

HEALTH SCRUTINY SUB-COMMITTEE

Minutes of the meeting held at 4.30 pm on 4 November 2015

Present:

Councillor Judi Ellis (Chairman)
Councillor Pauline Tunnicliffe (Vice-Chairman)
Councillors Ruth Bennett, Mary Cooke, Ian Dunn,
David Jefferys, Terence Nathan and
Charles Rideout QPM CVO

Also Present:

Councillor Robert Evans, Portfolio Holder for Care
Services
Councillor Diane Smith, Executive Support Officer to the
Portfolio Holder for Care Services

63 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Councillors Hannah Gray and Stephen Wells, and from Linda Gabriel and Rosalind Luff. Apologies for lateness were received from Councillor David Jefferys.

64 DECLARATIONS OF INTEREST

There were no declarations of interest.

65 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING

No questions had been received.

66 MINUTES OF THE MEETING OF HEALTH SCRUTINY SUB- COMMITTEE HELD ON 11TH JUNE 2015

RESOLVED that the minutes of the meeting held on 11th June 2015 be confirmed.

67 PRUH IMPROVEMENT PLAN - UPDATE FROM KINGS

The Sub-Committee received a presentation from Paul Donahue, Medical Director of the Princess Royal University Hospital (PRUH) and Sally Lingard, Communications Director for Kings College Hospital NHS Foundation Trust. The presentation covered the following –

- King's six point plan for the future - A five year plan had just been delivered to Monitor, and the intention was to move to a more sustainable position.
- An update on Trust performance and finances - There was a huge drive to retain staff and to recruit new staff, especially from abroad. Maximising the Kings brand was a key part of this. There had been a substantial reduction in Bank and Agency staff between April and September 2015. The CQC rating was at the top end of "Requires Improvement" with some areas of excellence. Areas requiring improvement included Medical Records and patient flow through the Emergency Department, although the four hour target performance had improved from 80% in June to 91% in September. Orpington Hospital was receiving very good feedback. The savings target for 2015/16 was £86m; nearly £70m of this had been found, and the Trust was confident that it could find the remainder by the end of the financial year.
- An update on the PRUH – Key themes were improving patient flow through the emergency Department, getting patients in and out of hospital more quickly, In-reach, an acute hub, step-down beds and a transfer of care bureau.

Committee members enquired about contingency plans for a junior doctor's strike. The Trust did have a generic industrial action plan, and more detailed plans were being drawn up at departmental level. They also asked about plans for winter resilience. Dr Angela Bhan, Bromley CCG, reported that joint efforts were being made to reduce time spent on wards and a system governance review was being carried out to identify problems. Measures being taken included joint ward rounds, more assessment at home and providing a small number of discharge to assess beds. It was confirmed that these were on the 1st floor at Orpington Hospital and would not interfere with orthopaedic services on the second floor. Progress was being made on the introduction of computerised records – this was being rolled out over six months and should be completed by May.

The presentation slides would be circulated to Sub-Committee members after the meeting.

68 URGENT CARE SERVICE - UPDATE FROM THE CCG

The Sub-Committee received an update from Dr Angela Bhan on the Urgent Care Service. Two hubs were being set up for the winter period and GPs would be able to book people into these hubs. They would be open 4-8pm weekdays and 8am to 12 noon at weekends. About 70 – 75% of practices already offered extended hours – the hubs would increase this capacity. The hubs were prototypes and if they were not used the service could be scaled

back. Practices were being encouraged to take a more proactive approach to long term conditions.

A Member suggested that patients would benefit from knowing in advance roughly how long they could expect to wait to be seen. This point would be reported back for consideration.

RESOLVED that the update be noted.

**69 UPDATE ON BROMLEY NHS HEALTH CHECKS PROGRAMME
(FUNDED BY NHS S.256 FUND)**

Report CS15932

The report provided an update on two projects supported from monies moved to the Council under a Section 256 Agreement in March 2013. The two projects were –

- To perform evaluation of the NHS Health Check against the Pan-London Standards;
- To improve the diabetes element of the NHS Health Checks by conducting a diabetes prevention audit.

The purpose of the projects was to maximise the effectiveness of the NHS Health Check programme by conducting an evaluation.

Forty one of the forty five GP practices in the borough had participated on the audit (two did not participate because they used different computer systems, and two for other reasons.) The information gathered already provided a good baseline, but it was hoped to include these practices in the next audit.

RESOLVED that the progress made since the previous report in October 2014 be noted.

70 DIABETES PREVENTION INTERVENTION

Report CS15933

The Sub-Committee received an update on the Diabetes Prevention Programme Pilot, which was resourced from the weight management budget previously approved by the Executive in January 2014. The purpose of the project was to evaluate the effectiveness of an intervention to prevent diabetes in Bromley. In addition to the report, the Sub-Committee received a supplementary paper in response to questions submitted by Councillor Ian Dunn which included a detailed breakdown of diabetes risk by ward.

The report summarised the one year intensive lifestyle support programme commissioned through Weightwatchers. A Member noted that only 25% of participants were men, but it was explained that this was actually a higher

percentage than could have been expected. It was hoped that Bromley could participate in the NHS Diabetes Prevention Programme - South East London and South West London CCGs had submitted a joint bid to become one of the first areas to deliver the nationally funded prevention programme.

RESOLVED that progress made to date be noted.

**71 OUR HEALTHIER SOUTH EAST LONDON - JOINT HEALTH
 SCRUTINY COMMITTEE**

Report CSD15127

The six clinical Commissioning Groups in South East London, working with NHS England, had been working together to address key challenges facing healthcare across the six boroughs. The programme was known as "Our Healthier South East London" (OHSEL). The NHS organisations had indicated that the proposals arising from their work were likely to require public consultation, and the six boroughs were working towards establishing a joint health scrutiny committee to scrutinise the proposals. Participation in a joint health scrutiny committee required approval from full Council.

Although there was some scepticism about the value of the joint committee, and the resources needed to support it, the Sub-Committee decided to support the Council's involvement.

RESOLVED that the Care Services PDS Committee be requested to recommend to Council that Bromley participates in the proposed joint health scrutiny committee on the Our Healthier South East London proposals and appoints two members to the Joint Committee.

72 WORK PROGRAMME 2015/16

Report CSD15126

The Sub-Committee considered its work programme. The Chairman suggested looking at the issues of GP capacity in Bromley, care for adults with learning disabilities and dementia beds.

RESOLVED that the work programme be noted and updated as above.

The Meeting ended at 6.03 pm

Chairman