

Agenda Item 3

HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

17 OCTOBER 2013

7.15pm-9.15pm

PRESENT: Councillors: Logie Lohendran (Chair), Peter McCabe (Vice Chair), Richard Chellew, John Dehaney, Brenda Fraser, Maurice Groves, Debbie Shears and Greg Udeh.

Co-opted members: Myrtle Agutter, Laura Johnson, Sheila Knight, Saleem Sheikh,

ALSO PRESENT: Councillor Linda Kirby, Councillor Suzanne Evans, Dr Kay Eilbert, Director of Public Health, Annalise Elliot, Head of Safer Merton. Matthew Hopkins, Chief Executive, Epsom and St Helier University Trust, Peter Davies, Director of Strategy & Business Development, Epsom & St Helier University Hospitals NHS Trust. Tim Wilkins, Epsom and St Helier University Trust. Stella Akintan, Scrutiny Officer.

1 DECLARATIONS OF PECUNIARY INTEREST

There were no declarations of pecuniary interest

2 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Caroline Cooper Marbiah

3 MINUTES OF THE MEETINGS HELD ON 25 SEPTEMBER

The Scrutiny officer reported that Councillor Suzanne Evans highlighted that she was present at the last meeting and this should be recorded in the minutes.

A panel member asked if there had been any decisions on Norfolk Lodge. The scrutiny officer said that the Panel were emailed a letter from the Clinical Commissioning Group giving reassurance that no decision had been made on Norfolk Lodge pending a review of mental health services.

A panel member expressed concern that they had not received a minute of the confidential safeguarding discussion. The scrutiny officer reported that a response to the questions raised in the discussion would be circulated to councillors by email.

4 EXTENSION OF ALCOHOL PATHWAYS TO INCREASE PREVENTION

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Dr Kay Eilbert, Director of Public Health gave an overview of the presentation

A panel member asked how public health can be used to tackle alcohol abuse problems when it is not one of the reasons for objecting to a licensing application.

The Director of Public Health reported that they will provide a map of licensing outlets overlaid with alcohol hotspots to help the licensing committee review new applications in light of these hotspots. The Head of Safer Merton reported that community safety is a reason for challenging a licensing application.

A panel member asked if we are ensuring that those retailers who sell to underage young people are being reprimanded.

The Head of Safer Merton said that trading standards use police cadets to attempt to buy alcohol (and other age preclusive goods) if the transaction takes place then the council/police take further action.

It was asked how many had been prosecuted over the last twelve months?

The Head of Safer Merton said that the local authority seek to warn and educate people in the first instance, prosecutions are used in more serious cases. Trading standards will be asked to provide the panel with information on the numbers of individuals / organisations has been prosecuted and/or warned.

A panel member asked for more detail on the work to support BME communities

The Director of Public Health said that we have the 'Live Well' project which provides information on smoking, alcohol, diet, exercise. The project is currently being re-commissioned and will include health champions who will be representatives from the BME and hard to reach groups who will be able to access their community and signpost people to the relevant services.

The Head of Safer Merton said that having specific 'ethnic' organisations undertaking outreach (within the drug and alcohol services) was an approach that was proving successful. For example within the Polish community.

A panel member asked what the alcohol action zone pilot will involve. The Director for Public Health reported that we are still awaiting more details but it is likely to be local freedoms to develop innovative approaches to alcohol issues.

A panel member said many of these programmes have been around for a long time, is there any evidence that they actually work?

The Director of Public Health said the smoking has been the greatest public health success over the last 50-60 years. Part of the success is due to individual lifestyle change and a large part involved making smoking more difficult through higher taxes. The council is also looking at its own levers to reduce the availability of alcohol.

A panel member asked if we are training council staff as well as the fire service to talk to local people about smoking cessation and alcohol services. Also, how many

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people will be trained?

The Director said there is an ambition to embed training for council frontline staff, as well as external front line staff. A more detailed action plan will come to this Panel in due course.

A panel member asked if friends and carers will have the opportunity to refer people that they are concerned about to alcohol support services?

The Director reported that all innovative approaches would be considered, although there may be issues with confidentiality. The Head of Safer Merton reported that there are helplines for friends/family, success is based on people recognising their problem and seeking help.

A panel member said that if we have limited resources they should be targeted at young people and schools.

RESOLVED

Panel to receive a detailed action plan on alcohol prevention programmes when it is available

Panel to receive statistics on how many businesses/ individuals who have been warned or prosecuted about selling alcohol to people who are under age.

5 SUTTON HOSPITAL SERVICE CHANGES

The Chief Executive of Epsom and St Helier University Trust told the panel that there are still major financial issues at the Trust. Overall they are looking at consolidation across its three main sites to improve patient care and financial efficiency.

The Project Director at Epsom and St Helier gave an overview of the presentation highlighting that this proposal is about transferring services not closing them. Sutton Hospital caters for 10% patients across the Trust, half of the buildings are empty. Nine out of ten Merton patients will be closer to their treatment.

A panel member asked for more information on the impact of parking, what will happen to the Sutton site? How much is it worth and where will the money go?

The Project Director at Epsom and St Helier reported that there has been more detailed work on parking than may be apparent from the presentation. They have looked at staff travel patterns, travel distances and looked at how many spaces are needed. It was found that one hundred spaces are needed at St Helier and fifty at Epsom. At St Helier they are looking at a decked car park, subject to planning permission. The Trust are also looking at other modes of transport for staff such as cycling as well as flexible working arrangements.

There is more focus on getting services right before looking at the future of the site. The long term plan is to come off the site completely and discussions will be held

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with relevant partners on the plans.

Relocating services will deliver around £3.6 million annual savings. This money could make a significant dent in the deficit. There will be discussions with the NHS hierarchy about leasing or selling the land depending on if they can retain the land receipts.

A panel member asked how this programme is impacted by Better Services Better Value?

The Chief Executive said that If Better Services Better Value changes come about they will be implemented in 2018. The Trust has to continue with business as usual in the mean time, these consolidation proposals are about improving patient experience and staff satisfaction.

A panel member asked if the Trust is looking at shared services across the Trust. The Chief Executive reported that a conversation is being held about this.

A panel member asked if the proposals will impact upon waiting times and if there will be more clinics? It would be useful if the Panel could receive updates on these issues.

The Trust said that they are focussed on improving waiting times, there will be more clinicians in one place which will hopefully improve waiting times and access.

A panel member pointed out that there had not been an adequate explanation of anticipated difficulties.

The Project Director at Epsom and St Helier said that the document provided was the case for change which did not outline the risk assessment. Difficulties include the issues around travel and the need to be smarter about the use of space. The Trust will share details of the risk assessment at future meetings

A panel member said they support initiatives that saves the services at St Helier. In 2010 there was an offer of £219 million for the re-development of St Helier, £6 million has been spent decanting, what is the current situation with this money?

The Chief Executive reported that the Treasury has said no funds can be released until Better Services Better Value has concluded, given that there has been a number of delays the outline business case is now out of date and a new one will be need to be produced before further monies are released.

RESOLVED

The Panel agreed that the proposals did not constitute a substantial variation in services.

The Panel would like further updates on the proposals including figures on waiting times and impact of any increased travel times

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The Chair asked Councillor Linda Kirby as Chair of the Health and Wellbeing Board to give an update of their last meeting on the 1st October.

Councillor Kirby reported that the Health and Wellbeing Board is progressing well, Merton's strong partnership working is a particular strength. Cllr Kirby also expressed thanks to all those who had been involved in the recent Peer review the outcomes from this will be available shortly.

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