

# Joint Health Overview & Scrutiny Committee (JHOSC)

## Agenda

Tuesday 3 December 2013

10.00 am

COMMITTEE ROOM 1

HAMMERSMITH TOWN HALL, KING STREET, HAMMERSMITH W6 9JU

### MEMBERSHIP

Chairman: Councillor Lucy Ivimy (LB Hammersmith & Fulham)

Councillor Mel Collins (LB Hounslow)

Councillor Sheila D'Souza (Westminster City Council)

Councillor Mary Daly (LB Hounslow)

Councillor Pamela Fisher (LB Hounslow)

Councillor Robert Freeman (RB Kensington & Chelsea)

Councillor Abdullah Gulaid (LB Ealing)

Councillor Patricia Harrison (LB Brent)

Councillor Anita Kapoor (LB Ealing)

Councillor Vina Mithani (LB Harrow)

Councillor Will Pascall (RB Kensington & Chelsea)

Councillor Victoria Silver (LB Harrow)

Councillor Rory Vaughan (LB Hammersmith & Fulham)

**CONTACT OFFICER:** Sue Perrin  
Committee Co-ordinator  
Governance & Scrutiny  
☎: 020 8753 2094  
E-mail: sue.perrin@lbhf.gov.uk

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Date Issued: 21 November 2013

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3 December 2013

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5.	<b>DECLARATIONS OF INTEREST</b>	
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7.	<b>CLINICAL COMMISSIONING GROUP:OUT OF HOSPITAL UPDATE</b> This report will follow.	
8.	<b>ACCIDENT &amp; EMERGENCY PLANNING AND WINTER PRESSURES</b> This report will follow.	
9.	<b>INTEGRATED CARE UPDATE</b> This report will follow.	
10.	<b>DATE OF NEXT MEETING</b> To be agreed.	

Proposed venue: London Borough of Ealing

# HAMMERSMITH TOWN HALL

## CONTACT DETAILS

**Address:** King Street  
Hammersmith  
W6 9JU

**Opening Hours:** 9am-5pm  
Mon-Fri

**Tel:** 020 8748 3020

**Email:** information@lbhf.gov.uk

**Website:** www.lbhf.gov.uk

## TRAVEL DETAILS

**Bus:** 27, 190, 266, 267, 391, & H91 via King Street

**Tube:** Hammersmith Station (10 min walk)  
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Ravenscourt Park (5 min walk)  
District

**Road:** From North  
Shepherd's Bush Road (A219)

From South  
Fulham Palace Road (A219)  
Hammersmith Bridge Road (A306)

From West  
Great West Road (A4)  
Chiswick High Road/King Street (A315)

From East  
Talgarth Road (A4)  
Hammersmith Road (A315)

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### LEGEND

72.220.283.295

Bus Route



Bus Stop



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1:5,000

**h&f**  
putting residents first

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# Agenda Item 3

Minutes of a meeting of the North West London Joint Health Overview and Scrutiny Committee (NWL JHOSC) held at Kensington Town Hall at 10.30am on 3 September 2013

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## **PRESENT**

### **Members Present**

Cllr Lucy Ivimy (Hammersmith and Fulham) (*Chairman*), Cllr Mary Daly (Brent), Cllr Abdullah Gulaid (Ealing), Cllr Anita Kapoor (Ealing), Cllr Rory Vaughan (Hammersmith and Fulham), Cllr Vina Mithani (Harrow), Cllr Victoria Silver (Harrow), Cllr Mel Collins (Hounslow), Cllr Pamela Fisher (Hounslow), Cllr Robert Freeman (RBKC), Cllr Will Pascall (RBKC), Cllr Sheila D'Souza (Westminster), Cllr Dr Cyril Nemeth (Westminster)

### **NHS Present**

Daniel Elkeles (Chief Officer, CWHH CCGs Collaborative and Shaping a Healthier Future (SaHF) Senior Responsible Officer), Don Neame (Communications Director and SaHF Communications Lead), Andrew Pike (Head of Communications, CWHH CCGs Collaborative), Dr Mark Spencer (Associate Medical Director, NHS England and SaHF Clinical Lead), Dr Tim Spicer (Chair, Hammersmith & Fulham CCG and SaHF Clinical Lead)

## **WELCOME AND INTRODUCTIONS**

This being the first JHOSC meeting for some time, all present introduced themselves.

## **APOLOGIES FOR ABSENCE**

There were no apologies for absence. [Apologies for delayed arrival were received from Cllr Mary Daly and Mr Elkeles].

## **MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting held on 21 November 2012 were agreed as a correct record.

## **DECLARATIONS OF INTEREST**

Cllr Vina Mithani (Harrow) declared a non pecuniary interest that she was employed by Public Health England, previously known as the Health Protection Agency.



