

CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE** held at Room 14, Priory House, Monks Walk, Shefford on Friday, 15 October 2010.

PRESENT

Cllrs	Ann Sparrow Andrew Turner	Cllrs	Apu Bagchi Judith Cunningham Shan Hunt	Cllrs	Anna Pedreson Margaret Simons Lakbir Singh
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Apologies for Absence: Cllrs Mrs S A Goodchild
J Kane
Carl Meader

Officers in Attendance:	Mr C Bernard	–	Bedford LINK
	Ms A Brown	–	Luton LINK
	Mrs M Clampitt	–	Central Bedfordshire Council
	Mrs J Gray	–	Bedford Borough Council
	Mr D Levitt	–	NHS Bedfordshire
	Mr P Loose	–	Bedford Borough Council
		–	NHS Bedfordshire
		–	NHS Luton
	Miss C Powell	–	Central Bedfordshire Council
	Ms P Ryan	–	South Essex Partnership University NHS Foundation Trust (SEPT)
	Mr H Shoebridge	–	NHS Bedfordshire
	Mr B Siong	–	Luton Borough Council
	Mr B Smith	–	Central Bedfordshire LINK

JHOSC/10/1 **Election of Chairman**

The Overview and Scrutiny Officer for Central Bedfordshire Council invited nominations for Chairman of the Bedfordshire and Luton Joint Health Overview and Scrutiny Committee on Mental Health Services for 15 October 2010 meeting.

Cllr Andrew Turner, Central Bedfordshire Council was the only candidate nominated and seconded. He was therefore appointed Chairman for the meeting.

RESOLVED

that Cllr Andrew Turner be elected as Chairman of the Joint Health Overview and Scrutiny Committee meeting held on 15 October 2010.

JHOSC/10/2 **Chairman's Announcements**

The Chairman welcomed everyone to the meeting and requested that everyone introduce themselves and if relevant who they had replaced on the panel.

JHOSC/10/3 **Minutes**

RESOLVED

that the Minutes of the Informal Meeting of the Bedfordshire and Luton Joint Health Overview and Scrutiny Committee on Mental Health Services held on 3 September 2010 be approved as a correct record. Subject to the following amendments:- Peter Loose, Assistant Director, Adult Services, Bedford Borough Council had been present at the meeting and that Cllr Anna Pederson had been present during the Planning Session.

JHOSC/10/4 **Members' Interests**

(a) **Personal Interests:-**

There were no declarations made.

(b) **Personal and Prejudicial Interests:-**

There were no declarations made.

(c) **Any Political Whip in relation to any agenda item:-**

There were no declarations made.

JHOSC/10/5 **NHS Bedfordshire consultation process on premises development for Mental Health Services in Bedford Borough, Central Bedfordshire and Luton**

The Committee received and considered the consultation management and communications plan October 2010 from NHS Bedfordshire. The Assistant Director of Public Engagement, NHS Bedfordshire provided the Committee with an overview of the consultation and how the information would be compiled.

It was noted that an independent peer review had been carried out by NCAT which had resulted in support being given to the proposals and to the 60 day consultation. In addition, there was a three day review by the OGC Gateway Review which would conclude on 15 October 2010. The review tested that the proposals were clinically sound. It was confirmed that the SHA analysis of reconfiguration tests were sufficient for GPG. This confirmed that patient engagement and patient choice had been accounted for.

The Assistant Director of Public Engagement highlighted the four key aims were as follows:-

1. Improve mental health assessment and admission inpatient services for adults and older people by clustering services more closely together in more suitable buildings on or close to acute local hospital sites, or in new or refurbished existing facilities in the local community, where appropriate.

2. Encourage and enable health and other care staff to work in a more joined-up way to make services safer and more patient focused.
3. Focus on each individual and enable health and other care staff to work in a more joined-up way to make services safer and more patient focused.
4. Deliver assessment and admission inpatient services in a more cost-effective way to ensure best use of NHS money.

