

**MINUTES OF THE SPECIAL OVERVIEW AND SCRUTINY COMMITTEE
WEDNESDAY, 20 JANUARY 2010**

Councillors Councillors Bull (Chair), Adamou (Vice-Chair), Adje, Aitken, Mallett, Newton and Winskill

Also Present: **Co-optees:** Yvonne Denny (Church Representative), Joseph Ejiofor (Parent Governor Representative), Helena Kania (Local Involvement Network (LINK)) and Sarah Marsh (Parent Governor Representative), **Also attending** Lynne Featherstone (Member of Parliament for Hornsey and Wood Green), Rob Larkman (Chief Executive – Whittington Hospital Trust), David Sloman (Royal Free Hospital Trust), Julie Quinn (Deputy Chief Executive – NHS Haringey) Duncan Stroud (Head of Partnerships and Stakeholder Engagements – NHS Haringey), Eleanor Brazil (L.B. Haringey) Councillor Kieren McGregor (L.B. Enfield), Add Janet Shapiro (Defend Haringey Health Services Coalition) and Karen Jennings,

And approximately 25 members of the press and public

MINUTE NO.	SUBJECT/DECISION
OSCO01.	<p>WEBCASTING</p> <p>The meeting was not web-cast.</p>
OSCO02.	<p>APOLOGIES FOR ABSENCE</p> <p>There were no apologies for absence.</p>
OSCO03.	<p>URGENT BUSINESS</p> <p>There was no urgent business.</p>
OSCO04.	<p>DECLARATIONS OF INTEREST</p> <p>Councillor Bull declared a personal interest in Item 6 – Whittington Hospital Trust Update – as a question received related to Moorfield’s Eye Hospital, where Councillor Bull was employed.</p>
OSCO05.	<p>ORDER OF AGENDA</p> <p>RESOLVED to vary the order of agenda to accommodate those in attendance. The minutes will show items in the order in which they appeared on the agenda.</p>
OSCO06.	<p>DEPUTATIONS/PETITIONS/PRESENTATIONS/QUESTIONS</p> <p>1. <u>Item 6 – Whittington Hospital Update</u></p> <p>a) A deputation on behalf of Defend Haringey Health Services Coalition was requested and heard as part of agenda item 6 below.</p>

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	<p>b) 3 late questions from, local resident, Mario Petrou, which could not be discussed at the meeting due to time constraints. Responses would be sent directly to the resident.</p> <p>2. <u>Item 7 – Health Visitors Update</u></p> <p>A deputation by Sue Hessel on behalf of Haringey Federation of Residents’ Associations Vulnerable Groups was requested and heard as part of agenda item 7 below.</p>
<p>OSCO07.</p>	<p>WHITTINGTON HOSPITAL UPDATE</p> <p>The Committee noted the deputation by Janet Shapiro on behalf of Defend Haringey Health Services Coalition (DHHS), including:</p> <ul style="list-style-type: none"> • The proposals for the Whittington Hospital which threatened the future of Accident & Emergency (A&E) and related services were highly opposed by DHHS. • The McKinsey A&E report should be made public. • Further consultation on proposals for the Whittington was required. <p>Councillor Kieran McGregor, L.B. Enfield Councillor - Save Chase Farm Group, informed the Committee that many decisions relating to the future of Enfield’s Chase Farm Hospital A&E and related services had been taken behind closed doors and none of the recommendations made by an independent panel had been implemented.</p> <p>Rob Larkman (Chief Executive – Whittington Hospital Trust) and David Sloman (Chief Executive – Royal Free Hospital Trust) advised that despite population growth there would be a large reduction in funding across London and the quality of services was at risk. The Committee noted that no formal proposals about the future of Whittington Hospital had been made but policy required all NHS providers to obtain Foundation Trust status. The Whittington and Royal Free Trusts had been considering working together as neither organisation felt it could achieve Foundation Trust Status alone and working together would provide more robust services for the future. Any proposals were likely to be consulted on during the autumn of 2010.</p> <p>The key aspects for NHS providers to consider were: centralising stroke and trauma services but also localising other services where possible in health centres and local hospitals and polyclinics.</p> <p>The Whittington Hospital Trust had identified four possible strategic options:</p> <ul style="list-style-type: none"> • To continue to stand alone (which was not feasible) • To work with the Royal Free Hospital Trust • To work with local community health services • To work with University College London Hospital (UCLH) to retain services in financially challenging times

