

At a meeting of the North West London Joint Health Overview and Scrutiny Committee held on Thursday, 12 July 2012 at 7pm at The Small Hall, Town Hall, Hornton Street, Kensington, W8 7NX.

Present

Members

Councillors Patricia Harrison (Brent), Sandra Kabir (Brent) (**Vice-Chairman**), Abdullah Gulaid (Ealing), Anita Kapoor (Ealing), Krishna James (Harrow), Vina Mithani (Harrow), Lucy Ivimy (Hammersmith and Fulham) (**Chairman**), Rory Vaughan (Hammersmith and Fulham), Mel Collins (Hounslow), Pam Fisher (Hounslow), Mary Weale (Kensington and Chelsea), Sue Jones (Richmond), Sara McDermott (Wandsworth), Sheila D'Souza (Westminster)

Maureen Chatterley (Richmond Co-opted Member)

NHS Inner North West London

Luke Blair (Communications and Engagement Workstream Lead), Charlotte Harpin (Legal Advisor, Capsticks), Rob Larkman (Senior Accountable Officer, Outer Federation of CCGs), David Mallett (Programme Manager, Shaping a healthier future), Andrew Pike (Head of Communications), Dr Mark Spencer (Medical Director), Dr Tim Spicer, (Medical Director, Shaping a healthier future and Chair of NHS Hammersmith & Fulham CCG)

Officers

Jacqueline Casson (Brent), Kevin Unwin (Ealing), Gary Marson (Hammersmith and Fulham), Nahreen Matlib (Harrow), Deepa Patel (Hounslow), Gareth Ebenezer (Kensington and Chelsea), Ofordi Nabokei, (Richmond), Richard Wiles (Wandsworth), Mark Ewbank (Westminster)

Mark Butler (JHOSC Consultant), Peter Molyneux (JHOSC Consultant)

Apologies for Absence

Councillors John Bryant (Camden), Charles Williams (Kensington and Chelsea), Caroline Usher (Wandsworth), Sarah Richardson (Westminster)

Dr Anne Rainsbury (NHS Inner North West London Chief Executive), Daniel Elkeles (Director of Strategy), Liz Knight (Deputy Director of Strategy)

Andrew Davies (Brent), Shama Sutar-Smith (Camden), Sue Perrin (Hammersmith and Fulham)

1. Welcome and Introductions

Councillor Weale took the Chair at the start of the meeting prior to the election of Chairman and Vice-Chairman and welcomed those present. Apologies were noted.

2. Election of Chairman and Vice-Chairman

Councillor Weale presided over the Election of Chairman.

There were two candidates for Chairman (both were from the Conservative Party). Councillor Ivimy was seconded by Councillor Vaughan. Councillor Kapoor was seconded by Councillor Jones. Both Councillors Ivimy and Kapoor made a brief statement of their past experience and why they would be suitable to be Chairman.

With one person voting from each Borough, Councillors Ivimy and Kapoor were tied 3-3. Councillor Weale had not voted thus far and given this equality cast her vote for Councillor Ivimy.

Agreed :

That Councillor Ivimy be elected as JHOSC Chairman.

Councillor Ivimy now took over as Chairman for this meeting.

Councillor Kapoor had beforehand put herself forward as a candidate for Vice-Chairman. Prior to the meeting no candidate from the Labour Party had put themselves forward as possible Vice-Chairman. The JHOSC agreed that it would accept a late nomination for Vice-Chairman. Councillor Kabir nominated herself as Vice-Chairman and was seconded by Councillor Harrison. Councillor Kabir made a brief statement of her past experience and suitability to be Vice-Chairman.

Councillor Kapoor then withdrew her nomination for Vice-Chairman and accordingly it was

Agreed :

That Councillor Kabir be elected as JHOSC Vice-Chairman.

The JHOSC was also asked to consider its **Terms of Reference** which had been discussed previously at an informal JHOSC meeting. Ms Harpin of Capsticks clarified that the role of the JHOSC was to provide overview and scrutiny in relation to the process adopted. After discussion, the JHOSC satisfied itself that the proposed Terms of Reference did give it the scope to consider the substantive proposals and not just the nature of the consultation. Also, the JHOSC agreed that the proposed Terms of Reference adequately reflected the distinction between the role of the JHOSC and the roles of local Health OSCs. The proposed Terms of Reference were therefore agreed unchanged.

