

NHS North West London PCTs: Annual General Meeting

The NHS North West London Cluster comprises NHS Brent, NHS Ealing, NHS Hammersmith & Fulham, NHS Harrow, NHS Hillingdon, NHS Hounslow, NHS Kensington & Chelsea and NHS Westminster

Friday 7th September 2012, 3.00pm

Central Hall Westminster, Storey's Gate, Westminster, London, SW1H 9NH

Draft Minutes

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| 1. | Welcome, Introduction & Apologies | |
| 1.1. | Jeff Zitron, Chairman of the eight North West London PCTs, explained that this meeting was the Annual General Meeting for all eight North West London Primary Care Trusts (PCTs) - NHS Brent, NHS Ealing, NHS Hammersmith & Fulham, NHS Harrow, NHS Hillingdon, NHS Hounslow, NHS Kensington & Chelsea and NHS Westminster. These PCTs operate as a Cluster with shared governance. He explained that the Annual Reports presented related to the 2010/11 when the North West London PCTs were grouped into three sub-Clusters, and that therefore the Agenda had been structured along these lines. He welcomed the members of the public who were attending the meeting and said that there would be plenty of opportunity for them to ask questions later in the meeting. | |
| 1.2. | Apologies were received from Trish Longdon. | |
| 2. | Declarations of interest | |
| 2.1. | Arif Kamal declared that his wife is a medical doctor at North West London Hospitals Trust and works with the London Deanery. | |
| 2.2. | Sarah Cuthbert declared that her husband is a partner at Deloitte. | |
| 3. | 2011/12 – Overview | |
| 3.1. | Anne Rainsberry, Chief Executive of NHS North West London gave an overview of the year 2010/11 across the eight PCTs. She briefly described the developing structure of the NHS in North West London with eight emerging Clinical Commissioning Groups and a Commissioning Support Unit. She said that the last stage of transition to this structure would begin on 1 st October 2012. | |
| 3.2. | During the last year, she said that there had been significant achievements during a time of transition. She explained that the later presentations would summarise how the PCTs in North West London had improved healthcare for NW London residents during the year. She drew attention to the innovative work in developing better Out of Hospital care including the Integrated Care Pilot (ICP). In Inner North West London, the ICP was already delivering better co-ordinated care for patients and, through this, avoiding unnecessary emergency hospital admissions, and this programme was now being extended to the outer boroughs. She said that the target proportion of the £1bn efficiency savings target had been delivered and there had been financial break-even at all eight PCTs. | |

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| 4. | Financial Review 2011/12 | |
| 4.1. | David Slegg, Director of Finance for NHS North West London gave a presentation on the financial position across the eight PCTs. He said that there had been a planned surplus for the year of £45m. A surplus of £60m had been delivered. | |
| 4.2. | David Slegg said that while all PCTs had met their statutory duties and had been given unqualified audit opinions, three PCTs (Ealing, Hillingdon and Hounslow) had been given qualified value for money opinions due to the financial challenges they faced. The Cluster-wide financial strategy had allowed these PCTs to be given financial support by those PCTs with surpluses (Brent, Hammersmith & Fulham, Kensington & Chelsea and Westminster). £24m had been given to the trusts with the largest financial problems. | |
| 4.3. | The Director of Finance noted that the accounts had been approved by the Boards of the PCTs and that they were presented today for information. | |
| 5. | Annual Reports | |
| 5.1. | Rob Larkman, formerly Chief Executive of Brent & Harrow PCTs presented the Annual Reports of four of the PCTs. He outlined notable areas of progress in each of the PCTs. | |
| 5.2. | <p>Brent:</p> <ul style="list-style-type: none"> • Increased uptake in six key types of childhood Immunisation • Pilot case management within district nursing, supporting people with chronic diseases • Intermediate care service – STARRS – fully up and running keeping more people at home • New Health Checks programme with all 69 GP practices, exceeded target by more than 160% with 13,532 people receiving checks • Infection control link practitioners established in care homes to enable education, networking and the successful introduction of MRSA screening for all new admissions to care homes. | |
| 5.3. | <p>Harrow:</p> <ul style="list-style-type: none"> • Number of smoking quitters increased and breast feeding rates increased from 75% to 95% • Exceeded target for health checks by more than 125% with 596 people receiving checks • All immunisations saw an increase in uptake including MMR and HPV vaccines • Breast Cancer screening – 53-70yrs increased to 71.7% from 62.1%, exceeding the national 70% target. Bowel Cancer Screening – exceeded target for take up • Long term Conditions – peer mentoring and education programme to support self management of diabetes - recruited and trained 16 diabetes champions. | |

