



Haringey Council

Agenda item:

Overview and Scrutiny Committee

[No 1]
On 22 October 2007

Report Title: **Healthcare for London: A Framework for Action – Consultation by NHS London/Establishment of Joint Overview and Scrutiny Committee**

Forward Plan reference number (if applicable): N/A

Report of: Chair of Overview and Scrutiny Committee

Wards(s) affected: **All**

Report for: **N/A**

1. Purpose

- 1.1 To report on the consultation process for the Healthcare for London: A Framework for Action report by NHS London and to agree, in principle, to Haringey's participation in a Joint Overview and Scrutiny Committee to look at the report in detail.

2. Introduction by Cabinet Member (if necessary)

- 2.1 N/A

3. Recommendations

To recommend the following to full Council on 26 November:

- 3.1 That Haringey participate in the proposed London-wide Joint Overview and Scrutiny Committee being established to respond to the consultation document issued by the Joint Committee of PCTs on the models of care outlined in *Healthcare for London: A Framework for Action* by the statutory deadline.
- 3.2 That the Assistant Chief Executive (Policy, Performance, Partnerships and Communication Service) be delegated authority to agree the detailed terms of reference for how the Committee will operate in consultation with the Chair of Overview and Scrutiny Committee but subject to the proposed draft terms of reference being reported to the November Council for Members approval if they are available by then.
- 3.3 That Councillor Gideon Bull be appointed as the representative and Councillor Egan as deputy representative from the London Borough of Haringey to the London Joint Overview and Scrutiny Committee.

3.4 That, in the event of the Council being entitled to two places on the body, officers will report with a recommendation for a further representative to the November Council after consulting the Chair of Overview and Scrutiny Committee.

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4. Local Government (Access to Information) Act 1985

4.1 Background Papers:

The background papers relating to this report are:

Haringey Health Scrutiny Protocols

Healthcare for London: A Framework for Action

These can be obtained from Robert Mack – Principal Scrutiny Support Officer on 020 8489 2921,
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5. Report:

- 5.1 In December 2006, NHS London asked Professor Ara Darzi to carry out a review of London's healthcare. Professor Darzi worked with clinical experts throughout the capital and abroad, held large-scale public engagement events and undertook an opinion survey on the public's perception of London's healthcare to help formulate his recommendations.
- 5.2 His resulting report *Healthcare for London: A Framework for Action* was published on 11 July. It sets out:
- Eight reasons why the status-quo of healthcare in London is unacceptable.
 - How healthcare in London will need to change over the next ten years, driven by demographic changes and technological developments.
 - Common principles for future healthcare services and seven specific clinical areas.
 - Future models for how care should be organised.
 - Some of the drivers that will make the report's recommendations a reality, and the next steps.

- 5.3 NHS London has set up a consultation programme on the models of care and delivery set out in the report. The framework for the consultation is as follows:
- A first-stage pan-London formal consultation on the models of care and delivery models.
 - A second-stage consultation on the application of these models to services in London. This would be subject to the outcome of consultation on the models and would follow on from that consultation. It is likely that second-stage consultations would take place at different levels – pan-London, sector (a cluster of PCTs), or individual PCT – reflecting the nature of changes being proposed.
 - A formal fourteen-week first-stage public consultation period led by PCTs, running from 29 October 2007 through to 1 February 2008 (extended from the twelve week norm because of the holiday period).
- 5.4 A joint committee of London PCT's will be established to lead on the consultation. This will involve:
- Approving the consultation document.
 - Receiving the report on the outcome of consultation and the Health Inequalities Impact Assessment (HIIA) on *A Framework for Action* (the latter to be commissioned).
 - Taking decisions on the models of care and delivery models taking into account the outcome of the first-stage consultation and Health Inequalities Impact Assessment.
- 5.5 NHS London has invited all London Boroughs to consider establishing a Joint Overview and Scrutiny Committee (JOSC) to respond to the consultation. Its role would be:
- (a). To scrutinise the models of care outlined in the Darzi review and decide whether these are in the interests of the health service in London
 - (b). To decide whether the consultation process is adequate
 - (c). To examine the joint committee of London PCT's response to the consultations.
- 5.6 Boroughs will only have the legal power to scrutinise the report as part of the JOSC and not individually.
- 5.7 The large scale changes proposed in the report clearly constitute substantial variations or development to services for all London Boroughs and it is also possible that the changes will also constitute substantial variations or developments to some local authorities outside of London. It is therefore likely that will be a statutory duty for all such local authorities affected to establish and participate in a JOSC. Preliminary discussions have on the setting up of a JOSC have already taken place between NHS London and the London Scrutiny Network (LSN).

