## Health Partnerships OSC

## Work Programme 2012-13

Meeting Date	Item	Issue	Outcome
30 <sup>th</sup> May 2012	Recruitment of health visitors in Brent	Following consideration of a report on the recruitment of health visitors in Brent in March 2012, members agreed to follow up with Ealing Hospital ICO their plans to recruit and train more health visitors in line with the Government's plans to increase the number of health visitors in England.	Members noted the number of vacancies in health visiting posts in Brent and have requested a follow up paper in six months time (November meeting) to follow up on the recruitment and retention of health visitors.
	Planned Care Initiative – ophthalmology and cardiology services in Brent	<ul> <li>NHS Brent brought a paper to the committee in March 2012 on their plans to re-commission services for ophthalmology and cardiology in Brent. At the meeting in March 2012, members agreed to follow up two issues with NHS Brent at their May 2012 meeting:</li> <li>The consultation plan for the two services</li> <li>The consultancy costs associated with the retender of cardiology and ophthalmology services</li> </ul>	Report noted, along with the concerns of Brent LINk about the consultation process.
	A&E Waiting Times in Brent	The Committee considered a report on waiting times at its meeting in March 2012. That report was missing information on A&E waiting times, and so a second paper has been requested – members have asked for a report on A&E waiting times for the committee's May meeting, and to invite representatives from NWL Hospitals to attend for this item to account for performance in A&E. The report should include information on ambulance transfers from CMH to Northwick Park Hospital.	<ul> <li>The members noted the report and requested some additional information from NWL Hospitals:</li> <li>A request for a breakdown of what happens to patients who attend A&amp;E – i.e. the proportion admitted, treated</li> </ul>

			<ul> <li>and discharged etc.</li> <li>The transfer time from ambulance to A&amp;E – i.e. the time patients wait in ambulances before being seen in A&amp;E.</li> <li>Information on the longest length of time people are waiting in A&amp;E above the four hours</li> <li>Treatment times for those seen in A&amp;E compared to those seen in the UCCs</li> </ul>
X-ray rec Central Middlese Hospital Care Cer	x Middlesex Urgent Care Care UK, the Urgent C Urgent whether the radiology r pathology or whether d to GPs. The committee	ting a serious incident at Central e Centre. 6000 patients sent for x-ray but are Centre provider, cannot confirm reports have been reviewed for missed discharge notifications have been issued e will be presented with a report on the ncident and steps being taken to ensure again.	The root cause analysis of the incident will be presented to the next committee meeting and representatives from Care UK will also attend to answer questions on this issue.
Primary 0 Update ir	Care Brent The committee will rece two medical centres in Willesden Medical ( to Willesden Hospit	eive a report setting out an update on the borough: Centre, which is considering relocating	Members requested a follow up report in July 2012 setting out how many patients have been re- registered and where they have re-registered since notice was served on the Kenton Medical Centre.
Shaping healthier	future major service changes	on is to start consulting on plans for in the cluster. Although a JOSC has se the changes, Health Partnerships	The committee has agreed to set up a separate meeting to scrutinise the Out of Hospital

OSC will also be able to scrutinise the proposals affecting Brent. This will be standing item on the committee's agenda for the duration of Shaping a Healthier Future. Focus at this meeting will be on Brent's Out of Hospital Care Strategy.	Care Strategy in full and respond to the consultation. This will be done once it is clear when consultation on the strategy is to begin.
--	--