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| 5.4. | <p>Ealing:</p> <ul style="list-style-type: none"> • Successful opening of Urgent Care Centre at Ealing Hospital • Launch of new community Ophthalmology Service • Successful formal opening of new Breast Screening Static Unit at Ealing Hospital • Successful delivery of bowel cancer awareness campaign. | |
| 5.5. | <p>Hillingdon:</p> <ul style="list-style-type: none"> • First Borough to launch new NHS 111 service - Procurement and implementation of service to live stage within a three month period • Maternity pathway • Best Practice Prescribing • Intermediate care service redesign • Implementation of the Integrated Care Pathway with 77% of practices signed up to the pilot. | |
| 5.6. | <p>Sarah Whiting, formerly Chief Executive of the Inner North West London PCTs (now the Managing Director of the Commissioning Support Unit) presented the Annual Reports of the other four PCTs. She highlighted the following achievements.</p> | |
| 5.7. | <p>Hounslow:</p> <ul style="list-style-type: none"> • Age standardised mortality rates in Hounslow are on a downward trend, with 20.1% fewer male deaths and 14.2 % fewer female deaths since 2002 • New urgent care centre at West Middlesex University Hospital, which opened in March 2012 • Integrated Community Response Service providing hospital at home services started in June 2011 • The Family Nurse Partnership team supporting teenage mothers started in December 2011 • A new health centre, the Meadows Centre for Health was opened on the Beavers Lane estate in January 2012. | |
| 5.8. | <p>Hammersmith & Fulham:</p> <ul style="list-style-type: none"> • Building work has started on the White City Collaborative Care Centre which is due to open in 2014. When completed it will host health and social care services with General Practice capacity for 25,000 patients • White City Community Champions Project goes from strength to strength with 79 residents trained to promote health and well being and signpost to local services, with some focusing on expert patient, sexual health and community activators. • 35 patients trained to deliver diabetes awareness, education and mentoring, 2,000 members of the public involved in diabetes awareness events. Impact evaluation reveals significant improvement in awareness (95%) and behaviour change (75%) after brief intervention • Dentists launched a new scheme to 'keep White City kids smiling', offering support to children aged 3 to 7 years old to develop good oral health habits at an early age • Additional rehabilitation beds opened, dementia services improved, services for carers extended and we are now providing better quality health care for people with learning disabilities. | |

