



ANNUAL COUNCIL MEETING – supplementary agenda

**Wednesday 16 May 2012 at 6.45 pm or at the rising
of the special meeting beforehand, whichever is the
later**

**Paul Daisley Hall, Brent Town Hall, Forty Lane,
Wembley, HA9 9HD**

To the Mayor and Councillors of the London Borough of Brent and to
each and every one of them.

I hereby summon you to attend the MEETING OF THE COUNCIL of this
Borough.

GARETH DANIEL
Chief Executive

Dated: Thursday 10 May 2012

For further information contact: Peter Goss, Democratic Services Manager
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For electronic copies of minutes, reports and agendas, and to be alerted when the
minutes of this meeting have been published visit:

www.brent.gov.uk/committees

The press and public are welcome to attend this meeting

Agenda

Item	Page
6 Political balance	1 - 6

To review the allocation of seats on Council committees in accordance with the Local Government Act 1989.

Ward Affected: All Wards **Contact Officer:** Fiona Ledden,
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7 Notification of appointments to the Executive and appointments to committees and other bodies	7 - 12
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- (a) London Housing Consortium – Establishment and Membership of Joint Committee
- (b) To appoint chairs/vice chairs of committees as required and members/alternates to all committees, joint committees, forums and panels and to appoint co-opted members. (A schedule of nominations will be tabled at the meeting).
- (c) To appoint or nominate representatives or members to outside bodies and associations. (A schedule of nominations will be tabled at the meeting).
- (d) Proposed public consultation on “Shaping a Healthier Future” – health services in North West London

Ward Affected: All Wards **Contact Officer:** Peter Goss,
Democratic Services Manager
Tel: 020 8937 1353
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- Please remember to **SWITCH OFF** your mobile phone during the meeting.
- The meeting room is accessible by lift and seats will be provided for members of the public.
 - Toilets are available on the second floor.
 - Catering facilities can be found on the first floor near The Paul Daisley Hall.
 - A public telephone is located in the foyer on the ground floor, opposite the Porters' Lodge

 The logo of Brent Council, featuring a central coat of arms with a shield, a crown, and a banner, surrounded by the words 'BRENT' at the top and 'COUNCIL' at the bottom in a circular arrangement.	<p style="text-align: center;">Annual Council 16 May 2012 Report from the Director of Legal and Procurement</p>
<p>For Action Wards Affected: ALL</p>	
<p style="text-align: center;">Representation of Political Groups on Committees</p>	

1.0 Summary

- 1.1 This report deals with rules to be applied on the allocation to political groups of seats on committees established by the Council.

2.0 Recommendations

- 2.1 That the Council:
- (i) note the size of each committee
 - (ii) agrees (where the rules of political balance apply) the allocation of seats on committees to each of the political groups as set out in paragraph 3.10
 - (iii) note that the political balance on sub-committees will be reviewed at the first meetings of the General Purposes Committee and the Alcohol and Entertainment Licensing Committee.

3.0 Detail

- 3.1 The Council is required to review and determine the representation of the political groups on committees and allocate committee places to political groups accordingly at, or as soon as practicable after, its Annual Meeting.
- 3.2 The allocation is determined by applying the “political balance rules” under the Local Government and Housing Act 1989. These are designed to ensure that the political composition of the Council’s decision making and deliberative committees as far as possible replicates the political composition of the full

Council. Committees are subsequently required to carry out a similar process in relation to any sub-committees they may have.

