

OVERVIEW AND SCRUTINY COMMITTEE MINUTES

16 SEPTEMBER 2019

Chair:	* Councillor Sachin Shah	
Councillors:	<ul style="list-style-type: none"> * Richard Almond * Dan Anderson * Jeff Anderson * Sarah Butterworth 	<ul style="list-style-type: none"> * Honey Jamie * Jean Lammiman * Chris Mote * Norman Stevenson (3)
Voting Co-opted:	(Voluntary Aided)	(Parent Governors)
	<ul style="list-style-type: none"> † Mr N Ransley * Reverend P Reece 	<ul style="list-style-type: none"> Mr M Chandran * Ms M Trivedi
Non-voting Co-opted:	Harrow Youth Parliament Representative	
In attendance (Councillors)	<ul style="list-style-type: none"> Pamela Fitzpatrick Kiran Ramchandani Mrs Rekha Shah 	<ul style="list-style-type: none"> Minute 80 Minute 82 Minute 80

- * Denotes Member present
- (3) Denotes category of Reserve Member
- † Denotes apologies received

74. Attendance by Reserve Members

RESOLVED: To note the attendance at this meeting of the following duly appointed Reserve Member:-

Ordinary Member

Reserve Member

Councillor Kantilal Rabadia

Councillor Norman Stevenson

75. Declarations of Interest

RESOLVED: To note that the following interests were declared:

Agenda Item 7 – Harrow Walk-in Centre Strategy Update

Councillor Jean Lammiman declared a non pecuniary interest in that she was a patient at Pinn Medical Centre which was listed in the report. She would remain in the room whilst the matter was considered and voted upon.

Councillor Chris Mote declared a non pecuniary interest in that he was a patient at a Walk-in Centre listed in the report. He would remain in the room whilst the matter was considered and voted upon.

Councillor Norman Stevenson declared a non pecuniary interest in that he was a patient at Pinn Medical Centre which was listed in the report. He would remain in the room whilst the matter was considered and voted upon.

76. Minutes

RESOLVED: That the minutes of the ordinary meeting held on 4 June 2019 and the special meeting held on 9 July 2019 be taken as read and signed as a correct record.

77. Public Questions

RESOLVED: To note that no public questions were received.

78. Petitions

RESOLVED: To note that no petitions had been received.

RESOLVED ITEMS

79. Response to the Scrutiny Review into Preventing Youth Violence

The Committee received a reference from Cabinet together with the report considered by Cabinet setting out the responses to the recommendations from the Regeneration Scrutiny Panel Report on Preventing Youth Violence.

RESOLVED: That the actions taken in response to the recommendations of the Scrutiny Review into Preventing Youth Violence, as set out in the report considered by Cabinet at its meeting held on 11 July 2019, be noted.

80. Harrow Walk-in Centre Strategy Update

The Committee received a report of the Managing Director, Harrow CCG (Clinical Commissioning Group), updating the Committee on the Review by Harrow CCG of the existing Walk-in provision at Pinn Medical Centre and Belmont Health Centre and the proposed change of both medical facilities to GP Access Centres in 2019, subject to the approval of the CCG Governing Body.

In accordance with Committee Procedure Rule 4.1, the Committee agreed that the Chair of the Health and Social Care Scrutiny Sub-Committee who was not a member of the Overview and Scrutiny Committee be allowed to address the meeting in respect of this item. Another Member who was not a member of the Committee was also allowed to address the meeting. The report on the Walk-in Centre ought to have been submitted to the Health and Social Care Scrutiny Sub-Committee at its meeting in November 2019 but had been brought forward to this meeting to allow for its earlier consideration because the decision of the CCG Governing Body was imminent.

The Managing Director of Harrow CCG introduced the report and drew out the salient points from her report. She explained the rationale behind the proposed changes and reported that:

- the direction of travel for all health services was set by NHS England;
- the changes proposed to the Walk-in Centres would give local residents better access to services and continuity of care which was central to the proposals;
- the changes made to Alexandra Avenue Walk-in Centre had been well received and the change from a Walk-in and Wait Service to an appointment only service for Harrow residents had been beneficial to local residents as shown in a recent survey. Similar changes were planned for the Belmont Health Centre from November 2019;
- a resolution of a contractual dispute at Pinn Medical Centre would dictate the implementation date.