## **SHAPING A HEALTHIER FUTURE AND JHOSC RECOMMENDATIONS UPDATE**

Mr Elkeles and Dr Spencer provided an introduction and commentary on the JHOSC Update proposals document (The agenda page had stated that two reports would follow but in fact a single report covered all matters).

The following key points and main themes emerged in discussion (with references made to the relevant slide):-

(i) Slide 9 detailed the substantial progress made on priorities for 2013/14. In response to similar points made by Cllrs Ivimy, Gulaid and Collins Mr Elkeles responded that the big investment in out of hospital services (that the JHOSC called for as a pre-condition to A&E changes) was in the process of being made. Mr Elkeles added that there was a long (five years) timeline for changes in the provision of A&E services and there was no process currently in place that could not be stopped.

(ii) Slide 17 on Judicial Review. Mr Elkeles observed that this process had been very challenging and rigorous.

(iii) Slide 20 on Central Middlesex Hospital. Mr Elkeles reported that as well as the development of the outline business cases at individual hospitals, it was anticipated that the JHOSC wide business case would be ready (in some form) by December. Mr Elkeles added that it would be a key task for the JHOSC to comment on this document.

(iv) Slide 21 on Ealing, Charing Cross. Mr Elkeles reiterated the commitment to work to develop enhanced programmes for these two hospitals. (It was noted that the SaHF programme was continuing to make presentations to the OSCs of individual boroughs).

(v) Slide 27 on Integrated Care Networks. Dr Spicer explained the model by which individuals received assessment and treatment away from hospitals. Cllr Daly made the caveat that sometimes elements of the network could break down (e.g. if a carer failed to show up). Cllr Ivimy summarised that these integrated care networks were a central issue for the JHOSC to scrutinise. Cllr Vaughan added that the JHOSC would be interested to hear of any successful pilots elsewhere.

(vi) Slide 31 on A&E and Winter Resilience. Mr Elkeles sought to reassure Cllrs Collins and Fisher that robust joined-up arrangements were in place in Hounslow and he was optimistic that Hounslow would receive a share of the Winter Pressures funding allocation.

(vii) Slide 35 on Maternity Services - Cllrs Mithani and Daly both asked about the maternity services at Northwick Park Hospital. Mr Neame and Mr Elkeles responded that considerable investment had been made in staff and buildings at this hospital to provide improved capacity and choice. They believed that significantly increased choice was being offered to local women.

(viii) Slide 41 on Monitoring Activity – Mr Elkeles observed that there were fewer hospital admissions being made as the improvements to out of hospital services came into effect.

### **JHOSC: CONTINUING SCRUTINY OF THE DEVELOPMENT OF PROPOSALS**

The continuing future of the JHOSC was discussed. On behalf of the SaHF officers Mr Neame stated they welcomed the contribution of the JHOSC in holding them to account and they believed that there was a need for the JHOSC to continue.

It was accepted that individual OSCs continued to scrutinise SaHF at their own meetings. As stated by the Chairman the role of this JHOSC was to look at overall North West London matters and retention of the JHOSC was the best way to continue to scrutinise cross-borough issues. Cllrs Collins, D'Souza and Vaughan made supporting contributions to the effect that this was the appropriate continuing role for this JHOSC.

Some reservations were expressed. Cllr Daly expressed a wish to consult with her Brent Council colleagues. Cllr Gulaid observed that certain boroughs were far more heavily affected by the SaHF proposals than others.

With Cllr Collins proposing and Cllr Fisher seconding, it was put to the vote and

**RESOLVED (with Cllr Daly abstaining)-**

That the North West London Joint Health Overview and Scrutiny Committee should continue to operate in its present format and with its existing terms of reference.

(The JHOSC noted that LBs Camden and Wandsworth had both indicated that they did not wish to continue to participate in the JHOSC as it was felt in both cases that the implications of SaHF were not sufficiently great for these boroughs).

## **WORK PROGRAMME**

Having affirmed its continued existence the JHOSC agreed the following work programme of items/issues that it wished to consider:-

- (1) Integrated care programmes and how evolving;
- (2) The JHOSC wide business plan (which was expected to be ready by December);
- (3) The additional capacity proposals for hospitals such as Northwick Park (and others where there was planned to be service expansion);
- (4) The Ambulance Service and how coping with current demands and the changing role in respect of Urgent Care Centres;
- (5) The evolution of Urgent Care Centres (including activities and capacities);
- (6) Transport (both hospital and public transport);
- (7) Overview of the services provided by each of the geographical zones (Central Middlesex, Charing Cross and Hammersmith, Ealing, NWL Maternity and Paediatric zone);
- (8) Commissioning arrangements requirement to market test and any 'conflicts' between SaHF proposals and commissioning;
- (9) Information systems and governance;
- (10) Imperial College and the rebuilding of the St Mary's Hospital Campus (there were a number of hyper acute services provided at St Mary's that covered the whole of the region);
- (11) Staffing and capacity factors (e.g. were there enough trained consultants?);
- (12) Maternity Services across the whole of the region.