- 5.8 Officers from the LSN met on 10 September to discuss the issue. It should be noted that the LSN is an advisory body only and it is the individual OSCs within each Borough that will make the decision on any joint working. 29 Boroughs attended the meeting. In the discussion that took place, the invitation to set up a JOSC was broadly welcomed. However, some reservations were raised about the practical and logistical implications of individual boroughs OSCs/Councils agreeing to the setting up of a Joint Health Overview and Scrutiny Committee (JOSC) and how and at what stage scrutiny could best add value to the consultation. Setting up such a body and ensuring that it functions effectively is likely to be challenging, not least because of the potential size of the JOSC.
- 5.9 However, the principles outlined within the report will have far-reaching consequences for NHS services in the capital and only the first-stage consultation will provide an opportunity for comment and discussion on the models as a whole. The purpose and nature of the stage one consultation will be to seek views on the models of care (maternity and newborn care, staying healthy, mental health, acute care, planned care, long-term conditions, end-of-life care) and of delivery (home, polyclinic, local hospital, elective centre, major acute hospital, specialist hospital), as set out in the report.
- 5.10 Later consultations will focus on the application of particular models in particular parts of London and will happen to different timescales. They will not, therefore, deliver an informed discussion about the models and how they fit together. Later consultations will also build on the first-stage decisions. The practical effect of this is that where decisions are taken on models at the end of the stage one consultation there will not be an opportunity to reopen those decisions subsequently.
- 5.11 A decision not to take part in the JOSC will therefore entail foregoing an input into decisions that may have considerable long term implications on Haringey and whose impact will be reflected in future changes to local services. A number of Boroughs have already indicated that they wish to participate in the JOSC and, although a large number still have to make a decision, it appears likely that a significant proportion will eventually take part.
- 5.12 It is therefore recommended that Haringey agree to participate in the JOSC. Due to the large number of local authorities potentially involved, representation is likely to be limited to one per Borough and it is therefore recommended that the Chair be appointed as Haringey's representative.
- 5.13 Due to the tight timescale involved, it may not be possible to get the approval of full Council to the terms of reference for the JOSC, as required within the Constitution, before the work of the JOSC begins. It is therefore recommended that the power to agree this be delegated to officers in consultation with the Chair of Overview and Scrutiny Committee. However, if the draft terms of reference are ready by mid-November, they would be reported to the 26 November full Council for Members' approval.
- 5.14 The rules on political balance apply to the appointment of representatives to the JOSC but the Minority Group would only have an entitlement to a place in the event of each Borough being allocated three places, which at this stage appears very unlikely. In the event of two or more places per Borough being allowed, a further report would be made to full Council to appoint additional representative(s) after consultation with the Chair.

6. Equalities Implications

The JOSOC will, as part of its work, need to consider carefully the equalities implications of the proposals within the Darzi report and, in particular, the Equalities impact Assessment undertaken by the Joint Committee of PCTs.

7. Consultation

The JOSOC will also wish, as part of their consideration, to satisfy themselves that the PCTs have consulted appropriately with relatives and stakeholders.

8. Comments of the Head of Legal Services

The legal and constitutional implications have been included in the body of the report.