then focus on what were the most significant problems in their area – they cited an example of one focussing on diabetes and one on frailty.

Councillor Akpinar noted the figures on the physical condition of GP practices on page 71 and asked if information could be provided on the condition of Enfield GP practices.

ACTION: North London Partners

Members noted the piece of work on the GP strategy would be a very large one, and wanted to see an update on it in the summer of 2019.

RESOLVED -

- (i) THAT the report and the comments above be noted.
- (ii) THAT a report come to the JHOSC in the summer of 2019 updating members on the progress with the GP strategy.

ACTION: North London Partners

10. FINANCIAL UPDATE: ROYAL FREE HOSPITAL

Consideration was given to a presentation on the Royal Free London Trust's finances.

Peter Ridley and Caroline Clarke addressed the Committee on behalf of the Royal Free. They explained that they were working to reduce their underlying deficit and the reference costs of the Trust had fallen. The Trust had reduced a £123m deficit to £95m. By 2021-22, they were aiming to eliminate the deficit.

With regard to questions about capital receipts, the officers informed the JHOSC that the revenue from asset sales had been invested in the rebuilding of Chase Farm.

Officers mentioned projects underway which would result in savings, such as electronic patient record-keeping and opening a combined decontamination unit by the North Circular.

Councillor Connor noted that the spend on agency workers had fallen but had recently started to rise again. Councillor Cornelius expressed concern about the lack of collection of money owing for NHS treatment from non-EU citizens who were not entitled to NHS treatment and may since have left the UK. Officers said that they did have methods to try to recover treatment costs from those who were not entitled to free treatment, and that visa policies for non-EU workers now required them to have insurance or to pay a healthcare surcharge.

Members asked about the confidence officers had in future estimates and projections. Ms Clarke assured members that the projections in the report were robust and that they had to submit them to the NHS regulator on a monthly basis.

RESOLVED -

THAT the report and the comments above be noted.

11. WORK PROGRAMME AND ACTION TRACKER

Consideration was given to the work programme and action tracker.

Members noted that there were a large number of items on the work programme. They decided to focus on the mental health and maternity themes for the January meeting and remove the other items. They agreed to add a care homes item to the March agenda and redesignate the social care STP update as Integrating Health & Social Care.

With regard to the items for January and March, Councillor Connor was to lead on mental health, Councillor Kelly on maternity and care homes items, Councillor Clarke to lead on ambulance services, and Councillor das Neves to lead on integrating health and social care.

RESOLVED -

THAT the work programme be agreed, subject to the amendments above.

ACTION: Strategy and Change (LB Camden)

12. ANY OTHER BUSINESS THAT THE CHAIR CONSIDERS URGENT

There was no other business.

13. DATES OF FUTURE MEETINGS IN 2018-19

It was noted that the dates for future meetings in 2018-19 are:

- Friday, 18th January 2019 (Haringey)
- Friday, 15th March 2019 (Islington)

14. PROPOSED DATES FOR MEETINGS IN 2019-20

It was noted that the proposed dates for JHOSC meetings next municipal year (2019-20):

- Friday, 21st June 2019
- Friday, 27th September 2019
- Friday, 29th November 2019
- Friday, 31st January 2020
- Friday, 13th March 2020

The meeting ended at 1pm.

CHAIR

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MINUTES END