Members of the Committee asked questions on how they could influence the decision, savings that would be made as a result of the changes and the cost of the changes proposed. The Managing Director of Harrow CCG responded as follows:

- given the direction of travel and the requirement for the CCG to adhere to the guidance issued by NHS England, Councillors were not in a position to have any influence on the proposals except that the CCG would welcome any assistance and support that Councillors could provide to help get the message across to their constituents and to help change public behaviour. The opening hours for the two Centres would remain the same;

- given the financial situation of Harrow CCG, which was in deficit of £29.4m, no savings would result from the proposals. The money from PMS (Personal Medical Services) would be ring-fenced towards support for primary care. As part of the PMS Review, a sum of £1.9m was available for distribution across 33 practices in Harrow;
- the proposed changes were expected to cost £47,000.

The Chair and Vice-Chair of Harrow CCG's Governing Body together with the Managing Director of Harrow CCG and another representative of the CCG responded to additional questions from Members of the Committee. They explained that:

- it was not intended to take money out of the service area but to distribute it, as it was not viable for one centre to have two walk-in centre facilities and the intention was to make additional facilities available in the Centres;
- communication was an issue and GP surgeries were at the forefront and key to getting the message through to their patients. The CCG did not have such visibility, except through its range of Forums, but to take on board communications which were key for all residents;
- residents had been anxious about the changes that had been proposed at Alexandra Avenue but their concerns were minimised once the rationale behind the changes had been communicated by the CCG to all stakeholders. However, lessons had been learnt from this experience and it was recognised that there was a need to be open and upfront at the outset when making changes. Petitions had been received from residents and GPs were also entitled to voice their opinions. Any suggestions from Councillors that would help improve future communications would be welcomed;
- the cost of using a Walk-in Centre was £20 - £25 per patient and for minor injuries it was £51 - £70. Moreover, the continuity of care was lacking when patients living outside the borough used the Walk-in Centres as patient records were not currently accessible;
- other than Harrow CCG, no other CCGs had been fortunate to have had so many Walk-in Centres. Change was always difficult to accept and manage. However, the changes made at Alexandra Avenue had proved to be fruitful and the proposed changes at Pinn Medical Centre and Belmont Health Centre would also help improve patient safety and access;
- the CCG was confident that the proposed changes would provide a better service to the residents of Harrow. A Member agreed with this sentiment and stated that, as local ambassadors, it was important to get this message across to constituents;
- those Harrow residents who were not registered with a GP, would be assisted in the following ways: they would be encouraged to register;

assisted and supported to allow them to make contact with local charities; and, should they have a medical emergency, they would be seen by a GP or assisted in the appropriate way;

- to ensure good clinical care, it was essential to register with a GP. A raft of services would then be available and people need to be encouraged to register. People were under an impression that, in order to register with a GP, various documentation was be required but this was not the case and this message need to be publicised further;
- the decision on the proposals would be made the following day by the CCG's Governing Body. The impact of change would be measured and there would be ongoing reviews. There were many levels of monitoring undertaken in order to ensure improvement in care and patient safety when the change was carried out at Alexandra Avenue. The Governing Body were going to be asked to for an implementation date of 1 November 2019 for Belmont Health Centre. The Pinn Medical Centre was on hold whilst discussions were resolved with the PMS contract;
- patients would be supported if they needed access to Urgent Care Treatment Centres and associated costs would be reimbursed. Patient Champions would also assist in the process. Risks were assessed with a view to minimising them and risks were regularly monitored. Any issues would also be reported back to the Council's Health and Wellbeing Board;
- the provision of GP Access Centres was a better way forward as there were no filter systems in place at Walk-in Centres. The Access Centres would help triage patients and remain open from 8.00 am – 8.00 pm. The care provided would be better as GPs would only be seeing patients who had registered with a surgery in Harrow and would have access to patient records. All CCGs in North-West London were now providing GP Access Centres and registered patients in each borough could access these;
- inequality in the provision of health was evident through out the world. Life expectancy in Harrow varied and was dependant on the area. Inequality was associated mainly with inadequate housing, unemployment and poor relationships. There were 270,000 people registered with a GP in Harrow and it was important to recognise that the Council and the CCG were talking about different populations when raising the issue of inequality;
- the CCG was not complacent and recognised that the health system was difficult to navigate. There was a need for all to understand on how best to access the various services. No GP surgeries in Harrow were full and new registration was welcomed. The 111 Service was an incredibly safe one as the repercussions of making a mistake were enormous. However, they often defaulted to directing patients to A & E as they worked on a safety first principle. The NHS Choices website provided information on registration.

