

**MINUTES OF THE OVERVIEW AND SCRUTINY COMMITTEE  
MONDAY, 20 FEBRUARY 2012**

**Present:** Councillor Gideon Bull, (Chair), Councillor Karen Alexander, Councillor David Browne, Councillor Isidoros Diakides, Councillor Joseph Ejiofor, Mariatta Ezeji (Parent Governor rep) Helena Kania (LINK rep), Councillor David Winskill (Vice-Chair).

**Also Present:** Xanthe Barker, Councillor John Bevan, Councillor Zena Brabazon, Marc Dorfman, Siobhan Harrington, Dr. Helen Pelendrides, Melanie Ponomarenko, Jill Shattock, Fiona Smith, Andrew Wright.

<b>MINUTE NO.</b>	<b>SUBJECT/DECISION</b>
<b>OSCO103.</b>	<b>WEBCASTING</b>  This meeting was not web cast on this occasion.
<b>OSCO104.</b>	<b>APOLOGIES FOR ABSENCE</b>  Apologies for absence were received from the following:  Councillor Joanna Christophides Yvonne Denny (Church of England rep)
<b>OSCO105.</b>	<b>URGENT BUSINESS</b>  As this was a special meeting items of Urgent Business were not considered.
<b>OSCO106.</b>	<b>DECLARATIONS OF INTEREST</b>  No declarations of interest were made.
<b>OSCO107.</b>	<b>DEPUTATIONS/PETITIONS/PRESENTATIONS/QUESTIONS</b>  Mr Mario Petrou, Chair of the 'Save St Ann's Hospital Campaign Group, addressed the Committee and expressed his concerns with regard to the draft Health Infrastructure Plan discussed under OSCO108 below.  Mr Petrou contended that the document should be subject to public consultation on the basis that it contained proposals for the provision of future public services. Mr Petrou also suggested that the statistical data the document drew on was flawed and that statements within it were misleading and inaccurate and he noted that Manor House Underground Station and St Luke's Hospital had been omitted from maps included in the HIP.  The Chair thanked Mr Petrou for his presentation and requested that Manor House Underground Station and St Luke's Hospital were referred to within the document.
<b>OSCO108.</b>	<b>DRAFT HEALTH INFRASTRUCTURE PLAN</b>  The Committee received the draft Health Infrastructure Plan (HIP) for the St

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Ann's site. Representatives from NHS North Central London (NHS NCL), Barnet Enfield and Haringey Mental Health Trust (BEH MHT) and the Council were present to take questions from the Committee and to provide an overview of the report.

It was noted that the draft HIP provided a vision for health infrastructure in the Borough for the next fifteen years. In developing the plan, key public sector health providers had been brought together to map out where health services would be delivered from and how this would relate to service quality and health outcomes in the future. The plan included analyse of existing and planned services and a summary of planned infrastructure, including when and where these might be located.

It was clarified that the HIP was a supporting document to the Haringey Community Infrastructure Plan, and that it had no statutory status.

The Committee put questions officers from the three public sector organisations involved in drafting the document and during discussion the following points were made:

- The terminology used with regard the Hornsey Medical Centre was not consistent throughout the document and it was requested that this was amended in order to avoid confusion.
- The Committee was advised that guidance was awaited from the Department of Health (DH) regarding the governance arrangements for LIFT schemes and it was requested that once this became available a briefing note was circulated to the Committee.
- At present the document did not make provision for the impact that the cap in Housing Benefit (and the likely rise in the number of vulnerable families moving into the Borough as a result of this) would have upon health services. It was requested that this was addressed and reflected in the document. This would also require ongoing monitoring and evaluation in future iterations of the document.
- It was noted that arrangements for the monitoring of the document had not been finalised as yet and the Chair requested that the Committee was kept informed of plans with regard to this. The Chair also noted that it would be important that the Committee played a role in reviewing the document in the future and suggested that a mechanism to facilitate this was built into the review process.
- There was a general consensus that ensuring that health services and public transport were aligned was vital to ensuring that all residents were able to access the appropriate services. It was agreed that officers should include a Public Transport Accessibility Level (PTAL) report within the document and that the document should be shared with Transport for London (TfL).
- It was queried whether any financial analysis had been undertaken to assess how the north east of the Borough might benefit from the inclusion

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of a Health Centre within the Spurs scheme. It was requested that a briefing note was supplied to the Committee outlining how this might be used to improve the standard of GPs services in Tottenham.

