

Minutes

EXTERNAL SERVICES SCRUTINY COMMITTEE

6 June 2012

Meeting held at Committee Room 6 - Civic Centre,
High Street, Uxbridge UB8 1UW



HILLINGDON
LONDON

	<p>Committee Members Present: Councillors Michael White (Chairman) Dominic Gilham (Vice-Chairman) Josephine Barrett Neil Fyfe Peter Kemp John Morgan Dominic Gilham (Vice-Chairman) Josephine Barrett Neil Fyfe Peter Kemp John Morgan Anita MacDonald Dave Allam</p> <p>Witnesses Present: Susan La Brooy, North West London NHS</p> <p>LBH Officers Present: Dr Ellis Friedman, Joint Director of Public Health Nav Johal, Democratic Services Officer, LBH</p> <p>Also Present: Malcolm Ellis – Standards Committee Vice-Chairman Trevor Begg – Hillingdon LINK Chairman</p>	
2.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>Apologies for absence were received from Councillors' Phoday Jarjussey and John Major. Councillors' Dave Allam and Anita MacDonald were present as substitutes.</p>	Action by
3.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>Councillor Neil Fyfe declared a personal interest as he was a governor of Hillingdon Hospital Foundation Trust, and stayed in the room during the consideration thereof.</p>	Action by
4.	<p>EXCLUSION OF PRESS AND PUBLIC (<i>Agenda Item 5</i>)</p> <p>RESOLVED: That all items of business be considered in public.</p>	Action by

5.	<p>SHAPING A HEALTHIER FUTURE UPDATE (<i>Agenda Item 6</i>)</p> <p>Ms Susan La Brooy, North West London NHS advised that a lot of work was being carried out with regard to 'shaping a healthier future'. The public, OSC, LA's and other organisations were involved in the consultation of strategic re-configuration.</p> <p>Health and clinical standards had been agreed and it was noted there was a large out of hospital component that needed to be considered. There were 2 large events with clinicians and the public which evaluated various options and combinations of the emergency services at hospitals in North West London.</p> <p>The organisation was not looking to close any hospitals but was looking at the emergencies services in North West London hospitals and possible pairings. Northwick Park and Hillingdon Hospital emergency services would remain unaffected. The distance between the two hospitals was quite far, whereas as the other hospital were quite close together.</p> <p>An evaluation criteria had been used to produce at least three combination plans, and included every hospital having an option on whether to stay as an acute hospital. A consultation was going out at the end of June/beginning of July 2012; this would end in October 2012. This consultation would then go to the Secretary of State, before the possible implementation through new CCG's.</p> <p>There was a large communication element to this. Ms Brooy reminded Members that although Hillingdon Hospital services were not threatened that they will be affected by the changes. As hospitals around North West London changed then this would cause a shift of change. Ms Brooy stressed that out of hospital care was important to consider. In addition the quality of services needed to be maintained.</p> <p>Members asked what management was being used for the placement of patients. Ms Brooy advised that any changes would take 3 – 5 years and that if there was change then capacity would need to increase. North West London NHS had a grant of £12million for emergency care. Changes would be built into a financial model.</p> <p>Members commented it was important to increase the amount of care to patients at home, in the right setting and with value for money. Members noted that three A & E's will close but urgent care centres would be in place of those A & E's that close. An urgent care centre run by GP's will deal with injury and illness which was severe. It was expected around 50% of patients would go to an urgent care centre instead of A & E.</p> <p>Members spoke about emergency need in a large scale if required, for example for emergencies on the motorway or at the airport. Ms Brooy explained that there were Pan London plans to deal with this and would be used if there was a need.</p> <p>Members asked for clarification on urgent and minor centres, how will</p>	Action by
----	--	------------------

