

MINUTES OF THE HEALTH SELECT COMMITTEE
Wednesday, 23rd October 2007 at 7.00 pm

PRESENT: Councillor Leaman (Chair) and Councillors Castle, Detre, Jackson, J Moher (alternate for Crane), R Moher and Moloney.

Apologies for absence were received from Councillors Baker and Crane.

1. Declaration of Personal and Prejudicial Interests

There were none.

2. Minutes of Previous Meetings

RESOLVED:- that the minutes of the meeting held on 12th July 2007 be received and approved as an accurate record subject to the following amendment:

that p.2, paragraph 2, first sentence be amended to read, '*Overall, whilst emphasising that there were no plans for hospital closures in Brent, Ms Wise felt that there needed to be a recognition of the importance of shifting the provision of care from hospitals into the community*'.

3. Matters Arising

Members were informed about a recent open letter from Croydon Council to all local authorities in London, inviting them to participate in a joint health scrutiny committee on haemophilia services. James Sandy (Policy and Performance Officer) advised that the patient flow data for haemophilia across London was fairly evenly spread, with 20 to 30 Brent patients having used the service within the last 2 years. It was agreed that the Health Select Committee would monitor the progress made by Croydon on this issue and contribute accordingly to a future review.

4. Deputations

Dan Carnadoo (Leader of the Patient Forum for Acton Lane Surgery) addressed the Committee on the issue of consultation regarding service changes at the Acton Lane Surgery (85-86 Acton Lane, Harlesden). He expressed disappointment at the insufficiency of consultation prior to changes regarding the current GP arrangement, and asserted that the result had been detrimental to patients. Noting

that a petition had been submitted to the Brent Teaching Primary Care Trust (Brent tPCT) on this issue, Mr Carnadoo particularly wished to highlight that to date the organisation had not provided a response. A copy of this document was provided for Committee members.

Marcia Saunders (Chair, Brent tPCT) responded by emphasising that the service changes had not been initiated by the tPCT, but had instead been the result of the GP's decision to terminate their contract with the Trust. She further stressed that when surgery contracts came up for renewal in January 2008, they would be subject to a tendering process that would involve public consultation.

RESOLVED:-

that the Committee consider the information supplied regarding service changes at Acton Lane surgery and provide a formal response at a future meeting.

5. **Public and Patient Involvement Forum (PPIF) Update**

Copies of the minutes of two previous Brent Public and Patient Involvement Forum (Brent PPIF) meetings on 9th July and 10th September 2007 were circulated to those present. Mansukh Raichuria (Chair, Brent tPCT PPIF) explained that the local PPIF was currently preparing for the forthcoming transition to Local Involvement Networks (LINKs). Whilst broadly supportive of the changes, it was advised that where PPIF members had concerns, these would be highlighted to the Committee over the coming months.

Mr Raichuria further reminded that issues raised at a previous meeting on 5th June 2007 regarding the North West London NHS Hospitals Trust Overseas Visitor Policy remained outstanding, and would therefore need to be followed up by the Committee.

In response to a question raised, it was noted that the issue of Acton Lane Surgery, raised as a deputation (Item 4), had been considered by the PPIF. It was further explained that all meetings of the PPIF were publicised to enable members of the public to attend.

6. **Healthcare for London – Joint London-Wide Overview and Scrutiny Committee**

The report before the Committee outlined the proposed consultation process by NHS London on the findings of the recent *'Healthcare for London: A Framework for Action'* report by Sir Ara Darzi. Furthermore, details were provided on the formal consultation request for the establishment of a London-wide Joint Health Overview and Scrutiny Committee (JHOSC). The Chair opened discussion by noting that at a

London Councils Scrutiny Network meeting he had attended the previous week, an update had been provided on the proposed scope of the JHOSC. Members were also informed that the first informal meeting of this joint committee would take place on Tuesday, 30th October 2007.

Sarah Thompson (Interim Director of Strategic Commissioning, Brent tPCT) then outlined the tPCT viewpoint with regard to the Darzi recommendations. Stressing that the first stage consultation would be a challenging process, she explained that this phase was aimed at setting out models and principles, following which more detailed proposals would be established. Following a query from the Chair, it was advised that consultation would take a broadly London based approach.