A Member highlighted the importance of communicating that Harrow GP surgeries were taking registration of new patients. He asked if there was any evidence, other than the survey carried out at Alexandra Avenue, which showed that the proposed changes would benefit Harrow residents. He asked about outcomes and accessibility of services. He had reservations when services were classified as 'excellent' such as that referenced to in the report in respect of the changes made at Alexandra Avenue and asked how representative the samples used were in order to avoid bias.

In response, a representative of the CCG reported that outcomes were better as continued care could be given to patients who were also able to make appointments at a time that suited them. The Vice-Chair of Harrow CCG's Governing Body explained how Walk-in Centres had worked adversely for doctors and assured the Committee that the proposed move to Access Centres was a safer alternative. The Managing Director of Harrow CCG explained how the survey had been conducted but only 150 people had responded. She welcomed suggestions from Members on how the survey ought to be conducted in the future and ways in which the questionnaire could be improved.

A Co-opted Member was of the view that for the model to succeed, a change in people behaviour was required but that education and communication were key to changes in behaviours. She added that the change in the model would result in reduced choices and, by withdrawing a layer of service, the proposed changes would ultimately result in pressures on other health services such as the A & E and Urgent Treatment Centres. Education was fundamental to ensuring that other services were not disadvantaged as a result of proposed changes to Pinn Medical Centre and Belmont Health Centre. A gap in education would also result due to the previous increased use of the Centres by non-Harrow residents.

The Managing Director of Harrow CCG stated that the CCG would welcome any help in this area and recognised that an open and honest communication was necessary. She explained how other CCGs were addressing this issue and added that there was no obligation on a surgery to treat those living out of the borough unless the person required urgent medical treatment.

Some Members expressed concerns and challenged the rationale behind the proposed changes. A Member was of the view that existing services were valued and used appropriately and the proposed changes would result in residents waiting to be seen in A&E.

The Chair of the Health and Social Care Scrutiny Sub-Committee was proud of the NHS and agreed that education was key. She was appreciative of the service she had received. She also thanked the CCG for their attendance at the Committee that evening and supported the proposed change.

The Chair of the Overview and Scrutiny Committee expressed concern that services were being limited to residents when the NHS was universal and open to all. Better health care provision was required in some areas to address the issue of inequality. With reference to the response to the first

question, he stated that it was the remit of the Overview and Scrutiny Committee to scrutinise decisions, not to “help get the message across”. The Chair of Harrow CCG’s Governing Body recognised the need to improve IT systems which would allow patient records to be accessed across boundaries. She added that some practices received large amounts of money but this was not based on factors such as deprivation, but on how funding requests had been made and allocated previously. The proposed changes would allow for the redistribution of £1.9m across Harrow and make patient care a priority.

The Chair of the Overview and Scrutiny Committee thanked all for their participation and attendance.

RESOLVED: That

- (1) the update on the review by Harrow CCG of the existing Walk-in Centre provision at Pinn Medical Centre and Belmont Health Centre be noted;
- (2) it be noted that the proposal to change Belmont Health Centre (in November 2019) and the Pinn Medical Centre (at a date to be confirmed) to GP Access Centres was subject to the approval of Harrow CCG’s Governing Body.

