

## **HEALTH OVERVIEW AND SCRUTINY SUB-COMMITTEE ANNUAL REPORT 2014/15**

### **INTRODUCTION**

This report is the annual report of the Sub-Committee, summarising the Sub-Committee's activities during its year of operation ended May 2015.

It is planned for this report to stand as a public record of achievement for the year and enable Members and others to have a record of the Committee's activities and performance.

### **SUB-COMMITTEE MEMBERSHIP**

Councillor Nic Dodin (Chairman)  
Councillor Dilip Patel (Vice-Chair)  
Councillor Gillian Ford  
Councillor Jason Frost  
Councillor Patricia Rumble

### **WORK UNDERTAKEN**

During the year under review, the Sub-Committee dealt with the following issues:

#### **1. QUEEN'S HOSPITAL AND RELATED ISSUES**

- 1.1 Throughout the year, the Sub-Committee has sought to keep as a priority scrutiny of the performance of Queen's Hospital and of Barking, Havering and Redbridge University Hospitals' NHS Trust (BHRUT) in particular. Meetings and discussions with the Trust chief executive and other senior officers have been held throughout the year.
- 1.2 Care Quality Commission (CQC) Report and Trust Special Measures – Following a CQC report that was highly critical of aspects of performance at BHRUT and the Trust being placed in special measures following this, the Sub-Committee scrutinised as a matter of urgency the Trust improvement plan. BHRUT officers explained that the improvement plan covered areas such as the emergency care pathway, workforce issues, clinical governance and the leadership of the organisation as a whole. In order to gain a more detailed understanding of the issues facing the Trust, the Sub-Committee

also undertook a site visit to Queen's Hospital in January 2015. This proved a valuable opportunity for Members to view the elderly and general surgery wards and hold discussions with hospital staff.

- 1.3 BHRUT PALS – Officers from the BHRUT Patient Advice and Liaison Service (PALS) explained the service's role to the Sub-Committee. Members discussed the details of how the service sought to support patients and issues such as the difficulty patients often encountered in contacting the PALS service itself.
- 1.4 Patient Flows – The Sub-Committee also heard from the BHRUT chief executive on his plans to improve patient flows at Queen's Hospital. The performance of the hospital during the winter peak period was scrutinised as were initiatives such as the introduction of a Majors Lite section to speed up admissions and improvements to the system of dispensing medication on discharge.
- 1.5 Cardiac Centre, Barts Hospital – Whilst most services provided by Barts Heath NHS Trust are rarely used by Havering residents, the Trust does treat many victims of heart attacks from this borough. As such, the Sub-Committee held a useful visit in August 2014 to the new cardiac centre at Barts Hospital. Members toured this facility which would take over from the existing London Chest Hospital. Members were impressed overall with the new facilities although disappointed that little planning appeared to have taken place to consider the needs of patients with dementia.

## **2. INTERMEDIATE CARE**

- 2.1 The Sub-Committee noted at several points during the year the success of pilots of two new services for Havering – the Community Treatment Team and Intensive Rehabilitation Service. Both services were designed to offer treatment close to or in people's and reduce the need for hospital admission. The Sub-Committee was pleased to be advised that these services were likely to be established permanently in Havering from August 2015.

## **3. PUBLIC HEALTH**

- 3.1 The Sub-Committee scrutinised on three occasions this year the services provided by the Council following its receipt of new powers and responsibilities under the Public Health remit. Discussions with the Interim Director of Public Health covered the Council's role in areas such as oral health, immunisations, flu vaccines and sexual health services. It was noted that the Public Health team worked closely with BHRUT and Havering Clinical Commissioning Group (CCG) in order to provide effective services.

#### **4. BREAST CARE SERVICES**

- 4.1 Officers presented to the Sub-Committee details of proposals to transfer breast care services from the Victoria Centre in Romford to King George Hospital. Following a visit to the Victoria site, Members concluded that Havering residents would gain from using the more modern facilities at King George Hospital and therefore agreed that the proposals did not require formal consultation.

#### **5. ST GEORGE'S HOSPITAL**

- 5.1 The future of the St George's Hospital site in Hornchurch has continued to be a focus of the Committee's work throughout the year. Discussions have been held regularly with senior officers from Havering CCG who lead on the project. Members have expressed disappointment at the lack of detailed information in the plans presented and will continue to scrutinise the proposals as they develop. Towards the end of the period under review, the Sub-Committee was pleased to note that the CCG had approved an outline business case for the site and that this was now under consideration by NHS England.

#### **6. PRIMARY CARE TRANSFORMATION PROGRAMME**

- 6.1 CCG and GP Federation officers have updated the Sub-Committee on changes during the year to primary care services. The Sub-Committee has been pleased to note during the year the establishment of GP access hubs (now operated by the GP Federation) allowing access to GP appointments at weekends and in the evenings. The Sub-Committee was also supportive of the Complex Care 1,000 project whereby the 1,000 people with the highest number of long term conditions would be treated by a dedicated GP and practice nursing team. It was hoped that this would reduce the amount of hospital admissions required by people requiring the most complex levels of primary care.

