

AT A MEETING of the HEALTH OVERVIEW AND SCRUTINY COMMITTEE of the COUNTY COUNCIL held at The Castle, Winchester on Tuesday, 25 January 2011.

PRESENT

Chairman:
p Councillor Pat West

Vice-Chairman:
p Councillor Liz Fairhurst

Councillors:

p Ray Bolton	p David Harrison
p Ann Buckley	p David Keast
p Rita Burgess	p Roz Muschamp
p Keith Chapman	p Pam Mutton
p Brian Collin	p Angela Roling
p Phryn Dickens	p John Wall
a Peter Edgar	

Co-opted Members:

Councillors:
a Marion Kerley
p Ray Love
p Tim Southern
p Dennis Wright

In attendance at the invitation of the Chairman: Cllr Keith Evans and Cllr Kathy Frazer, Cabinet Lead for Health at Eastleigh Borough Council.

57. **DECLARATIONS OF INTEREST**

Members were mindful that, where they believed that they had a personal or personal prejudicial interest any matter to be considered at the meeting, they should normally, at the time of the debate, declare their interest, and having regard to the circumstances described in paragraphs 9, 10, 11 and 12 of the County Council's Code of Conduct, consider whether to leave the meeting whilst the matter was discussed save for exercising any right to speak in accordance with Paragraph 12 of the Code.

The following members declared a personal interest:

Cllr Brian Collin	Wife employed by NHS
Cllr Phryn Dickens	Husband and son employed by NHS
Cllr David Harrison	Employed by NHS
Cllr Pam Mutton	Daughter employed by NHS
	Member, League of Friends, Andover WMH
Cllr Pat West	Daughter-in-law employed by NHS
Cllr Dennis Wright	Wife is a GP Practice Manager

58. **MINUTES**

The Minutes of the Meeting of the Committee held on 30 November were confirmed as a correct record, and signed by the Chairman.

It was confirmed that:

- The definition of 'social care offering' from NHS Hampshire had been circulated electronically to members of the HOSC
- The 'framework for assessing substantial service change' had been circulated to local NHS trusts by the PCT
- The Chairman would be providing evidence to the Independent Reconfiguration Panel about the end of life care at PHT on 8 February 2011
- The Panel to scrutinise health service configuration in Mid and North Hampshire would consist of Cllrs Pat West, John Wall and Ann Buckley
- The Hampshire wide Panel to look at community services would consist of Cllrs Pat West, Liz Fairhurst and Alan Dowden: the initial area of scrutiny by the Panel would be proposals for older people's mental health services in south west Hampshire.

59. **CHAIRMAN'S COMMUNICATION**

a. **Apologies**

Councillor Peter Edgar gave his apologies as he was on other Hampshire County Council business. Cllr Marion Kerley also tendered her apologies.

b. **Sympathy**

The Chairman conveyed the deep sympathy of the Committee concerning the sad passing of Tom Smith, Chairman of the Hampshire LINK, and of Nigel Clarke a former member of the Committee.

c. **Welcome**

The Chairman welcomed Cllr Tim Southern as a co-opted member of the committee nominated by HIOWLA, and Frank Rust representing the Hampshire LINK.

60. **WORK PROGRAMME**

The Chief Executive presented the Committee's Work Programme (Item 5 in the Minute Book).

RESOLVED:

That the Committee's Work Programme be approved.

61. **INQUIRIES RECEIVED AND ACTION TAKEN**

The Chief Executive presented a report on enquiries received, the source of each enquiry and the action taken (Item 6 in the Minute Book). The enquiries related to:-

- **Hythe Hospital: HOSC Panel update.**
The work of this Panel was being led locally by Cllr Brian Dash and early indication were that good progress was being made. A meeting had been arranged for the 27 January at which the Assistant Director of Adult Services was to provide a briefing to the Panel on re-ablement and the form that might take in the Hythe and Debden area.

RESOLVED:

A profile of the health needs of this population be provided to the HOSC prior to the 29 March 2011 meeting and Members are updated on developments.

- **Oak Park Development: NHS Hampshire. Up-date on progress with hospital redevelopment from NHS Hampshire**
It was reported that good progress had been made in relation to the planning process. The Rapid Assessment Service was already on stream ahead of schedule, and other plans were on track. The Committee was advised that there were no immediate plans to close Havant War Memorial Hospital. It was pointed out by a Member that NHS Hampshire had previously indicated that when the hospital was closed, other inpatient accommodation might need to be identified locally until completion of the Oak Park nursing home development. It was agreed the Committee would keep a watching brief with respect to the progress with the provision of ambulatory care, given its complexity.