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	<p>The Committee noted comments made by:</p> <ul style="list-style-type: none">• Lynne Featherstone, MP for Hornsey and Wood Green, including that proposals should include an option to retain full A&E services at the Whittington Hospital.• Karen Jennings, Labour Party Candidate, suggesting that a decision had been taken to establish a local urgent care centre. <p>In response the Chief Executive, Whittington Hospital Trust, explained that commissioners in Islington were looking at the possibility of providing an urgent care centre alongside A&E and emphasised that there was a need for improved working with primary care to ensure patients use of the correct services. He guaranteed that services would not change until the outcome of the North Central London (NCL) Sector Review.</p> <p>Potential options for the Whittington Hospital included:</p> <ul style="list-style-type: none">• Retaining a full 24 hour A&E service with surgical and medical services• Retaining medical emergencies only• Urgent Care only <p>The Chief Executive – Whittington Hospital Trust stated that at least one of the options that will be proposed further to the review will include retaining the A&E service at the Whittington Hospital.</p> <p>The Committee requested that all relevant documents relating to the reconfiguration of services at the Whittington Hospital be placed on a public website to ensure openness and transparency and encourage dialogue with interested parties.</p> <p>Committee members highlighted the need to maintain services at the Whittington Hospital and to ensure that all relevant groups including professionals and carers were consulted.</p>	
OSCO08.	<p>HEALTH VISITING SERVICE UPDATE</p> <p>The Committee received a report introduced by Julie Quinn (Deputy Chief Executive (CEO) – NHS Haringey) and Eleanor Brazil (L.B. Deputy Director – Children’s Services) in response to concerns about the Health Service and the safeguarding of children raised by the Overview & Scrutiny Committee.</p> <p>It was noted that there was a national shortage of Health Visitors but Haringey’s Health Visiting Service experienced less staff turnover than neighbouring boroughs. The national average was for a Health Visitor to be working with approximately 600 children each but in Haringey it is decreasing towards the London average of 479 Health Visitors. The Committee requested individual data on the number of children per Health Visitor in neighbouring boroughs.</p>	

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The Committee was advised that the Health Service would consider different models of care and offer improved financial packages to encourage the recruitment of Health Visitors.

The Committee expressed concern about the suspension of the universal service and asked how the Health Service would ensure children/parents requiring support did not go unnoticed. The Committee noted that a full assessment into safeguarding had been completed before the decision (taken by Great Ormond Street hospital management team) had been made to suspend an element of universal services and provide services through a different model ensuring Health Visitor checks at birth and again at 2 years old, which would be in use from April 2010. The new model would prioritise resources for families requiring regular support. A hotline for worried families who were not receiving regular support was available and well utilised and further services were accessible to all.

The Committee expressed concerns that families, particularly those from hard to reach groups, might not necessarily phone the hotline and follow-up visits to all families by fully trained Health Visitors was vital. It was noted that a range of services would still be available through partner agencies such as GPs and Children Centres and there was evidence that families did utilise these services; the new model would enable better intervention from all responsible agencies.

The Committee asked that the Council's formal response to the suspension of universal services and the new Health Visitor model be provided to the Councillor Newton, Lead OSC Member for Children's Services, and the new model be brought to the Committee at a future meeting.

The Committee asked that further information be provided on whether NHS Haringey conducted follow-up checks on 8-month old children.

Concern was raised regarding the educational psychologist service provided by the local authority. The Deputy CEO informed the committee that clinical psychology was part of the new model of health visiting and provided support to families with mental health issues and where children's behaviour caused concern.

Current posters, showing where children's services and other professionals would get involved in child protection, displayed by NHS Haringey would be circulated to Committee Members.

The Committee noted the deputation by Sue Hessel on behalf of Haringey Federation of Residents' Associations Vulnerable Groups, including:

- Concern that the Service will rely on self-referrals and that there will be an absence of fully qualified Health visitors at baby weighing clinics.
- All new mothers should have a trusting relationship with a qualified Health Visitor.

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	<ul style="list-style-type: none">• Targeting only “at risk” families could cause stigma to be attached to health visiting.
OSCO09.	NEW ITEMS OF URGENT BUSINESS There were no such items.
OSCO10.	FUTURE MEETINGS Monday 15 th February 2010 Monday 8 th March 2010

The meeting ended at 20:00 hrs

COUNCILLOR GIDEON BULL

Chair

Councillor

Chair

SIGNED AT MEETING.....DAY

OF.....