81. Harrow Strategic Partnership Update

The Committee received a report of the Corporate Director of Community on the progress of the Harrow Strategic Development Partnership (HSDP) and referred Members to the report considered by Cabinet on 30 May 2019. A presentation was made at the meeting setting out the key actions and programme activities. He presentation slides were available on the Council’s website.

Prior to receiving the presentation, the Chair reported that the HSDP was a large project and would involve a number of decisions by Cabinet. He stated that the project was commercially sensitivity and that Committee may need to move into a private session to allow Councillors to be briefed in detail.

The Corporate Director of Community stated that the intention was to share the progress made on the HSDP and the work carried out by officers and Cabinet Members, share the work carried out to date and the dialogue with the potential bidders.

The Corporate Director of Community, Commercial Director (Interim) and Regeneration Programme Director (Interim) referred to the presentation slides and reported as follows:

- slides 3 and 4 showed the projects that were underway, including those involving the private sector, the number of homes built and to be built in and around the Wealdstone and Harrow Town Centre and the development opportunities on the Tesco and Safari Cinema sites. The Council was ambitious in its Regeneration Programme and the growth and development opportunities the Station Road corridor provided;

- slide 6 set out the background to this ambitious project and the Council's decision to find a partner to help Build a Better Harrow (BaBH). The sites included Poets Corner, Peel Road and Byron Quarter (Phase 1) encompassing in excess of 30 acres which might involve acquiring adjacent sites and would mean the need for relocations. Officers were working together across the Council with specialist external advice being provided by consultants (slide 11 referred) to help deliver this corporate project;
- slide 12 outlined the Council's objectives, including improved mixed tenure housing, particularly affordable housing across the three core sites, better civic and community facilities, new employment space, wider economic and social benefits for residents and to provide a new Civic Centre at no cost to the Council;
- slide 13 set out the procurement process timetable and highlighted that thirteen bids had been received which had been evaluated down to five;
- slide 14, set out the evaluation criteria agreed for the HSDP Programme and these requirements had been weighted;
- legal documents would underpin the HSDP Programme;
- slide 16 set out the emerging themes that were relevant to the project, some of which needed further work by the Council;
- slide 17 showed that the intention was to further evaluate the number of bidders from five to up to three and the appointment would be a decision for Cabinet in April or May 2020 following receipt of tenders with a successful bidder being selected in March 2020. A new Civic Centre was not expected to be on site until October 2023;
- slide 19 set out the governance arrangements and the proposed limited liability partnership arrangements. Additional work on governance was envisaged;
- slide 20 made reference to the support required from the Committee to the Regeneration Programme and how the previous scrutiny review on Regeneration had fed into the Programme. Developers were keen to start work on site.

Members welcomed the presentation. A co-opted member to the Committee asked how the increased demand for school places and other infrastructure requirements was being measured. The Corporate Director of Community stated that discussions were underway in relation to the provision for additional schools and improved public transport services with the relevant authorities.

At this stage of the meeting, the Committee moved into a private session and resolved that, in accordance with Part I of Schedule 12A to the Local

Government Act 1972 (as amended), the press and public be excluded from the meeting for the remainder of the discussion relating to this item for the following reason: Information under paragraph 3 in that it contained information relating to the financial or business affairs of any particular person (including the authority holding that information).

Additionally, in accordance with paragraph 3.4 of the Protocol on Advisers and Co-optees set out in the Council's Constitution, Co-opted Members were also excluded from the remainder of the discussion on the basis that the Corporate Director of Community and the Chair believed that the discussion that would ensue was so confidential that it could significantly prejudice the interests of the Council.

Members discussed the emerging themes in detail and asked questions relating to the tenor of the views of the bidders in relation to the provision of a new Civic Centre at neutral cost, its size and options to the preferred site. Discussion also ensued in relation to the planning process and the regeneration team's view on car parking provision. During further discussions, the Chair expressed concern with regard to achieving all the Council's aspirations in the likelihood of the need for potential balancing of achievable requirements.