These four key aims were the underpinning of the seven proposals which were as follows:-

1. To transfer adult admission services from a residential area (Townsend Court) in Houghton Regis to a refurbished existing facility on the nearby Luton and Dunstable acute hospital site by July 2011.
2. To transfer adult admission services from a residential area (Oakley Court) in Luton to refurbished existing facilities on the nearby Luton and Dunstable acute hospital site by March 2012.
3. To transfer older people inpatient services (non-dementia) in Houghton Regis (Poplar Ward) to refurbished facilities on the nearby Luton and Dunstable acute hospital site by July 2011.
4. To transfer older people with Alzheimer's disease (dementia) from Beech Ward in Luton to Townsend Court in nearby Houghton Regis by September 2011.
5. To transfer older people with Alzheimer's disease (dementia) from Milton Ward in Weller Wing at Bedford Hospital to a refurbished facility within Fountains Court close to Bedford Health Village (formerly Bedford Hospital's north wing site) by December 2011.
6. To transfer older people inpatient services (non-dementia) from Chaucer Ward in Weller Wing to Cedar Ward at Bedford Health Village (formerly Bedford Hospital's north wing site) by September 2012.
7. To develop a purpose-build unit at Bedford Health Village (formerly Bedford Hospital's north wing site) for a Mental Health Act Section 136 suite, adult assessment and admission inpatient services by December 2012, subject to receiving full planning consent.

The Committee were informed that the consultation document was both comprehensive and easier to read. It would be sent to 150 stakeholders, be available on websites and in public locations. There will be a summarised leaflet with a tear off response leaflet.

The list of stakeholders was on page 19 of the consultation document. In addition, it was agreed that a list of the stakeholders from the Voluntary and Community Sector would be emailed to all members of the Committee to ensure that no groups have been overlooked.

The consultation period would be sixty days. It was felt that thirty days would not allow sufficient time for all of the stakeholders to reply. The other factors were as follows:-

- Need to implement decisions as soon as possible
- Financial situation – the cost efficiencies for NHS Bedfordshire. It was calculated to £125k a month for every month the decision was delayed.
- The consultation results will go to the NHS Board in January 2011. The decisions will be implemented in April 2011. The approximate cost will be £375k.
- A forty-five day consultation had been considered but did not allow as full a response time.

To ensure that marginalised groups are consulted, NHS Bedfordshire will have the following people help:-

- 8 community workers meeting people in vulnerable groups
- 14 health champions – AMAES (?), homeless charities.
- Community events and festivals will be used
- All information will be available upon request in different languages.
- Health visitors will be used.
- Service users – extensive background work had been work done.

It was noted that NHS Bedfordshire had recently won a national public health award.

The Assistant Director for Public Engagement informed the Committee of the questions which had to be answered to have a successful consultation:-

1. Promoting and publicising the consultation well enough?

SEPT was working with the Beds on Sunday. In addition, public locations including posters, council magazines and doctors' surgeries supporting the consultation.

2. What can consultees influence?

The seven proposals were already supported by GPs and service users. The process would be honest and open.

3. How would the information be collated?

The NHS owns the consultation programme and it would be updated as the responses are received. Reports would be available as the process is carried out thus allowing under representation of specific groups to be rectified prior to the end of the consultation period. The information will be handed over to an Independent Organisation for data analysis.

4. How will it be a transparent decision?

The results of the consultation would be on the web in January 2011. The outcome would be considered at a public meeting in January. The raw data less the names will be available upon request. A press release will be issued.

5. How will consultees be responded to?

A letter including the composition of the results will be written to the four thousand members of the foundation trust individually.

The Committee was invited to ask questions of the Assistant Director for Public Engagement who provided answers. It was confirmed that an acceptable rate of return from the Consultation would be between 5 – 10%. 16,000 documents will be posted out.

Concerns were raised in relation to the loss of immediate access for special vulnerable people from Bedford Hospital A & E to Weller Wing, with the proposed new unit being located 1.6 miles away at the North Wing site. Transport would be an issue. Bedford Hospital appears to be losing its specialities. Officers explained that there was only a six bed reduction and that community services must be available. It also explained that the transport issue was being addressed.

