

MINUTES OF THE HEALTH SELECT COMMITTEE (SPECIAL)
Wednesday 19 November 2008 at 7.00 pm

PRESENT: Councillor Leaman (Chair) and Councillors Baker, Crane, Jackson and R Moher.

ALSO PRESENT: Councillor Colwill (Lead Member for Adults, Health and Social Care).

Apologies for absence were received from Councillor Clues.

The Chair thanked Fiona Wise (Chief Executive, North West London NHS Hospitals Trust) for hosting this special meeting of the Health Select Committee.

1. Declarations of Personal and Prejudicial Interests

None declared.

2. North West London NHS Hospitals Trust Financial Position

Fiona Wise (Chief Executive, North West London NHS Hospitals Trust) introduced and answered questions on the report, which set out the Trust's financial position. She reported that the savings plan for the current year was very challenging, but that the deficit set out in the report – £5.9m – had now been reduced to £5.1m. Savings had been made on a non-recurring basis in previous years, but the Trust was determined to break even and in future to address underlying issues and close any budget gap by making recurring savings. The Trust faced a loss of income from research and development for the following year, and the Acute Services Review would also be a challenge. NHS Brent had given the Trust a one-off grant of £6m to help ease the Trust's financial problems. This grant came with conditions which the hospital trust had to meet, and it would also be used to pay for activity above agreed levels for Brent patients.

Answering questions from members, Fiona Wise reported that the process of making savings, at the same time as ensuring at least the same level of patient care, was careful, long and difficult. The process included proposals on savings from management teams, as well as ideas about how services are delivered. Advice would be taken from NHS management advice services, who were experts in trying to deliver services differently, bringing experience from elsewhere. As part of the Acute Services Review, Brent and Harrow PCTs would consider the balance between community and hospital care. Consultants had been appointed for the review, and a first meeting of the management board had taken place. The aim was to produce a discussion document by the end of March 2009.

The work on the review would proceed in parallel with work on identifying underlying efficiencies. Answering members' questions, Fiona Wise reported that she was aware that her predecessors had had similar plans, but she, the Board and the PCTs were determined to bite the bullet. Elizabeth Robb (Director of Nursing, North West London NHS Hospitals Trust) added that previous plans had been hampered by

clinical and organisational changes, and it made good sense to work in parallel in the way suggested.

Fiona Wise informed members that another issue for the future would be how to rebuild or replace current buildings. While the new Central Middlesex hospital was innovative in many ways, the Private Finance Initiative (PFI) nature of its funding presented a financial burden for the Trust.

Asked about the review of stroke and trauma services, Fiona Wise reported that these were currently the subject of a comprehensive bidding process, the outcome of which would be of strategic importance to the trust. She believed that the Trust was well placed to be an acute centre. Tony Caplin (Chairman, North West London NHS Hospitals Trust) told members that the success of the bid was very important, as it would allow the Trust to do more to serve the community which, as Elizabeth Robb pointed out, had one of the highest rates of stroke in London and was least well served.

Returning to the financial position, Fiona Wise added that capital expenditure had been released. For example, retail outlets at the front of the hospital were being upgraded, as a result of which it was hoped that their income stream would increase.

Summing up the financial position, Fiona Wise reiterated the fact that the current year deficit was coming down gradually and from April 2009 onwards the Trust would be focussing on making recurring savings. However, the point was made that the Trust was facing significant financial pressures that would continue into 2009/10.

The Committee asked Fiona Wise to bring back a report to their February meeting on the Trust's up-to-date financial position.

RESOLVED:-

- (i) that the report be noted;
- (ii) that a report on the Trust's up-to-date financial position be brought to the Committee's meeting in February 2009.

3. **Infection Prevention and Control**

Elizabeth Robb (Director of Nursing, North West London NHS Hospitals Trust) introduced the report and answered questions from members on the incidence and trends of MRSA and Clostridium difficile over the past year and key actions in place to prevent these infections, progress made on infection control, and key work streams identified for 2008/09. She drew members' attention to evidence of significant improvements in infection prevention and control. Asked about the differing levels of hand-washing recorded among doctors and nurses, Elizabeth Robb reported that the discrepancy reflected the national picture. However, nearly 90% compliance was now being recorded in hand-hygiene audits. Asked about differences between the two sites, she told members that infection levels were slightly lower at Central Middlesex because the building was newer and easier to clean, with fewer patients.

Tony Caplin (Chairman, North West London NHS Hospitals Trust) added that – according to a measure of mortality rates – Northwick Park was the most improved hospital in the country.

Asked about the impact of visitors on hygiene, Elizabeth Robb reported that the hospital operated a policy on visiting, restricting the number to two at a time, and recommending that young children should not visit. Communicating the policy and the reasons for it to visitors presented a considerable challenge, although most people were happy to comply when they understood the reasons.

