

**HEALTH OVERVIEW AND SCRUTINY
PANEL
7 OCTOBER 2010
7.30 - 9.25 PM**



Present:

Councillors Leake (Chairman), Virgo (Vice-Chairman), Mrs Angell, Baily, Brossard, Harrison, Mrs Shillcock and Thompson

In Attendance:

Edward Donald, Royal Berkshire NHS Trust
Dr Richard Brown, Royal Berkshire NHS Trust
Councillor Birch, Executive Member for Adult Services, Health & Housing
Dr Lise Llewellyn, NHS Berkshire East
Mary Purnell, NHS Berkshire East
David Townsend, Berkshire Healthcare NHS Foundation Trust
Richard Beaumont, Head of Overview and Scrutiny

Apologies for absence were received from:

Councillors Burrows

12. Minutes and Matters Arising

RESOLVED that the minutes of the meeting held on 17 June 2010 be approved as a correct record and signed by the Chairman.

13. Declarations of Interest

There were no declarations of interest.

14. Co-option on to Health Overview and Scrutiny Panel

The Chairman stated that Mr Terry Pearce had signed his agreement to the Members Code of Conduct. The Panel agreed that Mr Terry Pearce of the Bracknell Forest LINK be co-opted in a non-voting capacity to the membership of the Panel for the remainder of the municipal year. The Panel also agreed to convey its thanks to Mrs Mattick for her long service to Overview and Scrutiny.

15. 'Equality And Excellence: Liberating the NHS'

The Chief Executive of NHS Berkshire East, Dr Llewellyn, gave a presentation to the Panel on the implications of the Government's White Paper 'Equality And Excellence: Liberating The NHS'. She reported that the White Paper had generated lots of media and public interest. The vision was that the proposals would lead to refocusing the NHS to patients and carers. Another White Paper on adult social care was expected in December.

The proposals included the abolition of Primary Care Trusts and the Strategic Health Authorities. These organisations would be replaced by a GP consortia and a National Commissioning Body, with the public health function transferring to local authorities.

This would mean that a consortia of practices working in partnership with local authorities and communities would be responsible for commissioning the majority of services. Much commissioning would be GP led and GP's would receive a management allowance.

The Chief Executive reported that this was the most radical change that the NHS had been through and that the financial challenge would be great. During the transition period it was important that patients continued to be the priority and that important projects such as the Bracknell Healthspace were delivered. The PCT would continue to keep the Panel informed throughout the transition, as the GP Consortia progressively took over.

In response to members' queries, the Chief Executive reported that five GP areas operated across Berkshire East and that staff were already being delegated to work towards geographical cover, to ensure that services were comprehensively delivered.

The Chief Executive reported that she felt confident that there was clinical buy-in for the changes that needed to be implemented over the next two years. In 2013, the GP commissioning bodies would become legal entities. She reported that GP's, as independent contractors, had some freedom to decide on their involvement with the emerging GP Consortia. All GP's in Bracknell Forest had formed a social enterprise and the PCT was in discussion with them as well as loaning some of their staff.

In response to members' queries, the Chief Executive confirmed that any programmes or resources tied to Public Health would be transferred to local authorities. In addition, it was possible that some members of the current Public Health team may also be transferred to the local authorities in East Berkshire.

The Head of Overview & Scrutiny reported that the Panel had held an informal meeting to consider their response to the White Paper proposals, this meeting had been facilitated by the Director of Adult Social Care and Health and the Interim Head of Commissioning. The feedback from this meeting was then taken to an officer working group and this culminated in an officer draft response, which incorporated the views of Panel members. This response had been sent to the Executive for consideration, following this it would be sent to the Department of Health.

16. Royal Berkshire NHS Foundation Trust

The Chief Executive of Royal Berkshire NHS Trust, Edward Donald and Dr Richard Brown, delivered a presentation on Royal Berkshire Hospital's services to residents of Bracknell Forest and the cancer and renal services facility under construction at Brants Bridge.

The Chief Executive reported that in line with the NHS Constitution's commitment to making improvements, their vision was to deliver the best possible patient experience and that services be patient focussed. He reported that there were challenging times ahead for the Trust financially, as 20% efficiency savings needed to be made. 'Bed blocking' was an issue in that regard, though the Trust experienced very few delayed discharges of Bracknell Forest patients.