Whilst welcoming a number of the Darzi recommendations, one Committee member registered concern about the implications for access to healthcare, particularly given the high number of Brent residents without access to a car. Thus, it was pointed out that adequate transport links would need to be put in place prior to the establishment of any new specialist centres. Using the example of Moorfields Eye Hospital to illustrate her point, Fiona Wise (Chief Executive, North West London Hospitals NHS Trust) interjected to remind members that centres of excellence would only provide very specialist care, with the majority of procedures still being carried out locally. Noting the significance of the issue for Brent, another Councillor particularly welcomed the commitment within the Darzi report towards reducing health inequalities, a point that was further endorsed by the Chair of the Brent tPCT.

The Chair then concluded the item by advising that in his capacity as the Council's nominated representative on the JHOSC, he would keep the Committee informed of the progress in relation to the London-wide meetings.

7. NHS Finances Panel – Update

The Chair informed members about progress on the work of the NHS Finances Panel. Whilst asserting that meetings to date had proved useful, he felt that it would be important to now widen discussion further in order to give other interested parties, such as voluntary organisations, an opportunity to comment on the impact of the Brent tPCT Turnaround Plan. It was also felt that greater member involvement would be beneficial to the work of the Panel and, with this in mind, it was suggested that each political party should be approached to request the nomination of an additional member.

RESOLVED:-

that each political group be approached to request the nomination of an additional member to sit on the NHS Finances Panel, thereby increasing the current membership from three to six.

8. **Work Programme – Review Scopes**

During previous discussion on the Health Select Committee work programme for the remainder of the municipal year 2007/08, members had suggested three possible areas of future work as being (i) diabetes, (ii) dentistry and (iii) asthma and allergies. The Committee were now presented with a paper outlining the scope for these areas of work, including suggestions as to how each issue might be progressed.

In view of the limited nature of Council resources, Phil Newby (Director of Policy and Regeneration) urged members to exercise caution in the number of task groups they agreed. As the diabetes topic had previously been raised by a non-Health Select Committee member, it was suggested that the matter might be deferred to a future meeting. This would provide an opportunity to determine whether there was a sufficient interest in taking the issue forward by way of a task group. The main Overview and Scrutiny Committee had already established a task group on climate change. Thus, rather than duplicate work, it was argued that it would instead be worth asking this group to consider the issue of air quality and the resulting impact on asthma and allergies as part of its review. Finally, a themed meeting on dentistry was suggested as the most appropriate way of approaching this topic.

With reference to discussion on the Darzi report, the Chair suggested that the issue of transport links to health facilities in Brent would be a worthwhile task group topic. Other councillors supported this view, with one citing current lack of bus routes from some parts of the north of the borough to Central Middlesex Hospital as evidence of current problems locally. Another also pointed out that any work carried out would have to take account of the fact that some Brent patients travelled out of borough for treatment.

Martin Cheeseman (Director of Housing and Community Care) cautioned members that the far reaching nature of the Darzi proposals would take up a considerable amount of the Health Select Committee's work over the next year. With this in mind, he welcomed the suggested task group topic, given its relevance to the Darzi proposals for specialist centres. It was noted that the main Overview and Scrutiny Committee had a remit over transport issues. Thus, Phil Newby (Director of Policy and Regeneration) suggested this committee should be approached to request that a joint task group be established to look at local transport links to healthcare services in the borough.

RESOLVED:-

- (i) that the issue of dentistry be considered at a future meeting of the Health Select Committee arranged specifically on this topic;
- (ii) that the Climate Change Task Group recently established by the main Overview and Scrutiny Committee be asked to include aspects of air quality, asthma, and allergies within the scope of its review.
- (iii) that the issue of diabetes be deferred to a future meeting of the Committee so that it can be determined whether there is sufficient member interest to take the matter forward by way of a task group;
- (iv) that the main Overview and Scrutiny Committee be approached to request that a joint task group be established to look at local transport links to healthcare services within Brent.

