

# MINUTES OF THE MEETING OF THE LEICESTERSHIRE, LEICESTER AND RUTLAND JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Held: MONDAY, 22 SEPTEMBER 2008 at 10.00am

# PRESENT:

# Councillor Allen (Chair) Mr D. Houseman CC (Vice-Chair)

Leicester City Council

Councillor Bhavsar Councillor Hall

**Leicestershire County Council** 

Mr A.D. Bailey CC Ms. B. Newton CC Mrs J. A. Dickinson CC Mrs Page CC

(Sub for Mr. J.W. Liquorish)

\* \* \* \* \* \* \* \*

# 14. APOLOGIES FOR ABSENCE

Apologies were received from Councillor Dawood, Councillor Gill and Councillor Manish Sood (Leicester City Council) and Mr A. D. Bailey CC, Mr J. G. Coxon CC and Mr W Liquorish(Leicestershire County Council).

### 15. DECLARATIONS OF INTEREST

Members were asked to declare any interests they may have in the business on the agenda and/or declare that Section 106 of the Local Government Finance Act 1992 applied to them.

Councillor Allen declared a non-prejudicial personal interest as his wife was in receipt of a care package provided in the City.

Councillor Hall declared a non-prejudicial personal interest as he was a member of University Hospitals Leicester (UHL) and Leicestershire Partnership NHS Trusts.

Mr Houseman CC declared a personal interest in Item 11 of the minutes of the

previous meeting ("Disposal of Syston Ambulance Station), as he lived in the vicinity of Syston Ambulance Station.

Ms Newton CC declared that she had a non-prejudicial personal interest as she had one son employed by Leicestershire Partnership NHS Trust and a daughter employed by University Hospitals Leicester.

### 16. MINUTES OF PREVIOUS MEETING

### **RESOLVED:**

that the minutes of the meeting held on 21<sup>st</sup> July 2008 be agreed as a correct record.

# 17. NEXT STAGE REVIEW

Jo Yeaman, Director Lead, Engagement and Communications, Leicester City NHS Trust attended the meeting and gave a presentation on the Next Stage Review.

Jo stated that the review was part of a series of reviews being conducted across the country as part of the national 'Our NHS, Our Future: Next Stage Review', led by Lord Darzi. The East Midlands region were also looking at the NHS locally and were undertaking a clinically led review comprising 8 separate work streams covering birth to end-of-life services across Leicester, Leicestershire and Rutland, the proposals for this review were launched on 15<sup>th</sup> July and the engagement programme would formally end at the end of October 2008. An outline of the events and festivals attended and of the media coverage employed as part of the engagement programme to date was reported and it was stated that there were still 2 weeks to go. All comments received would be fed back into the clinical workstreams and that an independent evaluation would be undertaken by Loughborough University. Proposals had been identified and published and funding identified for programmes in 2009/10.

Jo outlined progress made to date: -

- Over £2 million invested in stroke services in current year working towards a 24/7 stroke service to be in place by end of 2008
- Opening of a new Urgent Case Centre (to become 24/7)
- Development of primary and community care strategy investment in existing and new facilities
- Nearing conclusion of county community hospital review
- 1,000's of local people involved in local NHS developments building good community relations
- Improving relationships between clinicians across NHS
- Fully integrated and supported programme of change for local NHS over next 10 years.

Jo was thanked for her presentation and the Committee welcomed the independent evaluation of the findings, together with the proposal to move to

24/7 stroke services by March 2009.

RESOLVED:

that the information be noted.

# 18. EAST MIDLAND SPECIALIST COMMISSIONING UNIT

Kate Caston, Director of East Midlands Specialised Commissioning Group (EMSCG) presented the first annual report of the EMSCG.

Kate stated that the group was a regional group that had been running for about 12 months, and the group wanted to ensure that they were accessible to the local population. Currently a prioritisation process was being developed and it was the intention to discuss the process during the re-configuration process.

Kate stated that work was also underway to make sure that people continued to flow through the hospitals and facilities in the East Midlands region and discussions were taking place with areas on the boundaries of the region with a view to getting people from outside the region using the East Midlands facilities. Kate also stated that information was required from local communities to enable local strategies to be developed.

The Chair stated that discussion needed to take place as to how best the group could engage with the Joint Health Overview and Scrutiny Committee, the frequency of input and of what levels of policies would be required to be seen.