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| 5.9. | <p>Kensington & Chelsea:</p> <ul style="list-style-type: none"> • Earl’s Court Health and Wellbeing Centre opened in December 2011 providing the local community with a range of services, including a 6,000 patient GP practice, sexual health advice, contraception, wellbeing coaches for people with long term conditions and an NHS Dentist • St Charles Health & Wellbeing Centre has introduced a wide range of healthcare services to the site including mental, primary, community and palliative care. Third sector providers have also been brought on to the site to promote health and wellbeing, for example, by promoting a new community garden • A new musculo-skeletal (MSK) service has been procured that now offers a single point of access and triaging to a full range of MSK services including pain relief, physiotherapy and orthopaedic support depending on clinical need • The Fit for Work Service received further funding from the Department for Work & Pensions and will now extend to Westminster and Hammersmith & Fulham • New improved community stroke services, rehabilitation and intermediate care services expanded, memory services have been extended and we have worked to reduce the number of older people admitting to hospital due to alcohol. | |
| 5.10. | <p>Westminster:</p> <ul style="list-style-type: none"> • Extended access to primary care services with a number of GP practices opening at weekends between 10am and 6pm, providing a walk-in service to patients of other practices and unregistered patients • The Westminster Community Cardiac Service rolled out to the south of the borough as a full clinical service based in South Westminster Centre • Introduced “Well watch” service to undertake multi-disciplinary care planning for patients with long-term conditions, enabling them to live well for longer • Vascular prevention and rehabilitation initiative, My Action Westminster (multi-disciplinary, community based lifestyle programme) continued to have excellent results in reducing risk factors for CVD and shortlisted for Health Service Journal Award • Established an intermediate care team, extended memory services, developed a housing strategy for older people, carers personal budgets are being introduced and we increased young people in treatment for substance misuse • Westminster highest rates of partially or totally breastfed babies in England at 83.2%. | |
| 5.11. | <p>On behalf of all eight PCTs she thanked patient representatives, staff, NHS partners, the voluntary sector and local authorities for their hard work. She also thanked the public for their participation.</p> | |
| 5.12. | <p>The Chairman congratulated the PCTs on their achievements during the year in spite of it being a period of rapid change in the health service and added his thanks for the hard work. He paid particular tribute to the involvement of LINKs representatives and other patients in delivering and developing better healthcare in NW London.</p> | |

| 6. | Questions from the public | |
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| 6.1. | <p><i>Question:</i></p> <p>What is the average spending per head on A&E and what are the costs in Urgent Care Centres.</p> <p><i>Answer:</i></p> <p>David Slegg said he would look into this and provide an answer.</p> | |
| 6.2. | <p><i>Question:</i></p> <p>With regards to the consultation on ‘Shaping a Healthier Future’, as it is a responsibility to inform everyone, why has there been no real attempt to inform the general public? Nothing has been put up in practices, hospitals (except for Chelsea & Westminster), no hard copies are available and doctors are not aware of it.</p> <p><i>Answer:</i></p> <p>Daniel Elkeles (Director of Strategy) said that information about the consultation and consultation documents have been sent out to all GP practices across the eight boroughs of NW London, as well as libraries, Council offices, and NHS buildings. Copies of the summary leaflet have been included in all local newspapers. Clinical commissioning groups in each borough are promoting the consultation to their members, and LINK organisations have promoted the consultation on our behalf, as have voluntary community networks.</p> <p>[Note: As of 21st September 5,500 posters have been distributed; 199,000 postcards distributed; 555,000 summary leaflets distributed; and 72,000 consultation documents distributed.]</p> | |
| 6.3. | <p><i>Question:</i></p> <p>Chelsea & Westminster Hospital’s ‘Trust News’ is asking people to vote for option A. How can the Trust justify spending NHS money on this? And how can all the options be voted on?</p> <p><i>Answer:</i></p> <p>Daniel Elkeles said that many of the hospitals have been promoting the consultation to their patients and visitors. It has always been stressed that this consultation is not about simply voting for one option over another. The NHS is facing many pressures and the way the NHS provides services to patients needs to change. The consultation is about asking people for their views on the NHS and how it can best meet the needs of the population of north west London for the future. There are a number of options on how this can best be achieved, which views are being invited on. This not just a simple vote for an option.</p> | |

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| 6.4. | <p><i>Question:</i></p> <p>Why has no risk assessment has been undertaken on transport – ie travel times by ambulance and cars are mentioned but the general public and patients will have to use public transport?</p> <p><i>Answer:</i></p> <p>Daniel Elkeles said that the ‘Shaping a Healthier Future’ programme has developed a travel model based upon <i>Transport for London’s</i> Health Service Travel Analysis Tool to analyse the impact on travel times of proposals. Under all options fewer than one in seven A&E patients per day are expected to be affected by the proposed reconfiguration options, and this number drops even further to one in 11 for all other types of hospital activity (inpatients and outpatients).</p> <p>The programme’s travel model indicates that current average travel time for patients in North West London to a major hospital by blue light ambulance is 11.4 minutes. Under option A this would change to 12.0 minutes, a change of approximately 0.6 minutes (or 36 seconds). The London Ambulance Service (LAS) has been closely involved in the development of reconfiguration proposals. They are a member of the Programme Board (the programme’s key decision making forum) and have been regularly engaged through other forums such as the Travel Advisory Group (TAG). LAS support the programme and the case for change driving the reconfiguration.</p> | |
| 6.5. | <p><i>Question:</i></p> <p>The Annual Report refers to related party transactions. For example, the Hammersmith & Fulham report quotes the figure of £1m in relation to Tim Spicer. What does this mean?</p> <p><i>Answer:</i></p> <p>David Slegg (Director of Finance) said that related party transactions are the amounts of money that are paid to organisations with which Board and Committee members are associated, in this case the practice of a GP serving on clinical commissioning boards during the year. Publishing related party transactions ensures these payments are open and transparent.</p> | |