The Corporate Director of Community shared initial discussions that had taken place with potential partners. He outlined the dialogue he had had with Network Rail, including the development opportunities on station car parks. The expected growth in Harrow's population had been shared and discussion had taken place on franchise agreements. The Commercial Director (Interim) and the Regeneration Programme Director (Interim) reported on the complexities of achieving all the Council's aspirations including the need for a cost neutral Civic Centre and the need for the Council to agree a Car Parking Strategy. Discussions on achieving a right mix of homes by size, type and tenure, in accordance with policy were in train.

A Member also requested the need for a further report setting out which of the 17 recommendations made by the scrutiny review were now relevant and the ones that ought to be discarded. The Corporate Director of Community undertook to submit a report in this regard.

Members also asked questions on the detail of the development on each of the sites and their attention was drawn to slide 16 of the presentation which would form the base line during the dialogue sessions. Members also asked about the risks associated with the Programme should significant changes be required. They enquired if stakeholders had been engaged in the process.

The Corporate Director of Community referred to the discussion underway with TfL (Transport for London), GLA (Greater London Authority) and the local community. He referred to the number of events being planned which would also involve the developer(s) when selected.

The Corporate Directors of Community and Resources highlighted the investment that was being made in IT in order to ensure a more agile and fit for purpose workforce and an effective Civic Office. The Corporate Director of

Community stated that the Members too had role to play in this regard, as it related to their accommodation in the building and he would report back on how Members could get involved. The Vice-Chair of the Committee pointed out that, hitherto, the cost neutrality of the new Civic Centre had been an essential feature of the Regeneration Programme and if it were to go ahead on any other basis that would be a fundamental change.

In concluding the discussion, the Chair stated that, together with the Vice-Chair of the Committee, he would be meeting the Chief Executive to discuss how scrutiny Members could engage with and provide support to the Council's Regeneration Programme (slide 20 of the presentation referred). The engagement would not be limited to Scrutiny Lead Members and further information would be made available in due course.

RESOLVED: That

- (1) the report and the presentation be received and noted;
- (2) the Corporate Director of Community report back on the relevance of the 17 recommendations of the Regeneration Scrutiny Review;
- (3) the Corporate Director of Community report back on the role of Members towards the journey of becoming a more modern, flexible and agile Council and the planned move to a new Civic Centre.

82. Channel Shift Programme - Update

In accordance with Committee Procedure Rule 4.1, the Committee agreed that the Chair of the Performance and Finance Scrutiny Sub-Committee who was not a member of the Overview and Scrutiny Committee be allowed to address the meeting in respect of this item. The report on the Council's Channel Shift Programme had been programmed for the December 2019 meeting of the Performance and Finance Scrutiny Sub-Committee but had been brought forward to this meeting to allow for its earlier consideration.

The Committee received a report of the Corporate Director of Resources, which provided an update on the Council's Channel Shift Programme through to 2021. An officer introduced the report and reported that:

- over the next six months, the Council would be re-launching its digital presence through a significant and innovative upgrade to the website which would include a re-platforming of the MyHarrow account;
- the planned improvements would enable the Council to take a leap forward towards its Channel Shift Programme and to make savings set out in the Council's Medium Term Financial Strategy (MTFS).

The officer explained the proposed reduction in the telephony and email channels to a number of services, such as education, public realm, benefits, details of which were set out in the report. Services such as school admissions and parking were, currently, only accessible via the Council's website, MyHarrow account or self-service telephony.

The Chair of the Performance and Finance Scrutiny Sub-Committee stated that she was supportive of the achievements made to date in relation to the Channel Shift Programme and the process should continue. She noted that the Public Realm, a vast service area, was scheduled next and expressed concern about the impact of the changes on residents. She asked how the planned changes would be communicated to residents.

