



Minutes of the the **NORTH WEST LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (NWL JHOSC)** held at 18:30 on Wednesday 21st November 2012 at Council House, Old Marylebone Town Hall

Members Present: Cllr Lucy Ivimy (H&F), Cllr Patricia Harrison (Brent), Cllr Sandra Kabir (Brent), Cllr Rory Vaughan (H&F), Cllr Mary Weale (RBKC), Cllr Dr Sheila D'Souza (Westminster), Cllr Pam Fisher (Hounslow), Cllr Abdullah Gulaid (Ealing), Cllr Krishna James (Harrow), Cllr Vina Mithani (Harrow)

NHS Present: Dr Mark Spencer (Medical Director, NHS North West London), Daniel Elkeles (Director of Strategy, NHS North West London), Lisa Anderton (Service Reconfiguration Director, NHS North West London), Don Neame (Programme Communications Lead)

Apologies: Cllr Anita Kapoor (Ealing), Cllr Sandra McDermott (Wandsworth), Cllr Sarah Richardson (Westminster), Cllr Charles Williams (RBKC)

1. MEMBERSHIP & DECLARATIONS OF INTEREST

1.1 Apologies are noted above. There were no further declarations of interest.

2. MINUTES

2.1 Members identified some errors in the minutes of the meeting of the 26th September:

2.2 Committee resolved to amend 'he' to 'she' (para 2, page 6)

2.3 Committee resolved to amend 'he' to 'she' (para 4, page 7)

2.4 Committee resolved to amend 'psychotherapy' to 'psychiatry' (para 2, page 8)

2.5 Committee resolved to amend 'Central Middlesex Hospital' to 'Northwick Park Hospital' (para 2, page 9)

2.6 Members identified some areas of concern in the minutes of the reconvened meeting of the 26th September 1st October:

2.7 Committee resolved to add the apologies of Cllr Vina Mithani (Harrow), Cllr Pam Fisher (Hounslow) and Cllr Mel Collins (Hounslow) (para 1, page 12)

2.8 Committee resolved to change "The JHOSC supported the case for change..." to "The majority of the JHOSC supported the case for change, but there was dissent..."

2.9 Cllr Gulaid stated that the London Borough of Ealing were unable to accept the points raised in Section Three (page 13, 14)

2.10 Cllr Rory Vaughan stated that he did not support the Case for Change.

3. NHS NORTH WEST LONDON: MAJOR HOSPITAL RECONFIGURATION

- 3.1 Dr Mark Spencer (Medical Director) introduced the response of NHS North West London to the recommendations of the Joint Health Overview and Scrutiny Committee and directed Members to the written response provided by officers.
- 3.2 Cllr Ivimy initiated discussions by stating that the responses to recommendations in terms of reconfiguration of the accident and emergency centres were the tip of the iceberg. What is giving rise to many concerns are the wider consequences of the A&E closures. Cllr Ivimy considered that concerns would come with what was under the iceberg, because the response was not comprehensive at this stage. Cllr Ivimy asked NHS NWL for guidance on the timeline of expected decisions and responses to the recommendations. Cllr Fisher asked for a timeline of when the JHOSC could meet to scrutinise the stages before decision-making. Cllr Gulaid stated that the responses should be tailored to different councils, showing the different impact in different Boroughs.
- 3.3 Dr Mark Spencer said that there had been positive responses even where impacts would be felt more heavily. He gave an indication of the expected movement between the publication of the consultation response and the decision-making in February. The **CCG Commissioning Intentions** would be published before the end of the calendar year and these would feed into the JCPCT. Cllr Ivimy interjected to ask if there would be clarity on the responses to recommendations before a decision was made. Dr Spencer responded that there would be clarity provided in January.
- 3.4 Cllr Weale reported that the third paragraph of the response to the recommendations was very 'waffly' and vague. Cllr Weale recommended that a matrix could be provided to document milestones and measurement. Dr Spencer agreed with Cllr Weale and said that it was not precise, as it stood. More detail was to be provided to the JHOSC. Cllr Weale asked for this response to stay on the Agenda.
- 3.5 Cllr Ivimy stated that the response to the JHOSC's recommendations was effectively a 'holding response' and not a 'serious response' due to its brevity. Dr Spencer agreed with Cllr Ivimy's assertion and agreed to bring a more comprehensive response back to the Committee.
- 3.6 Cllr Kabir asked how NHS North West London would keep a flow of information to Boroughs and the JHOSC given the end of the consultation period. Cllr Kabir recommended that Members should telephone each other, to support one another on the developments in the post-consultation phase. Cllr Ivimy said that Members could do this and asked Members to send details to her to collate.
- 3.7 Dr Spencer said that CCG Chairs would attend the next meeting. Cllr Ivimy reported that hospitals should also be present, as they do not communicate well enough.
- 3.8 Dr Spencer said that NHS North West London would undertake an intense programme of work, including: communicating the results of the consultation via the website, sending emails to Committees and making people aware of the latest position. In terms of correspondence with local authorities, NHS North West London would engage with Borough HOSCs, alongside providers and CCGs, and provide updates and continue the multi-agency discussions.
- 3.9 Don Neame (Programme Communications Lead) stated that the report on the consultation would be produced in the next few weeks. Whilst there were headline