RESOLVED:

That Members be updated on progress at Oak Park at the 24 May 2011 meeting.

- **East Hampshire: NHS Hampshire. Update on progress with identification of options for developing local community hospitals**
Cllr Adam Carew, local member for Whitehill, Bordon and Lindford would act as the local member link with the HOSC on this matter. NHS Hampshire has indicated that discussions have continued with local stakeholders and that the Trust would continue to work towards a clearer understanding of how the health needs of people in the area might best be served by the services provided by and out of Petersfield, Chase and Alton hospitals, including how they might complement each other.

RESOLVED:

That NHS Hampshire provides the HOSC with the health profile for the population affected and the LINK Member for this issue be invited to

update the Committee on progress with local stakeholder engagement as appropriate, and

The HOSC continues to monitor progress with this work.

- **Odiham Cottage Hospital: Notice NHS Hampshire to withdraw inpatient beds**

The Committee was assured that inpatient services provided at the hospital are to continue until July and that a stakeholder group has been formed. A representative from the area said that to date three types of stakeholder meetings had been held and that the engagement had so far been good, although more would be needed in the months ahead. A local Member, however was concerned that whilst many questions had been asked, few answers had been forthcoming. The Chairman commented that since consultation was still underway, it would not be appropriate to anticipate or restrict thinking on final options, nevertheless she understood the Member's concern that a number of issues needed to be resolved in a relatively short time period. The Chairman suggested that the LINK could play a role in monitoring progress, and the LINK representative agreed, indicating he had a good knowledge of the hospital from previous experience with the Community Health Council. NHS Hampshire agreed to provide the Chairman with the Engagement Plan.

RESOLVED:

That Members be provided with the Engagement Plan and health profile for the population affected, and

That the Committee receive an update on progress with development of future options at the 29 March 2011 meeting

- **Maternity Services in the South East: Portsmouth Hospitals NHS Trust: Reopening of Grange (Petersfield) and Blake (Gosport) mid-wife led birth centres**

The Chairman offered the Committee's congratulations to Portsmouth Hospitals Trust for reopening the birth centres within the promised time for births and that the service has already begun to be used by local women. A local Member urged that the profile of this valuable and locally delivered service be kept high to build the confidence of women in what is hoped to be a reliable provision.

RESOLVED:

That Portsmouth Hospitals Trust be commended for restoration of birthing provision at Grange and Blake as promised and on time.

- **GP branch surgery, Whiteley: Proposed closure of branch surgery**

The Chairman invited a local Member, Cllr Keith Evans to comment on the proposed closure of a Locks Heath surgery and on the background

to it. The Committee was told that neither the Locks Road Surgery nor the Whiteley Surgery should be considered branch surgeries although it appeared that the GPs who run both, consider the Whiteley surgery to be the main one. It was explained that the Whiteley practice is a new, purpose built facility that opened in 2008 initially to serve the Whiteley population. The practice extended the reach of the existing Locks Road Surgery in Locks Heath. The proposed closure of the original surgery building at Locks Road has resulted in concerns particularly from older patients who may face a round trip to Whiteley from Locks Heath of 7 to 10 miles. Public transport links are poor and there are already pressures on other local GP lists in the Locks Heath area.

NHS Hampshire confirmed that the proposed closure is supported by a business case from the GPs who believe the older premises at Locks Road would not meet new standards for practices. As independent contractors within the NHS, the Primary Care Trust has limited powers to directly intervene if GPs have a good business case, and this situation is also true of the HOSC, however the proposal is subject to the four tests for proposed changes in service as put forward by Sir David Nicholson, Chief Executive of the NHS in July 2010, and which are included in the revised Operating Framework for 2010-2011. Proposals thus need to demonstrate:

- Support from GP commissioners
- Strengthened public and patient engagement
- Clarity on the clinical evidence base
- Consistency with current and prospective patient choice

Members had a number of concerns about the detail of the grounds and timing indicated by GPs concerning the state of the premises in Locks Heath. In particular there was potential for patients in the area to have their access to primary care services reduced with no alternative local option being available. It was noted that currently 86% of patients using the Locks Road Practice live within 2 miles of it. The question was raised whether the PCT would support the development of new primary care services in the area if it could not prevent the closure of Locks Road Surgery and other practice lists were closed. NHS Hampshire commented that this would be an option that could be considered. Members also stressed the need to take account the likely impact of new housing developments in the Whiteley area which would put further pressures on local infrastructure.

The Hampshire LINK representative indicated he was unaware of this issue, and would look into it.

RESOLVED:

That Members be provided with additional details about the options for maintaining continuity of service and access to primary care services in the Locks Heath area should the plans put forward by the practice proceed.

