

Decisions of the Health Overview and Scrutiny Committee

15 February 2012

Present:

*Councillor Alison Cornelius (Chairman)
Councillor Maureen Braun (Vice-Chairman)

Councillors:

* Geof Cooke	* Bridget Perry
* Julie Johnson	* Barry Rawlings
Andrew McNeil	* Kate Salinger
* Graham Old	* Brian Schama

*denotes Member present

Also in attendance:

Councillor Helena Hart, Cabinet Member for Public Health

1. MINUTES

RESOLVED that:-

the minutes of the meeting held on 12 December 2011 be approved.

2. ABSENCE OF MEMBERS

An apology for absence had been received from Councillors Maureen Braun and Andrew McNeil

3. DECLARATIONS OF MEMBERS' INTERESTS

Member:	Subject:	Interest Declared:
Councillor Kate Salinger	Agenda Item 9 (Maternity Services)	Personal but non-prejudicial interest by nature of having two nieces that are midwives at Barnet Hospital
Councillor Alison Cornelius	Agenda Items 7 (Barnet General Hospital Parking), 8 (Appointment Management Barnet Hospital Fracture Clinic), 9 (Maternity Services)	Personal but non-prejudicial interest by nature of being on the chaplaincy team at Barnet Hospital
Councillor Barry Rawlings	Agenda Item 16 (Barnet LINK Annual Report)	Personal but non-prejudicial interest as he was a specialist safeguarding advisor for COMMUNITY Barnet

4. PUBLIC QUESTION TIME

None.

5 MEMBERS' ITEM

None.

6 NORTH CENTRAL LONDON SECTOR JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE MINUTES (JHOSC)

RESOLVED that:-

the minutes of the 5 December 2012 North Central London Joint Health Overview and Scrutiny Committee (JHOSC) meeting be noted.

7 UPDATE REPORT - BARNET GENERAL HOSPITAL PARKING FACILITIES

Mary Joseet, Director of Performance, Planning and Partnership, and Mary Burney, Integrated Service Manager for Planned Care, from Barnet and Chase Farm Hospital Trust presented the committee with a verbal update on parking facilities at Barnet Hospital. This update followed on from a previous submission to the committee on the issue of parking at Barnet General Hospital at the 12 December 2011 meeting.

The committee were advised that a survey was being conducted of staff and patients at the Hospital in relation to current and possible future parking facilities and that this would be completed in one month. The committee were also advised that a *Green Travel Plan* had been signed off that would provide support for bicycle usage.

The committee were also advised that a new Director of Estates had been appointed at the Trust who would be reviewing the parking situation and would provide ongoing updates to the committee.

The Health Overview and Scrutiny Chairman advised the committee that she had received clarification from London Borough of Barnet's Planning Department indicating that there were no restrictions on increasing parking spaces at the site. In response to a question raised at the 12 December committee meeting in relation to possible planning restrictions at the site the Chairman advised the representatives from Barnet and Chase Farm Hospital Trust to contact the council's Assistant Director of Planning and Development should they require further clarification.

RESOLVED that:-

An update on the parking situation at Barnet General Hospital be provided to the committee's April meeting.

8 UPDATE REPORT – APPOINTMENT MANAGEMENT AT BARNET HOSPITAL FRACTURE CLINIC

The committee received an update report in relation to appointment management at Barnet Hospital fracture clinic. The update detailed planned improvements to services including the introduction of a “children’s hour”, improving patient information leafleting, and proposals to introduce a morning and afternoon clinic as part of the Trust’s clinical implementation plan.

The committee were advised that following a review of appointment patterns dating back over the previous six months the structure of the clinic and appointment times had been altered. This restructuring is intended to result in fewer appointments per day meaning each patient receives more time with doctors during their appointment.

The Trust representatives informed the committee that a winter fracture plan was in place alongside an optimal care plan with reduced elective treatment.

Trust representatives also informed the committee that plans were in place to enlarge waiting room facilities at the clinic by extending into an area currently used as a consultants’ car park. The committee were informed that the outcome of a capital bid was not yet known and that further developments would be dependent on the outcome of this bid.

RESOLVED that:-

The committee note the improvements being planned at the fracture clinic.

9 UPDATE REPORT - MATERNITY SERVICES AT BARNET AND CHASE FARM HOSPITAL – RESPONSE TO CARE QUALITY COMMISSION (CQC) REVIEW

The committee received a report detailing the response to questions raised by the committee in relation to the CQC review of maternity services undertaken at Barnet and Chase Farm Hospitals.

Further to the written responses contained within the report the committee were informed that the midwife to patient ratio had been improved to 1:30 with further plans to recruit more midwives in place.

The committee also received reassurance relating to security arrangements, cover for domestic staff absenteeism, and standards of cleanliness at the hospital sites along with details of safeguarding measures in place to protect potentially vulnerable mothers and children.