It was reported that the Royal Berkshire Clinic would be opening from the end of May 2011, the services offered at the clinic at the first stage would include: Radiotherapy, Renal Dialysis, Diagnostic Imaging, Chemotherapy and Ophthalmology. The cancer radiotherapy treatment services had been developed in collaboration with the University of Pittsburgh, an international leader in the field. These services would complement those offered at the Bracknell Healthspace. In terms of the second stage

of development, the Trust was in discussions with a number of private health suppliers who had expressed interest in using the top floor for some of their services later in 2011 or 2012.

Referrals to the clinic would be made through GP's. The building incorporated a bed lift and no overnight stays were provided for.

17. Consultation on Mental Health Inpatient Facilities

The Panel viewed a DVD which detailed the consultation process for mental health inpatient facilities in East Berkshire, introduced by David Townsend from the Berkshire Healthcare Trust. The DVD illustrated the three possible options that could be taken to secure the future of mental health inpatient facilities in the region.

The Chairman drew attention to the earlier correspondence with the Trust over the planned methodology for the consultation. The Chairman informed the Panel that at its meeting on 6 October, the Joint East Berkshire Health O&S Committee had been unable to reach any consensus on any of the three options, in order to submit a joint response to the consultation. Informally, it was reported that it was likely that Slough Borough Council would favour Option 3, whilst the Royal Borough of Windsor & Maidenhead was likely to favour either Option 2 or 3. It had been agreed that each local authority would therefore make an individual response to the consultation.

The Head of Overview & Scrutiny reported that at an informal meeting of the Health O&S Panel had indicated that Option 1 would be favoured, however members had some concerns around transport arrangements. There were particular concerns for the elderly and those that did not have their own transport. The Chairman drew attention to the major issue, that the great majority of patients received *outpatient* mental health services and it would be wrong to divert resources from outpatients to pay for more expensive solutions to the needs of outpatients.

It was reported that the Chief Executive of the Berkshire Healthcare NHS Foundation Trust had confirmed that there would be £100,000 a year available to fund a transport scheme. This funding would increase with inflation year on year. It had not yet been confirmed how this funding would be used. Members agreed that the Panel's consultation response should highlight their concerns over transport.

The Panel agreed that they wished to support Option 1, with reservations and that this be conveyed in the consultation response.

The Chairman reported that the Head of Overview and Scrutiny would draft a response that would be circulated to members of the Committee. Once this response was agreed, it would be submitted. The Chairman reminded members that they could also submit individual responses to the consultation if they wished.

18. Health Overview and Scrutiny Protocol

The Panel noted the revised Health Service Scrutiny Code of Practice and Protocol, particularly the obligations on Members. The Panel also noted the complimentary feedback from NHS partners and thanked the Head of Overview and Scrutiny for the initiative to update the protocol and the report.

19. Joint East Berkshire Health Overview & Scrutiny Committee Minutes

The Panel noted the draft minutes of the Joint East Berkshire Health Overview & Scrutiny Committee held on 16 June 2010.

20. **Overview and Scrutiny Bi-Annual Progress Report**

The Panel noted the bi-annual overview and scrutiny progress report of the Assistant Chief Executive. The Head of Overview & Scrutiny drew members attention to paragraph 3.3 in the report and stated that regrettably it seemed probable that it would not be possible to continue with the scrutiny of the Bracknell Forest Partnership due to resource pressures.

21. **Work Programme 2001/12**

The Head of Overview & Scrutiny reported that the O&S Commission Chairman had requested that each Panel Chairman consider what work they would like to do for the 2011/12 municipal year, in order for this to be considered by the Overview and Scrutiny Commission for inclusion in the annual report of Overview and Scrutiny to be put before Council in the Spring. He reported that officer resources to support working groups were limited.

Members agreed that the indicative work plan should be used on a provisional basis, pending the outcome of the major changes in the NHS White Paper. The Panel might decide in the future to carry out a review of the new Health centres once the services were up and running.

22. **Date of Next Meeting**

10 February 2011.

CHAIRMAN