Agreed :

That the Terms of Reference of the JHOSC are as follows:-

1. Consider the 'Shaping a Healthier Future' consultation arrangements - including the formulation of options for change, and whether the formal consultation process is inclusive and comprehensive.
2. Consider and respond to proposals set out in the 'Shaping a Healthier Future' consultation with reference to any related impact and risk assessments or other documents issued by or on behalf of NHS North West London in connection with the consultation.

3. Minutes of the Informal Meeting held on 12 June 2012

The minutes of the previous informal meeting were approved as an accurate record of proceedings subject to noting that Councillor Mel Collins had submitted apologies for absence.

Matters Arising :

(i) Involvement of LB Hillingdon

Hillingdon had now confirmed that it did not wish to participate in the JHOSC. Ms Harpin of Capsticks stated that Hillingdon's decision did not have any implications for the other Councils participating in the JHOSC. The JHOSC agreed that Hillingdon could reconsider its decision if it wished to in future. It was noted that one of the forthcoming Consultation Roadshow Events was due to take place in Hillingdon.

(ii) Other London Councils

It was confirmed that Wandsworth, Richmond and Camden had joined the JHOSC as full voting members.

4. Matters Arising from the Half Day Information Session on 6 July 2012

None.

5. *Shaping a healthier future* Programme

There were three particular documents before the Committee:-

(i) Programme Update: Draft Programme Timeline Overview

Dr Mark Spencer gave an update that after all necessary approvals the consultation period commenced on 2 July.

(ii) Improving Healthcare for Two Million People in North West London (Presentation)

Received and noted.

(iii) Communications Update: Consultation Roadshow Events

Mr Blair (Communications and Engagement Workstream Lead) confirmed that since the formal consultation commenced on 2 July staff were in place to answer phone and email messages. Thus far there had been 3,000+ visitors to the website and over 30 response forms had already been received. The Consultation Document had received a Crystal Mark (Clarity approved by the Plain English Campaign) and was being widely circulated. A lot of work was being done with local communities including focus groups and a dedicated team were making efforts to engage with hard to reach communities / seldom heard groups. Co-

ordination was taking place with each of the Councils with regards to including the summary document in Borough Newsletters.

A provisional list of Consultation Roadshow Events was before the Committee, it was expected there would be additions to this list with each Borough to be visited twice. In discussion with Members of the JHOSC, the following general points were made in respect of Consultation Roadshow Events:-

(a) Cllr Kabir asked Mr Blair to describe one of these Roadshow Events. Mr Blair stated there would be exhibition panels, interactive screens, plenty of copies of the documentation, clinicians in attendance and people stationed at areas of high footfall. Each Roadshow would run for (usually) 6 hours with particular presentations at times which would be advertised.

(b) The Chairman observed the crucial importance of public knowledge and acceptance of the role of Urgent Care Centres (UCCs). Councillor Collins agreed with this point and thought the Roadshows would do well to highlight the work of the UCCs. He added that the Hounslow LINK had recently carried out a two week survey of a local UCC. Dr Spencer added that triage would take place in each hospital and gave the 'simple definition' that if persons were likely to be admitted to a hospital then they would go to A&E, otherwise they would go to the UCC.

Dr Spencer agreed that UCCs were a central part of the consultation and thanked the Members for their helpful comments. It was hoped that it might be possible to produce a video on UCCs.

Further in the discussion, Members of the JHOSC stated their interest in making a visit to observe the work of a UCC. Councillor D'Souza did add the note of caution that UCCs were very busy places and any visit should not interfere with their work. It was agreed that the visit would best be arranged for a morning session in the middle of the week. The Chairman thought the most suitable UCCs to visit were either Ealing, St. Mary's, Charing Cross or Chelsea & Westminster. Dr Spencer was asked to suggest possible arrangements.

Action :

Dr Spencer to suggest possible dates/times/venues for JHOSC Members to observe an Urgent Care Centre.

(c) Councillor Fisher stated her interest in seeing attendance figures for individual Roadshow Events. Mr Blair responded that reports were being made on each individual Roadshow and, after end July, there would be an interim overall report to inform the rest of the consultation. There would also be a consultation update report at every meeting of this JHOSC.

