

Report for: Overview and Scrutiny Committee – 21 February 2022

Title: Whittington Health – Process for Consideration of Establishment of Wood Green Hub

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Ward(s) affected: N/A

**Report for Key/
Non-Key Decision:** N/A

1. Describe the issue under consideration

1.1 This report outlines the process and procedures, as outlined in the Health Scrutiny guidance, for considering proposed changes to NHS health services provided by Whittington Health. It proposes the creation of a new central Haringey health hub, based in Wood Green.

2. Cabinet Member Introduction

N/A

3. Recommendations

- 3.1 That the process for considering proposed changes to local NHS services, as outlined in the Health Scrutiny guidelines, be noted;
- 3.2 That the Committee concurs with the view of NHS commissioners that the proposals are substantial in nature and require formal consultation;
- 3.3 That the Committee comment on the proposals by NHS commissioners for consultation with the public and patients on the proposed changes; and
- 3.4 That development of a formal response to the proposed changes to services by Whittington Health on behalf of Overview and Scrutiny be referred to the Adults and Health Scrutiny Panel for consideration after the forthcoming local government elections.

4. Reasons for decision

4.1 The decision is required to ensure that the Committee is able to respond proportionately and effectively to the change proposals by Whittington Health

5. Alternative options considered

N/A

6. Background information

- 6.1 The Committee has been approached by Whittington Health regarding proposed changes to the NHS services that they currently provide within Haringey. The main part of these involves transferring several services currently provided at the Bounds Green and Stuart Crescent health centres and at St Ann's Hospital to a new site in Wood Green Shopping City.
- 6.2 There is a requirement that any proposed changes to NHS services are the subject to the involvement and engagement with patients and the public by NHS bodies, including health overview and scrutiny committees. The process for engagement with local authority health overview and scrutiny committees is outlined in the Department of Health Local Authority Health Scrutiny guidelines.
- 6.3 At this stage, the key issue within this relating to the current proposals is the level of involvement and engagement that is proportionate and appropriate. Chapter Four of the Health Scrutiny guidelines covers the process for consideration of substantial proposals, where formal consultation is required. The legislation on which the guidelines are based does not define what constitutes "substantial" though and it is left as a matter to be determined between HOSCs and health commissioners.
- 6.4 When considering whether formal consultation is necessary, a number of factors have typically been considered:
- (a). Changes in the accessibility of services;
 - (b). Impact of the service on the wider community and other services, including economic impact, transport and regeneration;
 - (c). The number of patients affected. Changes may affect the whole population of a geographical area or a small group. If a change affects a small group of patients it may still be considered "substantial", especially if patients need to continue to access the service for many years;
 - (d). Methods of service delivery, e.g. moving a particular service into a community setting from an acute hospital setting.
- 6.5 Whether a proposal is likely to be contentious is also commonly a factor in deciding the level of involvement and engagement that is appropriate. The guidance suggests that HOSCs and NHS bodies may wish develop protocols or memoranda of understanding for deciding what constitutes a "substantial" development or variation. However, it would be difficult to develop a conclusive definition due to the large number of variables involved. NHS commissioners have indicated that they believe that the current proposals are substantial in nature.
- 6.6 Where formal consultation takes place, this is undertaken by NHS commissioners rather than providers. Timescales for the consultation must be provided by NHS commissioners to HOSCs when consultations take place. Cabinet Office guidelines previously suggested that consultations should last 12 weeks. They no longer specify a specific length but instead say that they should last for a proportionate amount of time.