How would people who were not visiting their doctors on a regular basis be included? The following explanation of coverage was given:-

The Consultation would be widely publicised and the general public would be given access to information through websites and documents being available at doctor's surgeries. Some people who only receive annual checkups could be known to the Community Mental Health Team. In addition it was agreed that Sure Start centres would be accessed as a point of reference. It was noted that some mental health was treated by GPs. NHS Bedfordshire Officers would be available to attend all meetings.

Concerns were expressed about the tight timeframes between the start date of the consultation and the revisions being made to the consultation document. In particular concerns were expressed about the complexity of the questions. It was felt that the questions were leading and could only give one answer. The Assistant Director for Public Engagement agreed that the following would be considered:-

- The questions to be shortened and made easier to read
- The syntax of the questions to be reviewed
- The follow up question to be changed to "how would you do this" or something similar
- Addition of a box so that the number of people associated with the group can be recorded.
- Addition question "do you think this is achievable?"

- “To what extent do you agree or disagree with the following questions:-“ would be added and the statement removed from the beginning of each question.

It was agreed that the revised consultation questions would be emailed to the Members of the Committee by the Scrutiny Officers to allow comments prior to being printed on Monday 18 October 2010.

The Committee noted that the public consultation document would be twenty pages in length and include a four page consultation response document and an additional six page leaflet which contained an eight page leaflet with questions relating to the consultation.

It was clarified that the consultation was for the whole of Bedfordshire and Luton and all information would be collated in one location at NHS Bedfordshire. Links would be established on the NHS Luton website which would connect directly to the main consultation site.

Members of the Committee highlighted that there were fourteen health champions in the Luton area which carried out the same functions as health trainers. It was agreed that they would be contacted.

It was noted that the consultation would finish on 20 December 2010 and it would then take three to four weeks to collate and prepare the final report for the Board to consider at the end of January 2011.

The Committee wanted to be assured that the maximum exposure was given to the consultation and requested that the citizen panels which existed in all three authorities were utilized.

AGREED

that the Committee agreed the 60 day consultation was acceptable.

JHOSC/10/6 Joint Health Scrutiny Committee scope and planning for future meetings

The Committee considered the Scoping Document and Planning for future meetings, which provided an overview of what the Committee would be looking at during its existence and the Committee's Terms of Reference.

It was noted that meetings would be held on a rotational basis by each authority. Bedford Borough Council had hosted the first informal meeting and Central Bedfordshire Council hosted the second meeting and Luton Borough Council hosting the third meeting.

It was the wish of the Committee that the hosting Council would provide a Chairman for that specific meeting. The Terms of Reference for this Committee were agreed by the three Councils, which state that a Chairman was to be appointed at the first meeting to preside over all of the required meetings. It has been agreed that the Scrutiny Officers would consider how the Committee's wishes could be met prior to the next meeting of the JHOSC.

The Committee discussed the number of meetings it would need to hold and it was agreed that a further three meetings would be required. The Overview and Scrutiny Officers would liaise and determine a set of dates and then confirm with the Members of the Committee.

The next meeting would be held in late November or early December and would consider the progress of the consultation process to that date. NHS Bedfordshire would be invited to the meeting to give an update.

The following meeting would be held in early January before the NHS Board meet and would review the findings to date of the consultation. In addition, the Committee would consider whether enough contacts had responded and also ask the NHS to confirm who was consulted and any missed groups to be highlighted.

It was asked that the NHS be requested to separate the data between Bedfordshire and Luton. It was also suggested that as a list of all third party contacts would be circulated by the Overview and Scrutiny Officers to the members of the Committee that members could highlight organisations which were located in both Luton and Bedfordshire to make sure that both perspectives were received.

The last meeting would be held in February 2011 and would consider the outcome of the NHS Bedfordshire Board's meeting and decisions about the proposals in light of the consultation.

RESOLVED

- 1. that the Joint Committee, using the attached scoping document as a tool to focus its work within the agreed terms of reference, be approved.**
- 2. that the Joint Committee, having regard for the attached scoping document which informed of the work of the Committee going forward, request that the three Councils amend the Terms of Reference to allow each Council to appoint a Chairman at the appropriate meeting.**

(Note: The meeting commenced at 10.00 a.m. and concluded at 12.00 p.m.)