#### **7. MENTAL HEALTH SERVICES**

- 7.1 The work of the North East London NHS Foundation Trust (NELFT) has continued to be scrutinised throughout the year, including services provided for children and adolescents (see below). Representatives from Havering MIND also attended the Sub-Committee in order to discuss a recent change in commissioning of employment services that were now provided by another organisation.

## **8. CARE ACT**

- 8.1 In light of the close interrelationship between health and social care services, a senior social care officer briefed the Sub-Committee on the requirements of the Care Act being introduced from April 2015 and the impact of this on both the Council and on care facilities within Havering.

## **9. HEALTHWATCH HAVERING**

- 9.1 The Committee has continued throughout the year to enjoy a productive working relationship with Healthwatch Havering. Healthwatch has been offered regular agenda slots and a member of the organisation is present and permitted to ask questions at each meeting of the Sub-Committee.
- 9.2 Healthwatch Havering presented to the Committee on a number of issues during the year. These included the organisation's annual report and a summary of the work it had undertaken around dementia and learning disabilities. The Sub-Committee also scrutinised visits Healthwatch had undertaken to local facilities using its enter and view powers and heard details of a consultation that Healthwatch had undertaken on GP access, in conjunction with the GP Federation.

## **10. JOINT WORKING WITH CHILDREN AND LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE**

- 10.1 The Sub-Committee has on two occasions during the year under review (September and February) met jointly with the Children and Learning Overview & Scrutiny Sub-Committee in order to scrutinise matters relating to children's health. This included consideration of a number of issues such as healthy weight/reduction initiatives whereby the interim director of public health explained measures run by the Council such as walk to school schemes, school catering projects and the promotion of the use of Havering parks.
- 10.2 Children's health – Other issues scrutinised by the Sub-Committees relating to Children's Health included the immunisation programme and the role played by school nurses.
- 10.3 Children's mental health services – Officers from NELFT explained to the Sub-Committees the range of child and adolescent mental health services available. It was noted that demand for these services had increased and Members felt that advertising and communication around these types of services could be improved. In conjunction with the children and learning overview & scrutiny sub-committee, Members undertook a visit in April 2015 to the new NELFT Acorns Centre in Romford. Members toured the new

building which offered a range of children's health services including speech and occupational therapy, physiotherapy and child & adolescent mental health services. Members held discussions with medical staff at the site who explained that they were pleased to be able to make use of the new facilities.

## **11. OUTER NORTH EAST LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE**

- 11.1 Councillors Dodin, Ford and Patel represented the Sub-Committee on the Joint Health Overview and Scrutiny Committee covering Outer North East London (ONEL). Working in conjunction with Councillors from Barking & Dagenham, Essex, Redbridge and Waltham Forest, this has allowed scrutiny of health services issues affecting more than one Council area. The following areas were considered at joint level.
- 11.2 Urgent Care Procurement – CCG officers explained to the Joint Committee the details of a programme to commission a single provider of urgent care across the ONEL boroughs. This programme has since been paused and is expected to restart with a conference of relevant stakeholders in June 2015.
- 11.3 GP Issues – The Joint Committee was joined in October by a representative of NHS England who explained the organisation's role in commissioning GP services. Features of the new GP contract were also discussed and Members raised concerns over access to GPs and difficulty obtaining appointments etc.
- 11.4 Great Ormond Street Hospital for Children NHS Trust – For the first time, the Joint Committee scrutinised services provided by Great Ormond Street Hospital. Considerable numbers of admissions to the hospital were received from each of the ONEL boroughs and the Joint Committee held useful discussions with the director of planning and information at the Trust. The Joint Committee was concerned to hear that Great Ormond Street was likely to lose out financially under changes to arrangements for specialised NHS commissioning and has written to NHS England expressing this view.
- 11.5 Maternity Services – In January, the Joint Committee undertook detailed scrutiny of maternity services at both BHRUT and Whipps Cross Hospital. Issues of maternity staffing at local hospitals were considered and the Joint Committee also agreed that joint working should be encouraged to develop breast feeding. The Joint Committee also agreed its support for a bid for funding to increase maternity consultant cover at Whipps Cross.
- 11.6 NHS 111 – Officers from the Partnership of East London Cooperatives – the provider of the NHS 111 service met with the Committee and discussed issues such as response times to calls to the service and the relationship between NHS 111 and commissioners.

11.7 Barts Health/Whipps Cross Hospital – Following the recent publication by the Care Quality Commission of a negative report on aspects of services at Whipps Cross Hospital, the Joint Committee scrutinised the Trust’s improvement plan with senior Barts Health officers including the Chief Executive and Medical Director. At the same meeting, discussions were also held with officers from the Care Quality Commission on their inspection process and relationship with scrutiny.

## **IMPLICATIONS AND RISKS**

### **Financial implications and risks:**

None – narrative report only.

### **Legal implications and risks:**

None – narrative report only.

### **Human Resources implications and risks:**

None – narrative report only.

### **Equalities implications and risks:**

While health issues and the work of the Committee can impact on all members of the community, there are no implications arising from this specific report which is a narrative of the Committee’s work over the past year.

## **BACKGROUND PAPERS**

Minutes of meetings of Health Overview and Scrutiny Sub-Committee and ONEL Joint Health Overview and Scrutiny Committee 2014/15.