

## **HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE**

**Tuesday, 10 May 2016**

**Minutes of the meeting of the Health and Social Care Scrutiny Committee held at the Guildhall EC2 at 11.00 am**

### **Present**

#### **Members:**

Chris Boden	Wendy Mead
Revd Dr Martin Dudley	Steve Stevenson
Vivienne Littlechild	

#### **Officers:**

Philippa Sewell	- Town Clerk's Department
Ade Adetosoye	- Community & Children's Services
Marion Willicome-Lang	- Community and Children's Services

#### **In Attendance:**

Casper Ridley	- Barts Health NHS Trust
Ian Walker	- Barts Health NHS Trust
Gareth Wall	- London Borough of Hackney
Marion Willicome-Lang	- Community and Children's Services, CoLC

### **1. APOLOGIES**

There were no apologies.

### **2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**

The Revd Dr Martin Dudley, Vivienne Littlechild, and Steve Stevenson declared an interest by virtue of being residents of the City of London. The Revd Dr Martin Dudley also declared an interest in item 9, by virtue of the proposed development being in his Parish.

### **3. ORDER OF THE COURT OF COMMON COUNCIL 21 APRIL 2016**

**RESOLVED** – That the Order of the Court of Common Council of 21 April 2016, appointing the Committee and approving its terms of reference, be noted.

### **4. ELECTION OF CHAIRMAN**

The Committee proceeded to elect a Chairman in accordance with Standing Order No.29. The Town Clerk read a list of Members eligible to stand and Wendy Mead, being the only Member expressing a willingness to serve, was duly elected as Chairman of the Committee for the ensuing year.

### **5. ELECTION OF DEPUTY CHAIRMAN**

The Committee proceeded to elect a Deputy Chairman in accordance with Standing Order No. 30. A list of Members eligible to stand was read, and Chris Boden and Revd Dr Martin Dudley declared their willingness to serve, if elected.

A ballot having been taken, votes were cast as follows:-

Chris Boden 1 vote

Revd Dr Martin Dudley 3 votes

**RESOLVED** - That the Revd Dr Martin Dudley be duly elected as Deputy Chairman for the ensuing year.

**6. CO-OPTION OF A HEALTHWATCH REPRESENTATIVE**

**RESOLVED** – That Steve Stevenson be co-opted as the representative for Healthwatch.

**7. APPOINTMENT OF INNER NORTH EAST LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE REPRESENTATIVE(S)**

**RESOLVED** – That the Chairman and Deputy Chairman be appointed to the Inner North East London Joint Health Overview and Scrutiny Committee.

**8. ANNUAL WORKPLAN**

Members received a joint report of the Town Clerk and Director of Community & Children's Services regarding the Committee's meetings and activities for the year. The Director of Community & Children's Services advised that Agenda Planning meetings would be co-ordinated by the Town Clerk for all Committee Members to feed into the workplan, and confirmed that the officer support would be divided between Social Care and Public Health items to ensure any potential for conflict of interest for officers was avoided.

**RESOLVED** – That the proposed schedule of meetings and officer arrangements be agreed.

**9. PUBLIC HEALTH SERVICE LEVEL AGREEMENT BETWEEN THE CITY OF LONDON AND THE LONDON BOROUGH OF HACKNEY**

The Committee welcomed Gareth Wall, Head of Public Health Services for Adults at the London Borough of Hackney, to the meeting. Mr Wall presented a report on an agreement between the City of London and the London Borough of Hackney regarding the management of public health services. An agreement of this nature had been in place since April 2013 and was reviewed annually for content, activity and price.

Members discussed the report, and noted that a large proportion of spend went on sexual health (education and testing). This was demand-led, with individuals accessing care on a walk-in basis and costs recovered from the patient's home borough. Mr Wall advised of an integrated tariff agreed across London to simplify and improve the cost recovery basis. In response to a Member's question, Mr Wall reported that costs of care for City workers were currently met by the City of London Corporation, but that work was underway to improve the identification of patients' home postcodes which, combined with the integrated tariff, would improve billing to the appropriate borough.

**RESOLVED** – That the report be noted.

## **10. PLANNED PRIVATE PATIENTS UNIT AT ST BARTHOLOMEW'S HOSPITAL**

The Committee welcomed Casper Ridley and Ian Walker, Commercial Director and Trust Secretary for Barts Health NHS Trust, to the meeting. Mr Ridley and Mr Walker gave a presentation regarding a proposal for a private healthcare provider to invest in the Pathology Building and RSQ Building at St Bartholomew's Hospital, which were in a dilapidated state and required significant investment to make them usable. Barts Health did not have the resources to develop the site for NHS use, and were seeking to develop their private sector revenue stream.

Mr Ridley advised that this opportunity would benefit Barts Health and City workers and residents for a number of reasons, and made the following points:

- There would be no negative impact on NHS services provided at the hospital.
- There would be no cost to the NHS. The land would be leased and the freehold retained, with all costs of restoring and equipping the buildings for use as a modern healthcare facility being absorbed by Nuffield Health (as the preferred bidder). The completed facility would be handed back to Barts Health at the end of the lease period (which was yet to be confirmed).
- A multimillion pound revenue stream would be provided over its lifetime for Barts Health to invest back into NHS services.
- Nuffield Health had also indicated interest in buying NHS services on top of this lease agreement. This would provide for further revenue, and would ensure expensive equipment owned by Barts would be fully utilised.
- Barts Health employed consultants currently undertaking private practice work elsewhere could move this to a site closer to their primary NHS work. This would have benefits to emergency planning.
- City workers and residents would be allowed an increased choice for private medical care, as well as the provision of a joined-up care pathway through Nuffield Health corporate GPs and health assessments.
- This development would be linked to other Nuffield Health medical centres and their post-operative programme.

Members queried the plans, with particular regard to patient experience, the level of risk involved with the project, and the timescale for completion. Mr Ridley and Mr Walker confirmed details, clarifying that financial risk was being absorbed by Nuffield Health who had undertaken robust market share analysis. Negotiations were currently underway, with contract agreement anticipated for June/July 2016. Final completion was anticipated for 2018, although this was dependant on a number of details, including securing planning permission.

The Committee agreed to support the project, conditional upon:

- there being no negative impact on provision of services to NHS patients through private use of NHS equipment; and
- the Barts Pathology Museum being unaffected.

**RESOLVED –** That the proposal be noted, and a comfort letter be sent to Barts Health on behalf of the Committee.

**11. CITY OF LONDON CARE NAVIGATOR**

The Committee welcomed Marion Willicome-Lang, Service Manager for Adult Social Care, who presented a report on the Care Navigator role in the City of London. Members noted that the service was designed to help ensure City residents being discharged from hospital were being successfully linked up with the correct follow-on services and support. The service had been operational since January 2015 and was commissioned from Age UK East London. Members noted that, building on the success of the role, funding had been secured from the Better Care Fund for a continuation of the service for a further year.

In response to Members questions, Members noted the City and Hackney CCG had allocated some non-recurring funding to help address delayed transfers of care and emergency admissions in the City of London, and that proposals were being developed for a new service to support City residents taken to Accident and Emergency but not admitted to hospital, who needed support to return home safely during unsociable hours. With regard to staffing, Members noted the Age UK East London provided back-office support and covered when a Care Navigator was on leave.

**RESOLVED** – That the report be noted.

**12. AGENDA ITEMS FOR NEXT MEETING**

**RESOLVED** – That the Committee's Terms of Reference be reviewed at a future meeting.

**13. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

**14. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

There was no urgent business.

**The meeting closed at 12.34 pm**

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Chairman

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