Additionally, the following specific points were made in respect of particular Consultation Roadshow Events:-

(a) The Olympic Cycle Race on 28 July was not due to go near Hammersmith Town Hall which was hosting a Roadshow that day. There would be an additional event in Fulham in September;

(b) Councillor Jones asked that the venue for the Richmond event on 22

September (currently United Reform Church, Richmond Green) be reconsidered. This venue would be very difficult to get to for people from the Twickenham area she stated. Mr Blair agreed to take another look.

Copies of the full Consultation Document were available to JHOSC Members at the meeting. After comments made by Members, Mr Blair agreed to arrange for the summary PDF to be emailed to all JHOSC Members and (at the request of Councillor Collins) for the summary to be translated into Braille.

Action :

Mr Blair to arrange for the summary PDF to be emailed to all JHOSC Members and to be translated into Braille.

Further miscellaneous points were made by Mr Blair and Dr Spencer in response to Members' questions. Petitions would be considered in the consultation but would be regarded less highly than reasoned arguments. There had been very active engagement with (amongst others) community pharmacists and Transport for London. It was noted that the NHS 111 Service was being rolled out in Hillingdon, Hammersmith and Fulham, Kensington and Chelsea and the City of Westminster. In due course this would be a national programme.

6. JHOSC Draft Work Programme

The newly appointed JHOSC Consultants Mr Mark Butler and Mr Peter Molyneux were present at the meeting and tabled a paper for discussion. Mr Butler and Mr Molyneux explained the rationale behind their suggested programme.

Page two of the Draft Work Programme included seven Scrutiny Questions; these were a distillation of questions used in previous health scrutiny programmes. After discussion the Committee agreed these Scrutiny Questions subject to one amendment - To add 'and sustained' to question 4 to now read in full 'Is there sufficient evidence that the changes proposed can be achieved and sustained?' Mr Butler and Mr Molyneux believed that these questions would provide a structure for the eventual final report. Mr Butler and Mr Molyneux accepted and found helpful the comment of the Chairman (supported by Councillor Vaughan) that there was no need to over elaborate on subject areas where a speedy conclusion could be drawn.

Although the JHOSC wished to reserve the right to amend if necessary the Draft Work Programme agreed at this meeting, Mr Butler and Mr Molyneux believed that the structure adopted provided a good checklist and was deliverable within the timescale available.

The JHOSC agreed that it would require another four meetings, three to meet witnesses and a final review meeting. The JHOSC accepted Mr Butler's view that it would be easier for witnesses to attend daytime meetings. The JHOSC considered but rejected any suggestion of setting up any form of sub-committee.

After discussion the JHOSC agreed the main themes for these three witness meetings as:-

(a) To cover risks and underlying assumptions, demographics.

(b) To cover clinical case for change (This topic would be scheduled for the second meeting as it would take the Consultants a longer period to obtain suitable witnesses). Ideally witnesses would include the Clinical Commissioning Groups, the Royal Colleges and an Adult Social Care Director. Possibly the views of person(s) working in the Health Service (such as GPs) who did not accept the case for change could be heard.

(c) To cover transport (travel, accessibility and patient impact).

The Chairman stated that she and the Vice-Chairman would liaise with the Consultants to agree the agenda for the next meeting.

Agreed :

The Work Programme structure contained in the Consultant's report subject to the amendments above and with the JHOSC reserving the right to amend this structure should it prove necessary in the future.

7. Date of Next Meeting(s)

Following on from the discussion on the Draft Work Programme, it was

Agreed :

The following programme of future JHOSC meetings:-

Thursday 2 August, 10am at LB Harrow

To cover risks and underlying assumptions, demographics

(Reserve date if necessary Tuesday 14 August, same time and venue)

Tuesday 4 September, 10am at LB Hammersmith and Fulham

To cover clinical case for change

Thursday 6 September, 7pm at LB Ealing

To cover transport

Wednesday 26 September, 9.30am at LB Brent

To cover JHOSC findings and final report.

8. Any Other Business

Central London Hospitals

The Chairman stated it would be useful to know which services would continue to be provided at University College London Hospital and St Thomas' Hospital, both situated close to the boundary with the City of Westminster.

The meeting finished at 9.25pm.