That NHS Hampshire updates the HOSC on the outcomes of their consideration of the business case at the 29 March 2011 meeting

- **NHS Operating Framework: NHS Hampshire . Key headlines and implications for the Hampshire area**

A presentation was given by NHS Hampshire to the Committee on the Operating Framework that set out challenges to the PCT and approaches that are to be adopted in the first year (2011/12) of transition initiated by the Health White Paper. Key points included:

- The requirement for NHS Hampshire to cluster with Southampton, Portsmouth and The Isle of Wight PCTs by June 2011 and to establish a single Executive Team for the cluster.
- The requirement for PCTs to ensure GP Commissioning Consortia will not inherit any debt incurred by PCTs when commissioning responsibilities are handed over.
- The establishment of a shadow NHS Commissioning Board to oversee the development of emerging GP consortia
- The need to establish shadow Health and Wellbeing Boards with local authorities

Members raised a number of questions of clarification, but concern was expressed that the GP Commissioning Consortium model could result in a post code lottery with respect to commissioning care. It was noted that commissioning is intended to prioritise health provision as reflected in Joint Strategic Needs Assessments, and the NHS Commissioning Board should provide oversight. The PCT was not however in a position to challenge the model.

The full presentation can be accessed at:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meeting_sitemdocuments.htm?sta=&pref=Y&item_ID=2564&tab=2

RESOLVED:

That Members would welcome further opportunities to understand the principles and outworking of the Health White Paper as it affects health and social care services provided in Hampshire.

62. **PROPOSALS TO DEVELOP OR VARY NHS SERVICES**

The Chief Executive presented a report on proposals to develop or vary health services in the area of the Committee (Item 6 in the Minute Book). He presented the report in two parts which comprised items for information which alerted the Committee to forthcoming proposals from the NHS to vary or change services, and items for action required by the Committee to respond to proposals from the NHS to substantially change or vary NHS services.

Under Items for action he gave details on:

- a. **Hampshire Partnership NHSFT: consultation on older people's mental health services**

Hampshire Partnership sought approval from the Committee to initiate a period of formal consultation with the HOSC in relation to the provision of Older People's Mental Health Services within Southampton and South Hampshire. The Trust's Chief Executive outlined the main proposals in the model of service delivery as found in the consultation document 'Planning Ahead, Working Together' which can be found with the agenda papers at:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meeting_sitemdocuments.htm?sta=&pref=Y&item_ID=2565&tab=2

At the invitation of the Chairman, the Cabinet Lead for Health at Eastleigh Borough Council reported the concerns of district councillors about the lack of engagement. It was not clear if local GPs supported the changes or if patient choice would be affected. The Committee indicated that whilst it supported the direction of travel, it was essential that sufficient engagement be undertaken with stakeholders to develop the options for change. In the absence of this it was considered to be premature to commence formal consultation. The Committee also stated that further specific information was needed about services currently provided and about how the services might change, including how and where services would be accessed by patients.

RESOLVED:

Plans for formal consultation with the HOSC be deferred until further engagement had been undertaken with stakeholders in Eastleigh and in other areas to ensure full engagement had been achieved in developing the options for change.

That the Committee would be apprised of the further work undertaken to engage with Eastleigh and the local populations affected.

Under items for information he gave details on:

b. South Central Strategic Health: fluoridation of drinking water

The Chief Executive noted that the outcome of the judicial review was still awaited. Members had previously agreed that, should the decision of the SHA be supported by the judicial review, the HOSC would ask that the technical and economic feasibility be revisited to address the flaws identified by the Hampshire County Council Report. Additionally Members noted that the SHA was due to be abolished by April 2012 and it was likely that the decision would be passed to Local Authorities. It was agreed that the Chairman should include a suggestion that any implementation of the decision is deferred as Local Authorities may seek to subsequently reverse it in view of widespread public opposition.

RESOLVED:

That the Chairman write to South Central SHA to reflect the points outlined above should the Judicial review find in the favour of the SHA.

c. Southeast Hampshire sustainability review

The Chief Executive reported that an initial meeting had been held to identify the most effective way to engage with members on this issue. No further action had been agreed by NHS Hampshire in relation to this issue.

RESOLVED:

That Members would receive an update on progress in March 2011.

d. Liberating the NHS: legislative framework and next steps

The Chairman noted that the Health Bill broadly reflected the direction set in the response, and the HOSC would continue to watch the progress and outworking of the Bill carefully.

RESOLVED:

- That Members would be kept apprised of progress and developments as they impact on Health in Hampshire.

Chairman, 29 March 2011