Meeting Date	ltem	Issue	Outcome
18 <sup>th</sup> July 2012	Brent Tobacco Control Strategy	The committee would like to follow up the Brent Tobacco Control Strategy, to check the progress of its implementation. It is also interested in specific issues, such as the licensing of shisha bars, to see how this issue is being addressed in Brent.	Members have recommended that the Brent Pension Fund Sub- Committee considers again its tobacco investments, and referred the Clear Assessment Report and ASH report on pension investments to the committee for consideration.
	Kenton Medical Centre	The committee has asked for a follow up report after considering the Primary Care Update in May 2012. They are interested in Kenton Medical Centre and how many patients have been re-registered, and where they have re-registered since notice was served on the practice that it was to close. NHS North West London has been asked to provide this paper.	Report noted. Members have asked for an update on what has happened to the three vulnerable patients being helped to reregister with another practice.
	Serious Incident at CMH	NHS Brent and Care UK will provide their report on the serious incident at the CMH UCC, concerning the missed pathology on radiology reports.	Report deferred until October as Care UK was not present.
	Shaping a healthier future	Members have requested information on the Shaping a Healthier Future plans for acute trusts in Brent, focussing on plans for Northwick Park Hospital and Central Middlesex Hospital, as well as St Mary's (a hospital used by residents in the south of Brent). The committee will also need to consider	The committee has agreed to form a working group to prepare a response to Shaping a Healthier Future by the 8 <sup>th</sup> October.

NWL Hospitals and Ealing Hospital Trust merger – Full Business Case	how it will respond to the consultation, bearing in mind the NWL JOSC. An Executive Summary of the Full Business Case will be presented to the committee for comment and scrutiny.	Report noted, but it was agreed to take an update on this at the October committee meeting.
Brent's Improving access to psychological therapies scheme	<ul> <li>The committee has requested a report on the Brent IAPT scheme which has been in place since December 2010. Members would like the report to include information on:</li> <li>How the scheme is functioning for both children and adults</li> <li>The referral process</li> <li>Average waiting times for treatment from the point of referral</li> <li>GP attitudes to the scheme</li> </ul>	It was agreed to follow up with CNWL in October 2012 on the mental health provision on offer for people with more complex mental health needs, to get a better understanding of the services available and how the realignment of resources into IAPT has affected services for patients with more complex needs.

Meeting Date	Item	Issue	Outcome
9 <sup>th</sup> October 2012	Serious Incident at CMH	This item was deferred from the July meeting as Care UK weren't represented. NHS Brent and Care UK will provide their report on the serious incident at the CMH UCC, concerning the missed pathology on radiology reports.	
	A&E at Central Middlesex	Update on the service, following closure of overnight A&E.	
	NWL Hospitals and Ealing Hospital Trust merger –	This was requested by members in July 2012, so that they are kept informed of the project as the merger progresses.	

Update following approval of the Full Business Case		
Shaping a Healthier Future	For approval of the committee's response to the Shaping a Healthier Future consultation.	
Sharing a DPH	Report on plans for the role of the DPH and outline structure for comment and recommendations for the Executive.	

Meeting	Item	Issue	Outcome
Date			
27 <sup>th</sup> November 2012	Recruitment of health visitors in Brent	At the committee's meeting in May 2012, members agreed that they would receive a progress report from Ealing Hospital ICO on the recruitment of health visitors in Brent and their progress in meeting the Government's target for health visitors in England.	
	Health needs of People with Learning Disabilities	Brent MENCAP has carried out work with NHS Brent to train GPs, hospital staff and community staff about the health needs of PWLD. A report was presented to the committee in March 2012 setting out the results of the project and some of the key challenges facing those with learning disabilities accessing healthcare. It was agreed to follow up this work in November 2012 to look at two issues:	
		<ul> <li>The NHS health check day being organised by NHS Brent, which will involve MENCAP</li> <li>How MENCAP has been able to build on the initial project to train NHS staff members on working with people with</li> </ul>	

	learning disabilities.	
Time to change pledge	Progress report on how the council is responding to the Motion to Council in July 2012 on the Time to Change Pledge.	
Diabetes Task Group	The final report of the diabetes task group will be presented to the committee for endorsement before going to the council's Executive for approval.	
Mental Health Services in Brent	Following a previous agenda item on IAPT services, the committee want to follow up with CNWL on the mental health provision on offer for people with more complex mental health needs, to get a better understanding of the services available and how the realignment of resources into IAPT has affected services for patients with more complex needs.	
Health Watch in Brent	Update on progress on the development of Health Watch in the borough. The committee has also asked for an overview of the patient involvement work happening in Brent at present – for information only.	