Answering a question about the issue of patients bringing MRSA into the hospital, Fiona Wise (Chief Executive, North West London NHS Hospitals Trust) informed members that there was a screening process, successfully used on most elective admissions and transfers from other hospitals.

On the subject of MRSA in nursing and care homes, Elizabeth Robb told members that, while the Trust had no jurisdiction over care homes, incidences were reported to the Health Protection Agency and the homes were asked to work with the PCT to reduce the levels of infection. A representative of Brent PCT told the Committee that the PCT had made significant investments in nurses to focus on issues in care homes. Asked about isolation of patients with infections, Elizabeth Robb informed members that the biggest risks came from diarrhoea and *Clostridium difficile*, and priority was given to any patients suffering from these.

The Chair congratulated the representatives of the Trust on the successes achieved and improvements made.

RESOLVED:

that the report be noted.

4. **Independent Review of Maternity Services at Northwick Park Hospital**

Fiona Wise (Chief Executive, North West London NHS Hospitals Trust) introduced the report and answered questions from members on the independent review of maternity services at Northwick Park Hospital, commissioned following three maternal deaths and two serious untoward incidents in 2007/08. The terms of reference for the review had included a full analysis of each of the cases, as well as a review of risk management and governance arrangements in the maternity unit, to ensure that systems remained fit for purpose and provided assurance to the public that the maternity unit working practices and environment were safe for women. The report also contained the action plan developed by the Trust in response to the findings and recommendations of the review report. Fiona Wise reported that, while the deaths were regrettable, extenuating circumstances had been identified in each of them, and no fundamental deficiencies of care had been found.

As part of the action plan in response to the review the Trust was committed to monitoring women at risk more closely and investing to increase the number of midwives.

Answering a question about the needs of asylum-seekers, Elizabeth Robb (Director of Nursing, North West London NHS Hospitals Trust) emphasised the importance of communicating policies to front-line staff so that it was clear who was entitled to free health care.

Asked about work being undertaken with GPs on high-risk patients, Fiona Wise told members that she was chairing a working party and had asked the PCTs to pass information to the GPs. A representative of Brent PCT reported that much work had been done on a model that supported closer working.

In answer to a member's question, Fiona Wise informed members that the biggest challenge in the action plan was to rid the hospital of the stigma caused by the bad publicity around the issue of the maternal deaths. She reported that there had been a slight reduction in the number of maternity patients, possibly as a result of the return home of a number of recent immigrants as a result of the economic downturn. Elizabeth Robb added that a new unit had opened at St Mary's and some women might have chosen to go there. Asked about the recruitment of extra midwives, she said that around one-third of the extra 20 had already been recruited and, while the Trust had had more success than other trusts, it was difficult to recruit experienced midwives, especially in London.

RESOLVED:-

- (i) that the report be noted;
- (ii) that the Committee continue to monitor the take-up of maternity services at Northwick Park Hospital.

5. **Healthcare Commission Annual Health Check Results**

Elizabeth Robb (Director of Nursing, North West London NHS Hospitals Trust) introduced the report and answered questions from members on the Healthcare Commission Annual Health Check for 2007/08, which had assessed the Trust as fair for quality of services and weak for use of resources. Therefore, under the terms of the NHS London performance regime relating to finance, the trust had been classified as underperforming. She reported that the results were disappointing, particularly in the light of the fact that significant improvements had been made. One reason why the Trust would always fare poorly in the health check was the low response rate to the patient questionnaire, and this was out of the Trust's hands. Members acknowledged the difficulty of achieving a high response rate to a long questionnaire in an area where the majority of people did not have English as a first language. Elizabeth Robb added that at least 16 of the trusts around the edge of Greater London had emerged from the check in the bottom 25, and the London trusts were meeting with the Healthcare Commission to ensure that they were being checked fairly.

Fiona Wise (Chief Executive, North West London NHS Hospitals Trust) reported that improvements in care at the Trust had led to its being singled out by the Dr Foster Hospital Guide for making reductions in its mortality rate. Elizabeth Robb added that the sustained improvements made in 2007/08 put it among the top acute trusts in the country.

Fiona Wise also reported that the Trust was in the top 25% when measured on compliance with 24 health-care standards. In answer to a question about the score on use of resources, she informed members that as long as the Trust carried a debt it would be categorised as weak. Elizabeth Robb added that some of the targets had been failed purely as a result of lack of compliance of audits, and some of the significant improvements had not been reflected in the data viewed by the Healthcare Commission. Fiona Wise emphasised the need for the Trust to be smarter in future in its use of data so that the data gave a true reflection of the Trust's work.

RESOLVED:-

- (i) that the report be noted;
- (ii) that the Committee consider the health check at its meeting in April 2009.

The meeting ended at 9.05 pm.

C LEAMAN
Chair