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| 6.6. | <p><i>Question:</i></p> <p>How will the consultation be analysed? Shouldn't all residents be written to with a reply paid form?</p> <p><i>Answer:</i></p> <p>Daniel Elkeles said that NHS North West London have appointed Ipsos MORI, a leading UK market research company to independently evaluate all the responses received through the consultation process, and produce a report. Their evaluation will give greatest weight to responses received through the questionnaire, although they will also look at and take into account comments made in letters and petitions.</p> <p>NHS North West London does not have the resources to write to every household in the eleven boroughs we are consulting in. However the consultation is being publicised widely across north west London using a number of different avenues to ensure the views of as many people as possible are obtained.</p> | |
| 6.7. | <p><i>Question:</i></p> <p>The mortality rate is shown as going down. This is inconsistent with national statistics which show it going up.</p> <p><i>Answer:</i></p> <p>Andrew Howe (Director of Public Health) said he would look into this and an answer would be published on the website.</p> | |
| 6.8. | <p><i>Question:</i></p> <p>The travel from Central Middlesex to Northwick Park, involves 3 buses. Night buses have been reduced. How can public transport be an acceptable alternative? How will the existing A&E's cope with the extra demand?</p> <p><i>Answer:</i></p> <p>There is good evidence that in serious or complex cases it is better for patients to travel further and access the right care than it is for them to go to a nearer hospital which may not have the right specialists, right equipment or sufficient experience of treating patients with their condition. The vast majority of people who now come to A&E can be treated at an urgent care centre on the same site and under the proposals all sites will have one that is open 24-hours-a-day, seven-days-a-week. In fact, many people are already being treated at urgent care centres without even realising it. In NW London we already have urgent care centres at all nine of our acute hospital sites.</p> <p>Our Equalities Impact Strategic Review concluded that there is no 'significant' impact for people from protected groups travelling by ambulance, a minor impact for travel by private car, and a moderate impact for projected groups using public transport, which is only slightly higher than the overall proportion for North West London. For anyone that does need to go to a different A&E (under our preferred option we anticipate that only a very small percentage of A&E attendances would need to move) we purposefully considered the geographic location of hospitals as</p> | |

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| | well as public transport and access and developed proposals to ensure that travel times were not badly affected. | |
| 6.9. | <p><i>Question:</i> What are delegated budgets?</p> <p><i>Answer:</i> Rob Larkman said that delegated budgets are budgets that have been delegated by the primary care trust to their relevant clinical commissioning group. These include the prescribing budgets – the money GPs spend on prescribing medication to their patients. This means the clinical commissioning group makes the decision on how the money will be spent by their GPs. From April 2013 clinical commissioning groups will have full control of all budgets for their boroughs.</p> | |
| 6.10. | The Chairman encouraged those present to make their views on the ‘Shaping a Healthier Future’ programme known through the consultation process. He said that dates of the future meetings of the Joint Committee of PCTs will be made available shortly. | |
| 7. | Any Other Business | |
| 7.1. | The Chairman thanked the attendees for their participation and closed the meeting. | |

Signed **Chair of Board**

Dated

A final, signed copy of the Minutes is available from Lynne Spencer, Head of Corporate Affairs, Chief Executive Office, NHS North West London on request from: Lynne.spencer@nw.london.nhs.uk or Tel: 020 3350 4188.