

BRIGHTON & HOVE CITY COUNCIL
HEALTH OVERVIEW & SCRUTINY COMMITTEE

4.00PM 4 MARCH 2009

COUNCIL CHAMBER, HOVE TOWN HALL

MINUTES

Present: Councillors Mrs Cobb (Chairman); Allen (Deputy Chairman), Alford, Barnett, Harmer-Strange, Kitcat, Rufus and Marsh

Co-opted Members: Hazelgrove (Older People's Council)

PART ONE

70. PROCEDURAL BUSINESS

70A Declarations of Substitutes

70.1 Councillor Mo Marsh announced that she was attending as a substitute for Councillor Craig Turton.

70B Declarations of Interest

70.2 Councillor Steve Harmer-Strange declared a personal interest in relation to agenda Item 77 (NHS Dental Services), as he is a regular user of Brighton & Hove specialist children's dental services.

70C Declarations of Party Whip

70.3 There were none.

70D Exclusion of Press and Public

70.4 In accordance with section 100A(4) of the Local Government Act 1972, it was considered whether the press and public should be excluded from the meeting during the consideration of any items contained in the agenda, having regard to the nature of the business to be transacted and the nature of the proceedings and the likelihood as to whether, if members of the press and public were present, there would be disclosure to them of confidential or exempt information as defined in section 100I (1) of the said Act.

70.5 **RESOLVED** – That the Press and Public be not excluded from the meeting.

71. MINUTES OF THE PREVIOUS MEETING

- 71.1 **RESOLVED** – That the minutes of the meeting held on 05 November 2008 be approved and signed by the Chairman.

72. CHAIRMAN'S COMMUNICATIONS

- 72.1 The Chairman congratulated Brighton & Sussex University Hospitals Trust on having been nominated for a national award as the most improved NHS trust in the South East region in terms of infection control.

73. PUBLIC QUESTIONS**73A Public Question from Mr Ken Kirk**

- 73.1 Mr Kirk asked the following question:

“We already know that the B&H PCT (Primary Care Trust) didn't conduct a proper public consultation over the setting up of a GP Clinic, contravening the Department of Health's PCT Procurement Plan. The PCT has given the contract for it to Care UK who run the SOTC (Sussex Orthopaedic Treatment Centre). It was revealed at the November HOSC that the SOTC selects the cheaper surgical procedures, leaving the BSUHT (Brighton & Sussex University Hospitals Trust) to fund the expensive ones. At the meeting a senior clinician stated the hospital has a £2 - £3 million deficit as a result. On whose behalf does B&H PCT spend our NHS funds? Would the committee investigate the awarding of this contract?”

- 73.2 Members discussed this question and determined that it would be desirable to set up an ad hoc scrutiny panel to investigate the process by which a contract for the Brighton & Hove GP-Led Health Centre had been awarded.
- 73.3 Councillors Alford, Allen and Kitcat agreed to sit on the ad hoc panel; Councillor Allen agreeing to sit with the proviso that the panel should take the absolute minimum time required to examine the matter properly.
- 73.4 Mr Kirk then asked a supplementary question in which he suggested that it might be good practice for NHS Brighton & Hove to conduct a regular audit of the GP-Led Health Centre and adjoining GP practices in order to measure whether the GP-Led Health Centre was having a negative impact upon other surgeries in the area.
- 73.5 The Chairman told Mr Kirk that this idea would be considered by the ad hoc panel, and thanked Mr Kirk for his question.
- 73.6 Darren Grayson, Chief Executive of NHS Brighton & Hove, told members that he welcomed a review of the GP-Led Health Centre. Mr Grayson informed the committee that the GP-Led Health Centre initiative was Government policy and that Primary Care Trusts were bound to commission health centres in line with this policy.
- 73.7 In response to a comment from a member suggesting that there should have been public consultation on the location of the Brighton & Hove health centre, Mr Grayson

informed members that NHS Brighton & Hove had consulted on the location and had presented the results of this consultation to a previous Health Overview & Scrutiny Committee (HOSC) meeting. Mr Grayson told the committee that the development of the GP-Led Health Centre should be welcomed as it would provide a valuable addition to the city's primary care facilities.

73B Public Question from Mr Jack Hazelgrove (Older People's Council)

73.8 Mr Hazelgrove asked the following question:

"Owing to the limited availability of chiropody services on the NHS, many older people are paying privately (often around £25) for treatment. Could NHS Brighton & Hove outline the current arrangements for provision of this service and any plans to increase the availability of treatment for older people. Could NHS Brighton & Hove also explain the criteria for 'rationing' the service and indicate any system of prioritisation for certain 'at risk' groups (e.g. diabetics)."