In reply to a point made by Cllr Silver, the Chairman stated that in her view resilience was a key component to all of the work programme items listed above and did not need to be listed as a separate item.

It was agreed that the secretariat would distribute a draft of the Work Programme to JHOSC members in advance of the full minutes.

## **DATES OF FUTURE MEETINGS**

The next JHOSC meeting was set for Tuesday 3 December, 10.30am, at Hammersmith Town Hall.

The meeting ended at 12.55pm.



## **North West London Joint Health Overview and Scrutiny Committee**

### **TERMS OF REFERENCE**

#### **Membership**

One nominated voting member from each Council participating in the North West London Joint Health Overview and Scrutiny Committee (JHOSC), plus one alternate member who can vote

The committee will require at least six members in attendance to be quorate.

#### **Chairman and Vice Chairman**

The JHOSC will elect its own Chairman and Vice chairman.

Elections will take place on an annual basis each May, or as soon as practical thereafter, such as to allow for any annual changes to the committee's membership. The current Chairman will remain as Chairman until the next election, in June 2014 (after the 2014 Local Government elections) or as soon as practical thereafter.

#### **Duration**

The JHOSC will continue until March 2018, to match the planned implementation timeframe for the Shaping a Healthier Future programme. During this period, the committee will also hold an annual review in May each year, or as soon as practical thereafter, where it will consider and decide whether there is a need for the JHOSC to continue or whether it has fulfilled its remit and should terminate earlier than 2018. This does not preclude individual local authorities from leaving the JHOSC before this date. Should there be any proposals for a JHOSC beyond this date, this would need to be considered by each participating authority in line with its own constitution and policies.

#### **Terms of Reference**

The JHOSC will perform the following functions:

1. To scrutinise the 'Shaping a Healthier Future' reconfiguration of health services in North West London; in particular the implementation plans and actions by the North West London Collaboration of Clinical Commissioning Groups (NWL CCGs), focussing on aspects affecting the whole of North West London.
2. To review and scrutinise decisions made or actions taken by NWL CCGs and/or other NHS service providers, in relation to the 'Shaping a Healthier Future' reconfiguration, where appropriate.

3. To make recommendations to NWL CCGs, NHS England, or any other appropriate outside body in relation to the 'Shaping a Healthier Future' plans for North West London; and to monitor the outcomes of these recommendations where appropriate.
4. To require the provision of information from, and attendance before the committee by, any such person or organisation under a statutory duty to comply with the scrutiny function of health services in North West London.

The stated purpose of the JHOSC is to consider issues arising as a result of the Shaping a Healthier Future reconfiguration of health services, taking a wider view across North West London than might normally be taken by individual Local Authorities. Individual local authority members of the JHOSC will continue their own scrutiny of health services in, or affecting, their individual areas (including those under 'Shaping a Healthier Future'). Participation in the JHOSC will not preclude any scrutiny or right of response by individual boroughs.

In particular, and for the sake of clarity, this joint committee is not appointed for and nor does it have delegated to it any of the functions or powers of the local authorities, either individually or jointly, under Section 23 of the local authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

Mark Burgin  
London Borough of Brent

## APPENDIX 1

### Questions raised by Cllr Mel Collins with regard to the Shaping a Healthier Future Programme

#### Central Middlesex and Hammersmith Hospitals

1. What elective services are going to be provided at Central Middlesex Hospital?
2. What specialist services are going to be provided at Hammersmith Hospital?
3. What support is going to enhance the Urgent Care Centres at these two sites?

#### Charing Cross Hospital

There seems to be uncertainty regarding the future provision of services from Charing Cross Hospital, as such could clarification be provided in relation to:

1. The exact details of the 24/7 ambulance service to be provided
2. What services will be provided through an “enhanced” Urgent Care Centre?
3. What specialist services are to be retained on site?
4. How many clinical beds will be retained and what capacity for expansion will there be if necessary?
5. What are the plans for the disposal/demolishing of buildings on the site?
6. What will happen to any funds raised through the sell-off of estate (e.g. buildings/land)?

#### St Mary’s Hospital

The present footprint of St Mary’s is a point of concern in relation to the capacity for the reconfiguration of specialist services, particularly with regard to the Western Eye Hospital, as such:

1. What capacity outside of the footprint is available for expansion?
2. Given the present uncertainty of the financial stability of Imperial College Healthcare NHS Trust - how will these services be financially sustainable in the long term?

#### West Middlesex Hospital

What will be the implications for overflow from Ealing Hospital to West Middlesex?