- 6.7 Probably the most important characteristic of consultations for HOSCs is that they provide them with the power to refer a proposed substantial development or variation to the Secretary of State if:
- They are not satisfied with the adequacy of content of the consultation (*n.b. this refers to consultation with the HOSC*);
 - They are not satisfied that sufficient time has been allowed for consultation.
 - They consider that the proposal would not be in the interests of the health service in the area; and
 - They have not been consulted and are not satisfied that the reasons given for not carrying out consultation are adequate.
- 6.8 Where a referral is made to the Secretary of State, it is normally referred by him/her to a body called the Independent Reconfiguration Panel (IRP) who consider the issue in detail and report back with recommendations.
- 6.9 The consultation on the establishment of the Wood Green hub is scheduled to begin later this month (February) and continue until after the forthcoming local government elections. There will not be enough time for the Committee to consider fully the substance of the proposals and respond to the consultation before the pre-election period begins on 21 March. The Committee will also wish to receive the outcome of the public consultation process, which will only be available after the elections, before finalising its response. It is therefore proposed that overview and scrutiny waits to consider the proposals in detail until after the local government elections have taken place. It is proposed that the Adults and Health Scrutiny Panel consider the proposals in detail before reporting back to the Committee as health issues come within its terms of reference.
- 6.10 In considering a response to the proposals, it is not the responsibility of HOSCs to undertake the engagement, involvement or consultation on behalf of NHS bodies. NHS bodies are expected to do this separately. However, the Panel will still need to receive evidence from a range of sources in order that it is able to develop an informed and balanced response to the proposals. It is suggested that, amongst others, the following be invited to provide evidence:
- Key stakeholders, including partners; and
 - Representatives of patients and the public, such as Haringey Healthwatch
- 6.11 One of the main statutory functions of Healthwatch is to obtain the views of people about their needs and experience of local health and social care services and make these views known to those involved in the commissioning and scrutiny of services. It is proposed by Whittington Health that Haringey Healthwatch act as independent evaluators for the consultation. They undertook the same role in the consultation by Whittington Health on Estates Improvements for Community Health Services in Haringey in 2021. At that time, they felt that their role in the consultation meant that they were unable to assist with providing feedback on the views of local people on the proposals as this would constitute a conflict of interest. The Committee may wish to establish at this stage whether a similar line is likely to be taken by them on this consultation.

7. Contribution to strategic outcomes

- 7.1 This issue is strongly linked to the follow outcomes under the People priority:
- Best start in life: the first few years of every child's life will give them the long-term foundations to thrive;
 - Happy childhood: all children across the borough will be happy and healthy as they grow up, feeling safe and secure in their family, networks and communities; and
 - All adults are able to live healthy and fulfilling lives, with dignity, staying active and connected in their communities.

8. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)

Finance

8.1 N/A

Procurement

8.2 N/A

Legal

8.3 The Committee is responsible for the review and scrutiny of health services related matters within the borough. The Committee may appoint one or more sub-committees to discharge any of its functions.

8.4 Regulation 23 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 provides that where the responsible person (i.e. NHS body) has under consideration any proposal for a substantial development of the health service in the area of a local authority, or for a substantial variation in the provision of such service, the responsible person must a) consult the authority; b) when consulting, provide the authority with - i) the proposed date by which it intends to make a decision as to whether to proceed with the proposal; and ii) the date by which it requires the authority to provide any comments; c) inform the authority of any change to the dates provided; and d) publish those dates, including any change to those dates.

8.4 The duty to consult do not apply to any proposals on which responsible person is satisfied that a decision has to be taken without allowing time for consultation because of a risk to safety or welfare of patients or staff. If so, it must notify the authority immediately of the decision taken and the reason why no consultation has taken place.

Equality

8.5 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:

- Tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil

partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;

- Advance equality of opportunity between people who share those protected characteristics and people who do not;
- Foster good relations between people who share those characteristics and people who do not.

8.6 The Committee should ensure that it addresses these duties by considering them within this piece of work. This should include considering and clearly stating;

- How the issue impacts on different groups within the community, particularly those that share the nine protected characteristics;
- Whether the impact on particular groups is fair and proportionate;
- Whether there is equality of access to services and fair representation of all groups within Haringey;
- Whether any positive opportunities to advance equality of opportunity and/or good relations between people, are being realised.

8.7 The Committee should ensure equalities comments are based on evidence. Wherever possible this should include demographic and service level data and evidence of residents/service users views gathered through consultation.

9. Use of Appendices

Appendix A: Local Authority Health Scrutiny – Department of Health

10. Local Government (Access to Information) Act 1985