In relation to the recording of suspensions of maternity services at Barnet and Chase Farm Hospitals, the Chairman advised the committee that the JHOSC had told the NHS representatives present at their meeting on 16 January 2012 that if either Barnet or Chase Farm Hospitals suspend maternity services this should be recorded as a serious incident. Currently, because services are located across two sites, the Trust does not record the closure of one site as a serious incident.

RESOLVED that:-

The committee note the response provided by Barnet General and Chase Farm Hospitals Trust

10 UPDATE REPORT - ELYSIAN HOUSE-SPRINGWELL CENTRE TRANSITION

Ceri Jacob, the Associate Director of Joint Commissioning NHS North Central London and London Borough of Barnet along with Oliver Treacy, Service Director, Jane Scott, Assistant Director, and Jonathon Stephen, Service Manager, from the Barnet Enfield and Haringey (BEH) Mental Health Trust provided the committee with a verbal update on environmental conditions following the transition of services from Elysian House to the Springwell Centre. The Committee were also addressed by Susan Birnbaum, a relative of a service user.

The committee received assurances from BEH Mental Health Trust representatives that adequate facilities and services were in place in relation to the provision of meals for patients, personal storage space in wardrobes, and access to religious services.

The representatives were questioned about parking facilities at the Springwell Centre and responded that the management of these facilities was not within the control of the mental health trust and that further comments and recommendations should be directed towards Barnet General and Chase Farm Hospitals NHS Trust.

Councillor Schama again suggested that Barnet and Chase Farm Hospital NHS Trust explore opportunities for commercial sponsorship from local businesses for dedicated parking spaces for service users.

The committee questioned the BEH Mental Health Trust representatives in relation to a planning application submitted by Fairview New Homes Ltd that had been approved at the Planning and Environment Committee meeting on the previous evening, 14 February 2012. The approved application related to Phase Two of the former Colindale Hospital site comprising Birch Court, Willow Court and Elysian House, Colindale Avenue, London, NW9 5DZ.

The approved application specifically related to the demolition of all three existing buildings and construction of the 240 flats within three separate blocks ranging from four to seven storeys in height, together with associated car parking, landscaped public and private open space and a new public square.

In response to questioning relating to the Trust's plans for Elysian House, Oliver Treacy, the Service Director of BEH Mental Health Trust stated that the building was part of the Trusts planning for the next three years and that the Trust were not currently planning to sell Elysian House.

RESOLVED that:-

- 1) BEH Mental Health Trust inform the Health Overview and Scrutiny Committee immediately of any decisions or plans by the trust to sell or redevelop Elysian House or to change the location of the Recovery Centre.**

- 2) **The committee should also be informed of any changes to the Springwell Centre and the services provided there.**
- 3) **A few members of the committee visit the former residents of Elysian House at the Springwell Centre.**

11 UPDATE REPORT - TRANSFORMING COMMUNITY AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS)

The committee received a report providing an update on the development of a business case for the changes to in-patient CAMHS services and progress with the implementation of the new service.

In addition to providing an update on the development of the CAMHS business case, the committee were provided with reassurances to questions relating to the engagement of Young People's Board. This was in response to previous uncertainty relating to how successfully young people's views were being incorporated into the development of CAMHS services. This issue had been raised at previous meetings of the Health Overview and Scrutiny Committee (12 December 2011) and JHOSC (16 January 2012).

In relation to developments at the Northgate site, the committee were informed that the site was now closed and that staff had been re-located to in-patient units and community teams.

Alison Kemps, the transforming CAMHS project manager, circulated a letter to the committee from the Young People's Board outlining the Boards overall satisfaction with the development of the service although concerns were expressed relating to staffing reductions in relation to consultants.

The Chairman advised the committee that she and Councillor Gideon Bull, the Chairman of the JHOSC, had asked to attend a future meeting of the Young People's Board. The committee was also advised that the JHOSC, at the 16 January meeting, had requested a paper outlining an education model, including how it worked with health, and signed off by all three education authorities, be provided to JHOSC.

RESOLVED that:-

The committee note the update report

12 UPDATE ON THE BARNET HEALTH AND WELL-BEING BOARD AND THE DEVELOPMENT OF THE BARNET HEALTH AND WELL-BEING STRATEGY

The committee received a report from Councillor Helena Hart, the Cabinet Member for Public Health relating to progress in the establishment of the Health and Well-being Board and the achievements of the Board in its first few months of operation. The report was co-presented by Dr. Andrew Burnett, the Joint Director for Public Health.

The Cabinet Member advised the committee to note the risk management issues identified in the report alongside the Health and Social Care System Management outlined in the report. The Cabinet Member's presentation also highlighted the importance of Scrutiny reviewing the work of the Health and Well-being Board, the basic outline of the Board's role in commissioning services and the significance of the board encouraging a culture of enablement among Barnet's residents which would help people take a positive role in determining their own health outcomes.