- It was noted that it was difficult for the Committee to gauge the performance of GPs performance without statistical information and it was requested that NHS NCL supplied statistical information that would allow the Committee to compare performance in the east and west of the Borough.
- It was noted that the document was worded in such a way that it assumed that the service currently offered by the Laurels would continue to be provided in its present form and it was requested that the document was amended to reflect this.
- It was requested that Borough boundaries (and the fact that there was not a hospital within the Borough) were not referred to as it immediately set a negative tone, which was provocative and unhelpful. Instead reference should be made to the fact that Haringey residents were able to access two major local hospitals.
- With reference to page 36 of the document it was noted that 'reducing deprivation' was referred as being the key to reducing the number of emergency admissions and the associated costs; however, it was contended that identifying ways of improving people's understanding of the services on offer and encouraging them to access the most appropriate services, should be focussed on. It was requested that the document was amended to reflect this.
- It was requested that buildings, which were not fit for purpose, were referred and it was contended that several of the Victorian buildings within the St Ann's site fell into this category. It was also suggested that reference should be made to the need to demolish and replace buildings that were not fit for purpose.
- It was requested that reference was made to the Royal Free and how its use by residents living in the west of Borough affected the way services were accessed in Haringey.
- It was noted that the transient nature of Haringey's population was an important characteristic of the Borough and it was requested that reference to how this characteristic would be addressed was included within the document.
- With reference to page 46 of the report a financial calculation based on £400 per square metre was referred to and this appeared to be inconsistent with other figures reached on the same page specifically with reference to the £12m for St Ann's. Clarification was requested with regard to this.
- It was requested that a briefing note was provided to the Committee setting out what the process would be for the transferral of estates and

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	<p>the sale of property and land owned by NHS Haringey.</p> <ul style="list-style-type: none"><li>➤ It was noted that the Council had agreed that the services offered from Children's Centres would be reconfigured in the light of reduced funding. However, the document was based on the assumption that the services offered by the Children's Centres would continue on the current basis. It was requested that NHS NCL liaised with the Council's Children and Young People's Service to assess the impact of this.</li><li>➤ It was noted that pharmacies had a key role to play in providing support to primary care and it was requested that a list of all of the pharmacies in the Borough was included within the document and circulated to the Committee. It was also requested that this should illustrate where pharmacies offered extended services and how pharmacies issuing health appliances would store this equipment.</li><li>➤ It was noted that several significant developments in the east of the Borough, where provision had been secured for health services through Section 106 Agreements, had not come to fruition. Given this it was requested that the Committee was provided with an overview of how NHS Haringey would use its influence to encourage GPs and dentists to set up practices in the areas of most need.</li></ul> <p>Throughout discussion members of the Committee expressed their frustration at the lack of authority that the Council and NHS Haringey had to compel GPs and dentists to establish practices in the east of the Borough. There was agreement that the disparity between the level and quality of services available in the east of the Borough in comparison with the west of the Borough and the health inequalities that this presented needed to be addressed effectively through long term strategic planning. Consequently this was a key document that the Committee should play a role in monitoring moving forward.</p> <p><b>RESOLVED:</b></p> <ul style="list-style-type: none"><li>i. That that a further iteration of the document should be drafted taking into account the points made by the Committee (as set out above).</li><li>ii. That the additional information requested by the Committee (as set out above) should be provided following the meeting.</li><li>iii. That the Committee should be advised of any proposed arrangements for formally reviewing the document.</li></ul>
<b>OSCO109.</b>	<p><b>GP CONSORTIA UPDATE</b></p> <p>The Committee discussed funding arrangements for the Clinical Commissioning Groups (CCGs) and it was noted that neither the CCGs nor NHS Haringey had been notified of the budget that would be allocated as yet. It was requested that this information was supplied to the Committee as soon as it became available.</p> <p>Following discussion with regard to how the membership of the CCGs had been determined the Committee noted that the CCG was operating in shadow from at present and that its membership would be reviewed before it became a statutory body.</p>