Meeting Date	Item	Issue	Outcome
29 <sup>th</sup>			
January			
2013			

Meeting Date	Item	Issue	Outcome
19 <sup>th</sup> March 2013			

Meeting Date	ltem	Issue	Outcome
TBC	Out of hospital care strategy	As part of the Shaping a Healthier Future work, Brent will be preparing an Out of Hospital Care Strategy. The committee will consider the strategy and respond to the consultation.	
TBC	Diabetes and physiotherapy services – plans to re- commission services in Brent	NHS Brent plans to re-commission diabetes and physiotherapy services in the borough. The committee should consider the plans for the new services, as well as the consultation plan.	
TBC	NWL Hospitals and Ealing Hospital Trust merger plans	The hospital trust merger is progressing and a Full Business Case will be available in May 2012. The committee needs to decide how it wishes to scrutinise plans for the merger, which will be built into the work programme. Follow up will also happen once the merger is approved to ensure services aren't affected during the transition period.	
TBC	Housing Advice in a Hospital Setting	Care and Repair England has produced a report on integrating housing advice into hospital services. Brent Private Tenants Rights Group would like to bring this report to the committee to begin a conversation on the best way to take this forward in Brent.	
ТВС	Role of community pharmacists in improving health and wellbeing	The chair is keen to look at community pharmacists in Brent, and how their role in delivering health services can be best utilised. She also wants to look at the way that different elements of the health system, such as GPs and social care work with pharmacists in the borough.	
TBC	Mental health services in Brent	Report to committee on 29/11/11 may provide basis for further enquiries about mental health services. Chair of the committee has suggested support for carers of those with mental health problems.	

TBC	Health	The Health Select Committee should make health inequalities	
	Inequalities	a major focus of its work in 2010/11. As part of this, a	
	Performance	performance framework has been developed to monitor	
	Monitoring	indicators relevant to the implementation of the health and	
		wellbeing strategy, which relate to the reduction of health	
		inequalities in the borough. This framework will be presented to	
		the committee twice a year, with a commentary highlighting key	
		issues for members to consider.	
TBC	Sickle Cell and	The Committee has asked for a report Sickle Cell and	
	Thalassaemia	Thalassaemia services at North West London NHS Hospitals	
	Services Report	Trust. The committee will invite sickle cell patient groups to	
		attend for this item to give their views on services in the	
		borough. This follows a previous report on changes to	
		paediatric in patient arrangements at NWL Hospitals. Members	
		are keen to know how sickle cell patients have been dealing	
		with this change.	
TBC	Fuel Poverty	Recommendation follow up on the task group's review.	
	Task Group		
TBC	Breast Feeding	Following a report in March 2011 on the borough's Obesity	
	in Brent	Strategy, the committee has requested a follow up paper on	
		the Breast feeding service in the borough. Members were	
		particularly interested in the role of peer support workers and	
		how mothers are able to access breast feeding services. The	
		committee would also like to have accurate data on breast	
		feeding initiation and prevalence in Brent.	
TBC	End of life /	The committee has asked for a report on end of life care in	
	palliative care in	Brent. Members are keen to look at how the End of Life	
	Brent	Strategy is being implemented and to know what services exist	
		in Brent and how effective they are in delivering care.	
TBC	TB in Brent	Added at the request of the committee (meeting on 20 <sup>th</sup> Sept	
		2011).	
TBC	GP access	In December 2011 the results of the six monthly patient survey	

patient	will be published. Members should scrutinise the results with
satisfaction	Brent GPs to see how their initiatives to improve access are
survey results	reflected in patient satisfaction.
A&E Waiting	Follow up from information provided in July 2012 – the chair
Times	has asked to include this on the work programme.

## **Current Task Groups**

**Diabetes Care in Brent** – The task group is looking at services to prevent and treat diabetes in Brent and will report its findings before the end of 2012.

## **Future Task Groups**

**Female Genital Mutilation** – to investigate whether this practice is prevalent in Brent, to examine the impact on victims, to see what preventative work takes place in the borough and to highlight this issue to those working with young people who are potential victims.