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Mr Mark Easton
Chief Executive of Brent Primary Care Trust
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REF: GD/FB
21st September 2010

Dear Mark,

CONSULTATION ON THE FUTURE OF BRENT COMMUNITY SERVICES

Further to your letter dated 10th September 2010 regarding the proposed transfer of Brent Community Services (BCS) to Ealing Hospital NHS Trust, I am now responding with Brent Council's view on the proposal.

We do not feel able to support the proposal as it currently stands. It is regrettable that the local authority has only been consulted on this proposal at a relatively late stage in the process. My understanding is that the NHS Brent Board received a report on the future of BCS in July 2010 but our formal views were only sought in September 2010. We would have liked to be consulted earlier in the process when it might have been possible to influence the preferred option for hosting BCS before your own Board decided its preference.

The council has some serious concerns about the methodology used to select Ealing Hospital NHS Trust as the preferred host organisation. I understand that an evaluation looking at the various hosting options was carried out by the NHS Brent Management Team, but there is little transparency about how the scores for each option were arrived at, especially as some of the organisations concerned (for example Central and North West London Mental Health NHS Foundation Trust and North West London NHS Hospitals Trust) were not asked formally to bid to host BCS. Our feeling is that we needed to see a more detailed evaluation of all the options and we found it surprising that potentially viable alternatives to the preferred option appear to have been rejected without a more thorough and open appraisal process.

It is interesting to note that partnership with the local authority was not considered to be an option for BCS although I understand from our recent phone conversation that this is at least theoretically an option open to NHS Brent. This may have been viewed as too complex for what may ultimately be a temporary arrangement but it would be interesting to know why this option was not considered more seriously? The Council could have entered into our own partnership arrangements with either the local NHS hospital trust or the mental health NHS trust (subject of course to their agreement) – these are bodies with whom we have very close and established partnership arrangements and either of them would appear to offer a better awareness of the needs of Brent residents than a hospital trust in a neighbouring authority which has many challenges of its own.



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In the current post White Paper context, it is obviously crucial that local GPs support any significant changes to services in Brent. We regard the change of hosting arrangements for BCS as a significant change and we would therefore like to see more evidence of broad-based GP support for the plan. Judging from my recent meeting with a group of senior Brent GP representatives, there does not seem to be any enthusiasm on their part for the proposed change and I would expect their views to weigh heavily in any final decision on the matter.

We ourselves have concerns about how BCS currently operates both in respect of children and adult services. Instability within their management structure has exacerbated this, creating a situation where our senior contacts change on an all too regular basis. We would like to be assured that the proposed changes will begin to address these local concerns. You will appreciate our worry that the proposed shift to Ealing will only make an already problematic relationship even more difficult.

I have specifically asked for comments on the Brent NHS proposals from our Children's Services Management Team. They feel that health services for Looked After Children (LAC) are a significant safeguarding concern at the moment, particularly as NHS Brent has agreed to invest in this area but to date has not been able to do so despite impending inspections, agreed recommendations and acknowledgement that action is required. Brent Children's Services feel that in the current circumstances BCS should have a much closer relationship with the council to ensure a more integrated model of service delivery. For example, NHS Brent could consider delegating the commissioning of LAC health services to the council to ensure that a cohesive and coherent service model is developed and delivered.

As far as I am aware, the NHS Brent proposal has not been discussed at our Children and Young People's Partnership Board or at the Local Children's Safeguarding Board. This really does need to happen in order to assess fully the implications of the proposed transfer from the perspective of all the local agencies who will be affected by it. As the Council is the local co-ordinator for such partnership arrangements, we would be happy to facilitate such a consultation on behalf of other local partners.

The Council's Children's Services have some worries regarding the stability of BCS. Management and leadership capacity problems within BCS has been the cause of some poor quality service provision that we feel has had an adverse impact on children's services in Brent in the past. The Council will need concrete assurances on this matter as part of any proposed transitional arrangements. Your recent letter indicates that we would benefit from more senior leadership and management support from Ealing Hospital Trust but this seems very unlikely given that Ealing Hospital NHS Trust has some serious issues of its own and they will also be required to streamline their management arrangements which could result in consequential management reductions in BCS.

You will, I think, be aware from previous exchanges between us that Brent Children's Services have had serious concerns about the health visiting and school nursing service for the last two years and have unfortunately seen very limited progress in this area. The Children and Young People's Partnership Board have shared their concerns with NHS Brent and any future hosting arrangement would require very clear and responsive lines of accountability and responsibility which we think unlikely if these critical services were hosted outside the borough. It is understood that NHS Brent is likely to go out to tender for the provision of health visiting services because of the failure of BCS to date to improve this service. It would be interesting to know how this tender process will be managed through the hosting arrangement before this process goes ahead.

We believe that it is important that any hosting arrangement for BCS is able to demonstrate that local partners have expressed a high degree of buy-in but this does not appear to be the case at present. We do not think that a convincing case has yet been made for the transfer of BCS to Ealing Hospital NHS Trust and we believe that there may be other credible and locally acceptable alternatives to the hosting arrangement recently proposed by NHS Brent. I do hope therefore that

NHS Brent can reconsider the current proposal and consults more extensively with Brent stakeholders on alternative hosting arrangements. I do recognise the very real time and financial pressures on you at this time so we will certainly use our good offices to ensure that such a process is concluded within a short timescale.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'Gareth Daniel', written in a cursive style.

Gareth Daniel
Chief Executive