- 3.3 The rules are that seats must be allocated so far as reasonably practicable in accordance with 4 overriding principles:
- (a) that not all the seats on the body are allocated to the same political group;
 - (b) that the majority of the seats on the body is allocated to a particular political group if the number of persons belonging to that group is a majority of the authority's membership
 - (c) subject to paragraphs (a) and (b) above, that each political group is allocated the same proportion of the total seats across all the ordinary committees of the Council as the proportion of the members of the authority that belong to that group; and
 - (d) subject to paragraph (a) and (c) above, that each political group is allocated the same proportion of the seats on each relevant body as the proportion of the members of the authority that belong to that group.
- 3.4 Principle (c) refers to "ordinary committees" which under the Act means those appointed under S102 Local Government Act 1972, namely General Purposes Committee, Audit Committee and Planning Committee.
- 3.5 Principle (d) applies to a "body" to which the Council makes appointments. The Act provides that the bodies to which this principle applies include ordinary committees (as defined above) and ordinary sub committees, advisory committees and sub-committees, and joint committees where at least 3 seats are allocated. By virtue of the Local Government Act 2000 principle (d) also applies to the Overview and Scrutiny Committees.
- 3.6 Accordingly under principle (c) above the General Purposes Committee, the Audit Committee and the Planning Committee first have to be taken together to determining the number of seats that should be allocated to each group. Then, in accordance with paragraph (d) above, the political balance rules have to be applied to each of those committees individually.
- 3.7 In relation to Overview and Scrutiny committees only principle (d) applies namely that each individual committee must be considered in relation to the political balance principles.
- 3.8 The political balance principles do not apply to the London Councils Joint Committees because only one appointment is made to each.
- 3.9 The current membership of the authority is 63 consisting of 40 Labour Group councillors, 17 Liberal Democratic Group councillors and 6 Conservative Group councillors.

3.10 The table below sets out the required allocation of seats on the ordinary committees and other committees of the Council according to the Political Balance rules described above. These figures are reached by “rounding out” fractions of seats so as to produce the minimum achievable deviation from the principles set out at paragraph 3.3 above.

Ordinary Committees	Size	Labour 40 63.49%	Liberal Democrat s 17 26.98%	Conservative 6 9.52%
General Purposes Committee	10	6	3	1
Planning Committee	11	7	3	1
Audit Committee	3	2	1	0
Total in accordance with principle (c) above the balance across these three committees taken together:	24	15	7	2

Other Committees	Size	Labour 40 63.49%	Liberal Democrats 17 26.98%	Conservative 6 9.52%
Children and Young People Overview and Scrutiny Committee	8 (plus 4 voting co-opted members and 2 non-voting co-opted members)	5	2	1
Budget and Finance Overview and Scrutiny Committee	8	5	2	1
Health Partnerships Overview and Scrutiny Committee	8	5	2	1
Partnership and Place Overview and Scrutiny Committee	8	5	2	1
One Council Overview and Scrutiny Committee	8	5	2	1
Call-in Overview and Scrutiny Committee	8	5	2	1

3.11 In addition, the Council has two committees which are not required by law to be subject to the political balance rules described above but to which appointments fall to be made at this meeting. These are the Standards Committee and the Alcohol and Entertainment Licensing Committee. Although not a statutory requirement the Council agreed some time ago that the Standards Committee would have 3 members in addition to the Independent Members, one from each party group. It is proposed that this remains the case until July 2012 when the new standards regime will be fully enforced and the Council's new arrangements will need to be confirmed. It was also agreed that the political balance rules would as a matter of policy (not law) be applied to the Alcohol and Entertainment Licensing Committee. The effect of this is that the allocation of seats on those committees is as follows:

Committee	Size	Labour	Liberal Democrats	Conservative
		40 63.49%	17 26.98%	6 9.52%
Alcohol and Entertainment Licensing Committee	15	10	4	1
Standards Committee	3	1	1	1

- 3.12 It will be for committees to review the political balance of sub-committees. The review and a determination of the allocation of seats on sub-committees must be carried out as soon as practicable after any occasion on which the members of the committee are changed in consequence of a determination under the 1989 Act and may be carried out on other occasions. It is proposed that such a review take place at the first meeting of the General Purposes Committee which is the only committee to have sub-committees to which the political balance rules apply. It is proposed that a similar review take place at the first meeting of the Alcohol and Entertainment Licensing Committee, although this is not a legal requirement.

4.0 Financial Implications

- 4.1 There are none arising directly from this report.

5.0 Legal Implications

- 5.1 These are addressed in the body of the report.

6.0 Diversity Implications

- 6.1 This report has been screened by officers and there are not considered to be any diversity implications arising from it.

Background Papers


The Brent Constitution
Local Government and Housing Act 1989

Contact Officers

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Fiona Ledden
Director of Legal and Procurement

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	<p style="text-align: center;">Council 16 May 2012</p> <p style="text-align: center;">Report from the Director of Strategy, Partnerships and Improvement</p>
<p style="text-align: right;">Wards Affected: ALL</p>	
<p>Proposed public consultation on “Shaping a Healthier Future” – health services in North West London</p>	

1.0 Summary

- 1.1 The council has received notice from NHS North West London that it is to launch a public consultation on “Shaping a Healthier Future”, its strategy for health service improvement in North West London. As a result, it has invited relevant local authorities to set up a joint overview and scrutiny committee (JOSC) to consider and respond to the proposed consultation.
- 1.2 Participating boroughs in North West London need to appoint two representatives to sit on the JOSC (although there will be only one vote per authority). The purpose of this report is to provide Council with the necessary background information in order to make its nominations to the JOSC.