Following discussion it was agreed that the Chair, Vice Chair and Spokespersons would meet with the officers before reaching an agreement on the levels of input required from EMSCG.

### **RESOLVED:**

that the Chair, Vice-Chair and Spokespersons meet with the officers to discuss the optimum levels of input required from the EMSCG.

# 19. UNIVERSITY HOSPITALS OF LEICESTER - 'GETTING INTO SHAPE' - PRESENTATION

Malcolm Lowe-Lauri, Chief Executive, University Hospitals Leicester NHS Trust attended the meeting and gave a presentation on the implementation of new processes.

It was stated that the Board of UHL did not currently have a Finance Committee and there had been changes of structure implemented to ensure that the Board met more frequently and covered specific areas. Monthly profit and loss accounts were now available and the current financial procedures were being reviewed. Regarding the organisational capabilities a review was

underway to move away from the current centralised basis towards the implementation of 'pinnacle' directorates. The current Health system partnerships were also to be reviewed and updated towards the development of partnerships with industrial partners. Other areas highlighted for change was the current payroll system that had been the cause of a number of recent problems.

Malcolm stated that at a previous meeting post 'Pathway' funding of £70m had been referred to. A recent meting had been held with civil servants and the good news was that there was no case of disputing the Minister's promise of £70m. A technical argument was now underway as to how UHL get the funding and what constraints are likely to be placed on its use. UHL had been asked to work up more detailed proposals. Further feedback would be provided when the position regarding the Government money was clearer.

### RESOLVED:

that the information reported be noted.

# 20. LEICESTERSHIRE PARTNERSHIP NHS TRUST - CONSULTATION ON APPLICATION TO BECOME A NHS FOUNDATION TRUST

Professor Sheehan, Chief Executive, Leicestershire Partnership NHS Trust (LPT) attended the meeting and outlined the current services offered by the LPT.

Prof. Sheehan outlined the benefits of LPT becoming a NHS Foundation Trust, giving more freedom to decide how local services could be provided and the creation of financial freedom to invest in improvements. The changes would ultimately lead to LPT being more accountable to local people.

Prof. Sheehan outlined the structure that would run the local NHS Foundation Trust that included a Council of Governors, made up of 29 Members as follows:

- 10 Public representatives from across the area
   Leicestershire County 6
   Leicester City 3
   Rutland 1
  - 3 Carers representatives
- 3 Service User representatives
- 3 Staff representatives
- 10 Appointed representatives

# Total 29

Members questioned whether details of the financial appraisal would be made available at a later date, together with an opportunity to view the assets register of the LPT, and that a response to this request be made in writing.

Prof. Sheehan stated that an independent study of the LPT plans was

underway and, unless LPT was deemed to be financially viable they would not pass the foundation trust test and the results of this exercise would be made available, together with details of assets.

### **RESOLVED:**

that the information reported be noted and that the Joint Health Overview and Scrutiny Committee look forward to the receipt of the information requested.

# 21. ANY OTHER URGENT BUSINESS

The Chair and Vice-Chair agreed to the following item of business being included on the Agenda as a matter of urgency as information was required before the next meeting of the Committee.

# No. 1 The Grange

The Chair questioned whether a final decision had yet been taken regarding No. 1 The Grange.

Prof. Sheehan stated that discussions had taken place regarding the provision of respite care and that he was under the impression that a decision on the future of No. 1 The Grange would be taken in the context of the wider review of respite care. LPT have decided to keep the facility open for a period of time until the review on respite care had been completed, and that this position had not changed. If there were any concerns about the review Prof. Sheehan stated that he would be happy to feed these into the review and any concerns about No. 1 The Grange then these would be considered at the conclusion of the review.

Members stated that they had a number of concerns about the future of No. 1 The Grange and that they would like to see these concerns alleviated as soon as possible and a request was made to make available to the Committee a complete written financial breakdown of the existing funding of No. 1 The Grange, indicating the financial contribution from each partner.

#### RESOLVED:

that the position reported be noted and that a written financial breakdown be provided that gives a detailed breakdown of the financial contributions from each partner in respect of No. 1 The Grange.

### 22. DATE OF NEXT MEETING

It was noted that the next meeting would be held at 10.00am on Monday 24<sup>th</sup> November 2008.

### 23. CLOSE OF MEETING

The meeting closed at 12.30pm