In response, the officer reported that the launch date had been pushed back to January - March 2020 and that he was working with the Communication Team on how best to convey the closure messages to residents. He outlined various measures that were in train which would improve reporting of incidences so that they could be dealt with quickly. He added that calls to Public Realm had reduced vastly and could be reduced further by ensuring functionality online which was currently lacking. The Committee was briefed on the following priorities and informed of the need to ensure that suitable platforms were in place:

- ensuring that the available technology in the Civic Centre was modern and fit for purpose;
- resources were available to work with residents and the voluntary sector to help residents who struggled to use online services;
- make available a precision routing telephone system for those who were unable to use online services.

The Chair of Performance and Finance Scrutiny Sub-Committee was pleased to learn that the Public Realm 'shift' had been delayed but was mindful that the revised implementation date of January 2020 was looming. She asked how confident officers were that the Council would be able to manage the anticipated changes in technology.

The officer explained that residents expected an online service which was personalised such as that provided by Amazon. The Council offered 760 different services and they did not fit well on the Homepage of the website. The intention was to move towards a personalised service which would provide local information such as the user's local Ward Councillors, bin collections and planning applications along with any services that had been accessed online recently. Additionally, the type of device used would dictate the information available and the format on how it had been delayed.

The Chair of the Performance and Finance Scrutiny Sub-Committee expressed concern about the recent increase in complaints in the Public Realm Service which had tripled and questioned the systems in place. She was informed that the rise had been due to the introduction of recycling to flats in the borough and was assured that complaints for the food waste and bin collection service were at an all time low.

Members of the Committee scrutinised the following areas:

- in welcoming the aspirations to move towards a digitalised service, they highlighted the importance of identifying those residents who were unable to use online services and how they would be identified;
- how vulnerable clients would be monitored;
- how online usage would be nurtured to ensure that sufficient staffing was available to assist vulnerable residents;
- the routing of completed online forms which appeared ambiguous. The Chair cited his personal experience as it would deter people from completing such forms.

The officer responded as follows:

- data sets were currently available across the Council and would enable the Council to identify vulnerable residents. The Council would work with the voluntary sector to ensure that those unable to use online services were not disadvantaged. There were no plans to close telephone lines across all services. For example, there were no plans to close the adult social care lines;
- plans were in place to ensure that vulnerable clients were not disadvantaged. In the event of any issues with the launch of the new website, a roll back position was available. The new website was undergoing a rigorous testing;
- only 2% of the borough was not covered by Broadband. Locally, 75-88% of the population had access to a Smart Phone. Risks would be mitigated by showing residents how to access services online and the Council's own devices in the One Stop Shop would be upgraded. The telephony and email channels for School Admissions were still open due to the requirements for clothing grants. Interactive Voice Recognition (IVR) would help mitigate situations such as those recently experienced by the Education Service through relaying importing messages and directing callers where appropriate;
- usage of forms online was important as data was directly transferred to the legacy system through integration resulting in a quicker service. A strong communication strategy would help ensure its success and work in this area was underway. Changes in user behaviour were also important. Feedback from web forms was reviewed and analysed and a sample of users were contacted to discuss the problem in more detail. Data was collated by a member of staff in Access Harrow who looked for common themes of issues so that they could be resolved and changes made. Up to 80% of users had found that forms were easy to access and use to report problems.

RESOLVED: That the report be noted.

83. Draft Scope for the Scrutiny Review of Shared Services

The Committee received a report of the Corporate Director of Resources, which set out the draft scope for the Scrutiny Review of Shared Services in Harrow.

RESOLVED: That

- (1) the draft scope for the Scrutiny Review of Shared Services be agreed;
- (2) the membership as set out in the scope be agreed and that co-chairing arrangements be continued in respect of this Review;
- (3) it be noted that the dates and timings of the Review of Shared Services had been shared with Members and that any issues be raised at the Scrutiny Lead Members' meetings.

84. Procedure for the Termination of the Meeting

In accordance with the provisions of Committee Procedure Rule 14 (Part 4B of the Constitution) it was

RESOLVED: At

- (1) 9.55 pm to continue until 11.00 pm;
- (2) 10.55 pm to continue until 11.20 pm.

(Note: The meeting, having commenced at 7.32 pm, closed at 11.17 pm).

(Signed) COUNCILLOR SACHIN SHAH
Chair