2.0 Recommendations

- 2.1 That Council agrees the proposals relating to Shaping a Healthier Future are substantial developments of the health service.
- 2.2 That Council agrees that a Joint Overview and Scrutiny Committee should be established with other authorities in North West London to consider the consultation on Shaping a Healthier Future.
- 2.3 That Council agrees two nominees to be the borough’s representatives on the Joint Overview and Scrutiny Committee.
- 2.4 That Council agrees the terms of reference for the Joint Overview and Scrutiny Committee will be presented to Council once they have been agreed by participating authorities.

3.0 Detail

- 3.1 The council has received notice from NHS North West London that it is to launch a public consultation on “Shaping a Healthier Future”, its strategy for health service improvement in North West London. As a result, it has invited relevant local authorities to set up a joint overview and scrutiny committee (JOSC) to consider and respond to the proposed consultation.
- 3.2 Shaping a Healthier Future is working to three overarching principles, which are guiding plans for service change in North West London. The principles are:
- **Localising** routine medical services means better access closer to home and improved patient experience
 - **Centralising** most specialist services means better clinical outcomes and safer services for patients
 - Where possible, care should be integrated between primary and secondary care, with involvement from social care, to ensure **seamless** patient care
- 3.3 There are two main elements to Shaping a Healthier Future. The first is the development of an Out of Hospital Care Strategy for each borough in North West London. Each Clinical Commissioning Group in North West London is working with its PCT and local authority to develop separate Out of Hospital Care Strategies. Consultation on the Out of Hospital Care Strategies will take place within each borough, and the Health Partnerships Overview and Scrutiny Committee will spend time scrutinising Brent’s strategy, which will go out for consultation in May 2012.
- 3.4 There are key themes emerging from the Out of Hospital Strategies across North West London:
- Easy access to high quality, responsive care to make out-of-hospital care first point of call for people
 - Clearly understood planned care pathways that ensure out-of-hospital care is not delivered in a hospital setting
 - Rapid response to urgent needs so fewer people need to access hospital emergency care
 - Providers working together, with the patient at the centre to proactively manage LTCs, the elderly and end of life care out-of-hospital
 - Appropriate time in hospital when admitted, with early supported discharge into well organised community care
- 3.5 The second part of the project relates to the future of acute hospital services in North West London and is influenced by the aim of delivering more services in non-hospital settings. The Case for Change documents for Shaping a Healthier Future set out the reasons why NHS North West London is looking to reconfigure hospital services in the area, reducing the number of hospitals providing a full range of acute services. These are summarised below.

Challenges in North West London:

- A growing population – an extra 113,000 people in NW London over the next ten years
- An ageing population
- 31% of the population have long term chronic conditions such as heart disease, diabetes and dementia conditions which require longer term care and management
- The cost of care – drugs and technology – is increasing, while money for the NHS is limited
- Workforce shortages affect some hospital specialities
- The way our hospitals and primary care is currently organised will not meet the needs of the future

Hospital care varies:

- More hospital space in NWL than in other parts of the country and uses a greater proportion of the NHS budget on hospital care than average – not the best use of resources
- Three quarters of hospitals require upgrading to meet modern standards, at an estimated cost of £150m
- Hospitals in NW London have significant financial challenges even if they become as efficient as they can be
- Hospitals vary in the quality of care and the time it takes for them to see and treat patients
- Recent study showed patients treated at weekends and evening in London hospitals – when fewer senior staff are available – stand a higher chance of dying than if they are admitted during the week.
- The NHS needs to ensure that senior doctors and teams are available more often, seven days a week, 24 hours a day
- Changes in the last few years to London's heart attack, stroke and major trauma services have shown how more lives can be saved by concentrating specialist services on a smaller number of sites. Not every hospital can safely do everything

Differing outcomes for patients:

- Difference of up to 17 years in life expectancy between different boroughs in NW London
- Some ethnic groups have poorer health outcomes than others
- One in four patients in NW London dissatisfied with access to their GP
- Six of the eight boroughs in NW London are in the bottom 10% nationally for patient satisfaction with out-of-hours GP services.
- 20-30% of patients who are currently admitted to hospitals in NW London as emergencies could be more effectively cared for in their own community

3.6 NHS North West London is working on options for acute services that will mean a reduction in the number of major hospitals in the area, possibly to five. However, out-of-hospital services will be expanded and improved in all areas

and all nine current hospitals will retain Local Hospital services, providing around 75% of all current activity (excluding specialist activity).

- 3.7 The possible reconfiguration of major hospitals in North West London will include, whatever option is chosen, Hillingdon Hospital and Northwick Park Hospital. These hospitals will remain major acute sites because of their geographical location, serving as they do large populations in outer North West London. Central Middlesex Hospital is likely to become an elective care centre and will no longer provide emergency care services (overnight A&E has already closed at CMH), although an Urgent Care Centre will remain on the site.
- 3.8 The consultation will focus on options relating to the following hospitals, which have been grouped together. NHS North West London has suggested that there will be five major acute hospitals in North West London, Hillingdon, Northwick Park and:
- Either Hammersmith or St Mary's
 - Either Ealing or West Middlesex
 - Either Charing Cross or Chelsea & Westminster
- 3.9 Work is ongoing to agree which options NHS North West London will go out to consultation on. Council's have been informed that consultation is likely to begin at the end of June 2012 and run for at least three months.
- 3.10 The JOSC has already started meeting informally, to contribute to the pre consultation work being carried out by NHS London. The chair and vice chair of the Health Partnerships Overview and Scrutiny Committee have represented Brent at these informal meetings. Terms of reference have been drafted, along with a work programme for the JOSC. These need to be agreed by the JOSC once it is properly constituted and meeting formally. Participating council's have also agreed that each borough should have two representatives on the JOSC, but that there will only be one vote per council, should a vote need to be taken during JOSC proceedings. Some boroughs, including Brent, wanted one representative per council, others wanted two. This was agreed as a compromise.
- 3.11 Council should note that all boroughs in North West London have agreed to take part in the JOSC, except Hillingdon. The participating authorities are Brent, Ealing, Hammersmith and Fulham, Harrow, Hounslow, Kensington and Chelsea and Westminster.

4.0 Financial Implications

- 4.1 There are no direct financial implications for the authority by participating in the JOSC, apart from officer time which will be met from current resources or the costs incurred from hosting a JOSC meeting, which would also be met from existing budgets. It should be noted, however, that NHS North West London has agreed to contribute to the costs of supporting the JOSC, up to £30,000. Boroughs are working to appoint an organisation to provide policy advice and support to the Joint Committee.

5.0 Legal Implications

5.1 Under the Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002 NHS bodies have a duty to consult an overview and scrutiny committee on:

- Any proposals it may have under consideration for any substantial development of the health service in its area; or
- Any proposal to make a substantial variation in the provision of such services

5.2 The Secretary of State's direction issued on 17th July 2003 provides:

"where a local NHS body consults more than one overview and scrutiny committee pursuant to regulation 4 of the Regulations on any proposal it has under consideration for a substantial development of the health service or a substantial variation in the provision of such service, the local authorities of those overview and scrutiny committees shall appoint a joint overview and scrutiny committee for the purposes of the consultation and only that joint overview and scrutiny committee may:-

(a) make comments of the proposal consulted on to the local NHS body under regulation 4(4) of the Regulations;

(b) require the local NHS body to provide information about the proposal under Regulation 5 of the Regulations; or

(c) require an officer or the local NHS body to attend before it under Regulation 6 of the Regulations to answer such questions as appear to it to be necessary for the discharge of its functions under the consultation."

5.3 The proposals in Shaping a Healthier Future are considered to be a substantial development in the health service in North West London, which will have an impact across the whole of the area. A JOSC should therefore be established for the purposes of consultation on these proposals.

5.4 Under the Council's Constitution the establishment of a joint committee and the appointment of members to a joint committee is a function reserved for Full Council.

6.0 Diversity Implications

6.1 None

7.0 Staffing/Accommodation Implications (if appropriate)

7.1 None

Background Papers

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