9. **Establishing the LINKs (Local Involvement Networks) – Progress Report**

Owen Thomson (Head of Consultation) updated the Committee on progress to date in establishing a Local Involvement Network (LINK) in Brent, which it was explained would be in place by April 2008. Members heard that as part of the transition process from PPIFs to LINKs, a Brent LINKs stakeholder group would be established, drawn from existing service providers and patient forums, social care user groups, and voluntary and community organisations and faith groups. It was advised that this group would play a considerable role in formulating the format of the local LINK, and that a planned stakeholder event would be held in early 2008. Some of the resources available for rolling out the LINK were also outlined, including a £10k interim award from the Department of Health.

Attention was drawn to the fact that one of the report recommendations was for the Committee to nominate an elected member to sit on this stakeholder group. Also, given the complicated nature of the procurement process, it was also recommended that an officer led group be established to oversee the tendering process.

Further to concerns raised about the timescales involved, Mr Thomson acknowledged that some other local authorities were unlikely to meet the 1st April 2008 deadline, but stressed that the Council would endeavour to have a host organisation in place by this time. Whilst explaining that this organisation would have responsibility for formulating the eventual structure of the local LINK, the likelihood that it would be built on existing structures was emphasised.

RESOLVED:-

- (i) that the Committee note the progress to date in working toward the establishment of a LINK;
- (ii) that members endorse the course of action set out in section 4 of the report, and note that the Director of Communications and Consultation will invite members to take part in the Brent LINKs stakeholder group;
- (iii) that the Committee nominate Councillor Castle to sit on the Brent LINKs stakeholder group.

10. Visits and Consultation Plan

Members were reminded that the Health Select Committee had a duty under the Healthcare Commission Annual Health Check process to provide a formal response to the 'self declarations' of local health trusts. The Chair noted that it had previously been suggested that visits to local healthcare facilities would be useful in assisting with evidence gathering work. However, venues for such visits had not yet been finalised, and would be reported back to the next meeting.

Stressing that 24 standards were covered under the HCC Annual Health Check process, Patricia Atkinson (Director of Clinical Leadership and Integrated Governance, Brent tPCT) added that it would be useful to concentrate on a limited number of areas and target visits accordingly. She suggested patient and public involvement and diversity as two possible areas of focus for the Committee.

10. Brent Birthing Centre

Following the recent special meeting of the Health Select Committee on 3rd October 2007 arranged specifically on this topic, Fiona Wise (Chief Executive, North West London Hospitals NHS Trust) provided an update on the forthcoming consultation process regarding the future of the Brent Birthing Centre. Members also had before them a copy of the letter sent by the Chair to Ms Wise outlining the issues the Committee had wished to see included in this consultation document.

She advised that the Trust has received 20 different sets of comments on this matter, and had attempted to incorporate these view points where possible. In addition, the Committee were informed that as part of the consultation process, two public meetings would be held on 21st and 28th November 2007. In terms of providing a formal response to the consultation, it was agreed that a draft response would be produced by the next meeting of the Committee.

RESOLVED:-

that the draft response of the Committee to the public consultation on the future of the Brent Birthing Centre be forwarded to the next meeting.

11. GP Surgery Times

GP surgery times had been placed as an item on the agenda at the request of one Committee member. Further to the GP patient survey data (DoH) before the Committee, copies of a tPCT GP surgery times update were circulated to those present. Councillor Detre explained that he wished to highlight the issue due to concerns about the inflexible approach taken by that some GP to opening hours, and the difficulties that some patients experienced in making an appointment. He also expressed disappointment with the information provided, and felt that it should have been translated into a more accessible format.

Marcia Saunders pointed that the GP patient survey data had not yet been digested into a more accessible format, but once the tPCT had examined this information, they would be willing to share the subsequent report. It was also stressed that the survey only represented one source of patient satisfaction information, and that others, such as telephone surveys, should be taken into account. Members were further advised that the GP views on the data would be sought through the Trust's Professional Executive Committee (PEC).

In response to a question raised, Ms Saunders further asserted that the tPCT was already exploring the issue of GP opening times. Thus, when retendering contracts one of the issues that would be examined would be willingness to adopt more flexible hours.

12. Date of Next Meeting

It was noted that the next meeting of the Health Select Committee would take place on Thursday, 13th December 2007.

13. Any Other Urgent Business

There was none.

The meeting ended at 8.20 pm.

C LEAMAN
Chair