Following the completion of discussions relating to the Health and Well-being Board, the Chairman proposed that the committee take advantage of the thematic link of the remaining reports to be brought before the committee by having a round table discussion on the issues faced in the public health transition once the remaining reports on the agenda had been presented.

RESOLVED that:-

The committee note the report

13 BARNET CLINICAL COMMISSIONING GROUP (CCG)

Alison Blair, Borough Director – NHS Barnet, and Dr Sue Sumner, Chair of Barnet Clinical Commissioning Board, presented an update on the development of the Barnet Clinical Commissioning Group which is currently operating in shadow form.

The committee were informed that the intention is to develop the new local NHS commissioning arrangements to be authorised during 2012/13 and established as statutory entities from April 2013.

The committee were informed that good progress was being made and that over the next year the CCG would take on more responsibility. The committee was also assured of the CCG's commitment to the Barnet, Enfield and Haringey Clinical Strategy.

RESOLVED that:-

The committee note the report

14 FINCHLEY MEMORIAL HOSPITAL REDEVELOPMENT

Alison Blair, Borough Director – NHS Barnet, presented the committee with an update on the development of Finchley Memorial Hospital within the broader context of the Barnet, Enfield and Haringey Clinical Strategy.

RESOLVED that:-

The committee note the report

15 PUBLIC HEALTH TRANSITION

Dr Andrew Burnett, the Joint Director for Public Health presented a report to the committee on the council's progress in preparing for the transition of the public health function and staff from NHS North Central London to Barnet Council.

The committee noted that at £32 per head Barnet had the sixth lowest spend compared with other London boroughs and substantially lower than the London average of £53. The committee acknowledged that this financial position represented a potential risk to enabling Barnet Council to adequately fund its new mandatory public health functions and could place a constraint on the scale of the council's ambition to invest in public health. This would impact on the council's goal of supporting the improvement of Barnet residents' future health and well-being.

The committee also took note of the options developed by the West London Design Group (WLDG) focusing on the evaluation of three public health operational models covering the Director of Public Health role, Specialist Public Health functions and Procurement and Commissioning Functions. The committee were advised that option three – an operating model supporting a larger group of between four and six boroughs should be viewed with caution due to the implications of operating within such a large model.

RESOLVED that:-

The committee note the report

16 BARNET LOCAL INVOLVEMENT NETWORK (LINK) ANNUAL REPORT

The committee received an update from Allan Jones, Co-Chair Barnet LINK, relating to the Links Annual Report and the organisations transition to Health Watch.

Mr Jones informed the committee that Links membership had grown from 80 to 300 members with a few members undergoing a training programme to enable them to undertake enter and view visits for adult social care facilities.

The committee were informed that there was still some uncertainty relating to the transition to Health Watch with issues relating to whether funding for Health Watch was to be provided by Barnet Council via aid/grant funding or through a procurement exercise.

RESOLVED that:-

The committee note the report

Following the completion of the presentation by the Link Co-Chair the committee Chairman invited the presenters of agenda items 12 to 16 to share their views on the broader issues faced by Barnet Council and its health partners during the public health transition.

The committee and partner representatives discussed the need to identify parameters for where partnership working could be efficiently engaged. Discussion among the committee and partners focused on the indicator set to be utilised to assess whether local authorities were fulfilling their public health role with members seeking clarification as to how the indicators would be used in

relation to health premiums. The committee were informed that final details were yet to be confirmed.

Discussion also identified the importance of not losing focus on the ongoing quality of day-to-day services in the NHS during the transition process.

The impact of Barnet's low public health spend per head was again raised as an issue of potential concern with the Cabinet Member for Public Health reassuring the committee that she would continue to raise this point in discussions relating to the public health transition.

17 HEALTH OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME

The Chairman advised the committee that the final Health and Well-being Strategy would be added to the work programme for the next meeting of the Health Overview and Scrutiny Committee on the 3 April 2012.

The Chairman advised the committee that they would need to review the future work programme of the committee in light of the development of the Barnet, Enfield and Haringey Clinical Strategy, the findings of the Health and Social Care Integration Task and Finish Group, and the work towards obtaining foundation status by Central London Community Healthcare. This work programme would need to be considered within the context of the Barnet Health and Safeguarding Overview and Scrutiny Framework which had been presented to members at the Scrutiny Aging Well Workshop of the 30 January 2012.

RESOLVED that:-

The committee note the Forward Work Programme

18 CABINET FORWARD PLAN

The Committee were invited to comment upon and note any items contained within the Forward Plan that they considered appropriate to come before the Health Overview and Scrutiny Committee. The Chairman requested the committee in particular take note of the agreement of future provision of CAMHS which is due to come before the Cabinet Resources Committee on the 4 April 2012.

RESOLVED that:-

The committee note the Cabinet Forward Plan.

19 ANY ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

None.

The meeting finished at 9.59pm