details which could be shared, he indicated a note of caution on the interpretation at this early stage. He reported that 70,000 consultation documents and 400,000 summary documents were circulated across North West London. Further to this, 800 roadshows and events took place, alongside 5,000 'conversations' with groups and organisations. Mr Neame reported that Focus Groups took place in each Borough alongside meetings with hard-to-reach groups (covering 2000 people across 59 groups). The Ipsos MORI report would be published on the 28th November, to document what NHS NWL had heard and a summary of the responses received.

- 3.10 Mr Neame reported that the consultation had received 17,000 responses, 9,500 of which were supporting Chelsea and Westminster Hospital specifically. Where postcodes were given (3,500 responses), most responses came from Ealing (1,700) and Hounslow (890).
- 3.11 Cllr Fisher said that from 230,000 residents in Hounslow, 890 responses was 'not great,' given that the consultation responses showed that Hounslow was the second biggest 'responder.' Cllr Fisher stated that NHS NWL should not be complacent. Cllr Gulaid questioned why the consultation only registered 17,000 responses when petitions included over 60,000 people. Mr Neame responded that it was because responses to the consultation which were included in the '17,000' number had answered at least some questions posed in the consultation.
- 3.12 Cllr James said that a number of residents had been asking questions about the brochures and the reported £7 million spent on the consultation. Daniel Elkeles (Director of Strategy, NHS North West London) reported that the consultation represented a substantial communication and there had been a lot of information to share in the public domain and even more communication needed to respond to the concerns raised by the public. He reported that it was impossible to distil information into a shorter format.
- 3.13 Cllr Ivimy stated that there were some important dates to highlight. Firstly the Ipsos MORI report would be published on the 28th November at the presentation at the Hilton Metropole. Secondly, in January, it would be important to reconvene to discuss an anticipated full response on the JHOSC submission to NHS North West London. Lisa Anderton (Service Reconfiguration Director, NHS North West London) proposed to share the key dates in the forthcoming weeks, including the proposed JCPCT meetings. The Equalities Impact Assessment document was due to be published in December and could be communicated with the JHOSC electronically. If the JHOSC were to hold a meeting in January, NHS NWL could provide a substantial response to the recommendations. The Committee decided to arrange a meeting for **Thursday 17 January, 6.30pm at Kensington Town Hall** with the CCGs to be invited to be in attendance.
- 3.14 Daniel Elkeles reported that the JCPCT decision was due on the 19th February and a meeting before this would also be salient. The Committee decided to arrange a further meeting on **Thursday 7 February, 6.30pm at Hounslow Civic Centre**.

4. AOB

- 4.1 Cllr D'Souza raised a HSJ article which referred to West Middlesex Hospital needing a merger partner in order to be viable. Daniel Elkeles reported that when the merger happens, it would ensure that West Middlesex would be financially viable in the future. Mr Elkeles reported that at the current time the Trust required a short term partner and was actively seeking one out. There would be no conclusion on this until February. Cllr Ivimy questioned whether this situation had been factored in to the

decision-making timetable, and Mr Elkeles responded that it had been a theme in the modelling, and there would be no organisational transaction during the decision-making process. Cllr Ivimy asked whether NHS NWL had taken into account the *financial viability* of Trusts throughout the reconfiguration consultation. Mr Elkeles responded that it was always the case that some Hospital Trusts did not make money and this, in part, drove some of the need for reconfiguration (if financial and clinical improvements could be found).

4.2 Cllr Ivimy wished the Committee Members a happy Christmas and closed the meeting.

5. CLOSE OF MEETING

5.1 7:53pm