	<p>patients know which to attend or will they be advised. Ms Brooy explained that it was most important that patients got the best care and were not messed about. At hospital the person who triages the patient would tell the patient where to go for appropriate care. It was also for the ambulance to decide, if they were called. It was noted that there would also be specialist centres to deal with strokes, vascular care (for example) and patients would get transferred as required.</p> <p>Travel time was discussed and Ms Brooy explained that a lot of work had been done with regard to looking at travel times. There was very little difference and this difference was not a critical element. North West London had a number of centres in accessible distance for residents.</p> <p>The ratio of people per A & E was discussed. Currently it was 1 A & E per 200,000 and would be 1 per 400,000 after the changes in North West London. This was a better ratio in comparison to the rest of the UK.</p> <p>Mr Trevor Begg, LINK, spoke about LINK's heavy involvement as they had been on the Programme Board. Mr Begg stated that Hillingdon hospital A & E was not a concern as the A & E hospital configuration was broadly positive for Hillingdon hospital. Out of hospital had potential to be positive for Hillingdon. He had concerns around out of hospital strategy and elective care. The strategies were not in enough detail for Mr Begg to give a view. In Hillingdon there needed to be a focus on the potential impact on the quality of care, especially with people moving for care.</p> <p>Dr Friedman stated that the basic strategy appeared to be correct. There were 30% more beds in North West London than the national average. Overall there should be no doubt outcomes for patients will be better. Fewer and more specialist hospitals was the right way forward. The amount of planning provisions was robust enough to take up the slack. The effect on social care spending needed to be looked at in detail. If Ealing A & E closed the exact changes that would result to Hillingdon hospital needed to be looked at and Dr Friedman has not seen a model flow of this. Locally, more detail was required.</p> <p>The Committee thanked Ms Brooy for her presentation and answering Members questions.</p> <p>RESOLVED: That the presentation be noted.</p>	
6.	<p>WORK PROGRAMME (<i>Agenda Item 7</i>)</p> <p>Consideration was given to the Committee's Work Programme. Members discussed the possible review topics for the year. The following issues had been discussed since the last Committee meeting: the role of Special Constables, Dentists, Diabetes care and Prescription Services.</p> <p>Dr Friedman gave his advice on the review topics and felt that both dentists and diabetes care had areas of concerns which could be</p>	Action by

	<p>reviewed. It was noted that the commonest reason for a child to go to hospital was most likely an issue with the child's teeth. The number of diabetes patients was increasing. There were many care pathways and was a meaty topic with much to discuss. It was noted that there were many things that Hillingdon did well. Dr Friedman felt that a prescription service review could be quickly covered and it was difficult to assess whether there was a problem with the service.</p> <p>Members discussed the possible review topics and in detail dentists and diabetes care. Both were considered important possible review topics. It was suggested that a report on prescription services be presented to Committee at a further meeting to see if there was any issues that needed to be resolved.</p> <p>Members discussed the terms of reference of the Committee and highlighted that this included crime and disorder and therefore wished to complete one review on health and another on crime and disorder.</p> <p>Members agreed to carry out a review on the role of Special Constables in the Borough as the first major review, and the second review to be on Diabetes care. The Committee Chairman and Whips would discuss Members for the Working Groups.</p> <p>Members agreed to change the next meeting which was scheduled on 24 July 2012 to Tuesday 17 July as Corporate Services POC was on 24 July.</p> <p>Members agreed that Utilities companies be invited to the Committee meeting on 10 January 2013 as many were unable to attend this meeting.</p> <p>Members agreed to include a report on prescription services at the Committee meeting on 20 November 2012.</p> <p>RESOLVED: That:</p> <ol style="list-style-type: none"> 1. the Work Programme be noted; 2. the meeting scheduled for 24 July 2012 had been moved to Tuesday 17 July at 5pm; 3. an update on Utilities to be scheduled into the meeting on 10 January 2013; 4. a report on Prescription Services will be presented to Committee at the meeting on 20 November 2012; 5. a Working Group be set up to review 'The Role of Special Constable' and this will be the first review undertaken; and 6. a second Working Group will be set up to review 'Diabetes Care'. 	
7.	<p>MINUTES OF THE MEETING - 25 APRIL 2012 (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That:</p> <ol style="list-style-type: none"> 1. the minutes of the meeting held on 25 April 2012 be agreed as a correct record; 2. Members requested further information on the development 	Action by

	<p>of Yiewsley Health Centre from Ms Joan Veysey, Acting Borough Director at NHS Hillingdon; and</p> <p>3. Members are given information on investment in 'Cinderella' services over the next year.</p>	
8.	<p>MINUTES OF THE MEETING - 10 MAY 2012 (<i>Agenda Item 4</i>)</p> <p>RESOLVED: That the minutes of the meeting held on 10 May 2012 be agreed as a correct record.</p>	Action by
	The meeting, which commenced at 6.00 pm, closed at 6.45 pm.	

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran / Nav Johal on 01895 250472 / 01895 250692. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.