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	<p>It was noted that LINKS formally represented patient groups and it was suggested that representatives should be drawn from LINKS rather than organisations that were not elected or formally constituted. The Committee requested that it was informed of any future review of the CCG's membership and guidelines with respect to membership issued by the DH, It was also requested that the CCGs terms of reference were circulated to the Committee.</p> <p><b>RESOLVED:</b></p> <ul style="list-style-type: none"><li>i. That the verbal update provided with respect to the CCG be noted.</li><li>ii. That the CCG's terms of reference should be supplied to the Committee.</li><li>iii. That the Committee should be advised of any changes made to the membership of the CCG.</li></ul>
<p><b>OSCO110.</b></p>	<p><b>THE LAURELS</b></p> <p>The Committee received a report that provided an update with regard to the Laurels and the arrangements being made to provide a caretaker practice whilst a permanent a provider was found.</p> <p>It was noted that there had been historical difficulties in retaining GP practices at the Laurels. There was agreement that the shared practice arrangement had led to a general lack of coordination and an overall sense that there was no single organisation or body that was ultimately responsible or accountable for the services provided. This lack of accountability also applied to the management of the building itself.</p> <p>In response to suggestions that the other GP practice currently operating from the Laurels should be invited to tender for the contract, on the basis that this would provide a more consistent service and greater accountability, the Committee was advised that NHS NCL was obliged to offer all GP practices in the Borough the opportunity to tender for this. Details of the tenders received could not be shared with the Committee at this point.</p> <p>There was agreement that it was important to identify why the Bridge House Medical practice had chosen to withdraw from the Laurels; however, the Committee was advised that this was difficult as providers were not required to give reasons for their decision to withdraw.</p> <p>During discussion Ward Members noted that they had received complaints from residents regarding both the standard of the services offered by the Laurels and the condition of the building.</p> <p>The Committee was in agreement that the Chair should write to the Bridge House Medical Practice to see if it was willing to provide an explanation as to why it no longer wished to operate the service. It was also agreed that the Chair should write to Whittington Health raising concerns with regard to the condition of the building and requesting an overview of the action that it intended to take to improve this.</p> <p><b>RESOLVED:</b></p>

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	<ul style="list-style-type: none"> <li>i. That the update provided with regard to The Laurels be noted.</li> <li>ii. That the Chair should write to the Bridge House Medical Practice and Whittington Health, as set out above.</li> </ul>
<p><b>OSCO111.</b></p>	<p><b>UPDATE FROM WHITTINGTON HEALTH</b></p> <p>The Committee received a report that provided an update with regard to Whittington Health’s (WH) application for foundation trust status.</p> <p>As an Integrated Care Organisation (ICO) WH provided a range of hospital and community services in Islington and Haringey. Work was being undertaken with GPs to develop integrated services and nine pilot projects were being carried out in the North East of Haringey to establish multidisciplinary working.</p> <p>It was noted that modernising its IT infrastructure would be a key area of focus in terms of improving efficiency and the services offered to patients. It was envisaged that all patient records would be electronic by the end of the year and targeted work was being undertaken with GPs to prepare for this transition.</p> <p>The Committee was advised that the Whittington Board was looking at a report on estate management during the following week and that this report was publicly available. The strategy would include reducing the office space required by moving towards ‘smart working’ whereby staff would not have a fixed desk.</p> <p>The Committee noted the request that it formally express its support for Whittington Heath’s application for Foundation Trust status. Whilst the Committee was not unanimous in its support of the principal of moving to Foundation Trust status, there was a general consensus that it supported Whittington Health, as the local provider, in its application and that it was preferable that a provider with a strong local focus to manage the services operated by the Whittington Hospital, as opposed to an organisation without this local knowledge.</p> <p>On this basis there was agreement that the Chair should write to Whittington Health expressing the Committee’s support for its application.</p> <p><b>RESOLVED:</b></p> <ul style="list-style-type: none"> <li>i. That the update provided with respect to Whittington Health’s application for Foundation Trust status be noted.</li> <li>ii. That that the Chair should write to Whittington Health expressing the Committee’s support for its application for Foundation Trust status as set out above.</li> </ul>
<p><b>OSCO112.</b></p>	<p><b>REGISTERED HOUSING PROVIDERS SCRUTINY REVIEW</b></p> <p>The Committee received a report setting out the recommendations and findings of the Scrutiny Review of Registered Housing Providers, which was recommended for approval prior to consideration by Cabinet on 20 March.</p> <p>In response to a query as to whether the review panel had looked at under</p>

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	<p>occupation and how this might be addressed through partnership working, the Committee was advised that this had not been specifically addressed within the review. However, the Housing Service recognised the importance of partnership working and to facilitate this a forum (replacing the Integrated Housing Board) had recently been established and every Registered Housing Provider (RHP) operating in the Borough was invited to attend this on a quarterly basis.</p> <p>The Committee was advised that RHPs were registered with and monitored by the Tenant Services Authority (TSA) and this meant that they were then able to obtain nomination rights.</p> <p>The Cabinet Member for Housing thanked the members of the Committee that had participated in the review for their work and noted that he would endorse the recommendations made when it was received by Cabinet on 20 March.</p> <p><b>RESOLVED:</b></p> <p>That the Scrutiny Review of Registered Housing Providers and its recommendations be submitted to Cabinet on 20 March.</p>
<b>OSCO113.</b>	<b>FUTURE MEETINGS</b>  The Council's calendar of meetings for the new Municipal Year had not been confirmed as yet. Once this had been agreed the Committee would be advised.

The meeting closed at 8.55pm.

COUNCILLOR GIDEON BULL

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Chair