73.9 The Chairman thanked Mr Hazelgrove for his question. As the question sought fairly complex information, the Chairman had decided that she would not seek an answer at this meeting, but rather would ask NHS Brighton & Hove to provide a full written answer for the next scheduled committee meeting.

74. NOTICES OF MOTION REFERRED FROM COUNCIL

74.1 There were none.

75. WRITTEN QUESTIONS FROM COUNCILLORS

75.1 Councillor Jason Kitcat asked the following question:

"Can the Chief Executive of the Primary Care Trust (NHS Brighton & Hove) detail who will pay for the planning process, building and refurbishment required for opening the city centre GP-led clinic? Will it be Care UK, the PCT or another body?"

75.2 Members were referred to a written answer from NHS Brighton & Hove (re-printed in the papers for this meeting).

75.3 Councillor Kitcat then asked a supplementary question relating to patients' ability to register at the GP-Led Health Centre. Mr Grayson responded by saying that any city resident could register or receive unregistered treatment at the centre. It should also be possible for patients to register at the GP-Led Health Centre and retain registration with their local GP.

75.4 Mr Grayson added that the GP-Led Health Centre was expected to have a list of around 5000 patients when fully operational – in line with the list size for an average GP

surgery. At this kind of size, it was not anticipated that the GP-Led Health Centre would have an impact on adjoining GP practices such that it might compromise their viability.

- 75.5 Mr Grayson was also asked to confirm whether the figures he had recently given the committee for activity at the Sussex Orthopaedic Treatment Centre referred to total activity or activity commissioned for Brighton & Hove residents. Mr Grayson confirmed that these figures represented total activity at the centre.

76. LETTERS FROM COUNCILLORS

- 76.1 There were none.

77. NHS DENTAL SERVICES: UPDATE ON THE NEW DENTAL CONTRACT

- 77.1 This Item was introduced by Claire Quigley, Director of Delivery, and by Cherie Young, Primary Care Commissioner for Dental and Optometry Services, NHS Brighton & Hove.
- 77.2 Ms Quigley and Ms Young answered members' questions on subjects including: the quality of NHS dentistry Vs that of private dentistry; the cost of the NHS dentistry helpline; the definition of a dental emergency; dental hygiene services; dental operations and the 18 week targets; and charges for anaesthesia.
- 77.3 Members were informed that at the current time 27 (out of a total of 50) city dental practices were open to new NHS patients. The city dental helpline will direct callers to their nearest dental practice with spaces available. Should people present for treatment at a practice which has no spaces, staff at that practice should be able to advise of locally available alternatives. City GPs should also be able to signpost their patients to a local NHS dentist.
- 77.4 Members were told that attendances at city dentists had fallen markedly following the introduction of the new dental contract in 2006 (as had attendances nationally), but that attendance figures were now on the rise again. NHS Brighton & Hove is committed to ensuring that people who wish to access city NHS dental services are enabled to do so and to this end the PCT has been running radio adverts and events at Brighton station to publicise local dental services.
- 77.5 Ms Quigley promised to provide the committee with additional information setting out the range of dental services provided by the NHS. She also agreed to supply a map showing the location of city dental practices, so that members could see how the location of practices mapped against areas of deprivation.
- 77.6 **RESOLVED** – That members will require an update report on dental services in six months time.

78. BRIGHTON & HOVE CITY TEACHING PRIMARY CARE TRUST (PCT) 2009-2010 ANNUAL OPERATING PLAN

- 78.1 This Item was introduced by Claire Quigley, Director of Delivery, NHS Brighton & Hove.

- 78.2 In answer to questions relating to health inequalities, members were told that addressing inequalities was a priority for NHS Brighton & Hove.
- 78.3 Members were told that funding for capital improvements was not included in the Annual Operating Plan as this was generally a matter for NHS provider trusts. NHS Brighton & Hove is directly responsible for relatively little estates and only funds some expansion of primary care practices.
- 78.4 In response to queries regarding midwifery services, the committee was told that services were being developed via an ongoing consultative process. This is expected to include the development of a local birthing centre and steps (still being finalised) to improve continuity of care. The cost of these changes will largely be met from within the tariff payments for these services (i.e. as a re-allocation of current funding rather than as additional funding).
- 78.5 **RESOLVED** – That officers supporting the Health Overview & Scrutiny Committee provide members with a digest of the NHS Brighton & Hove 2009-10 Annual Operating Plan, and that this digest be used to inform the committee's future work programme.

79. THE ANNUAL GP SURVEY REPORT

- 79.1 Members considered the Annual GP Survey and agreed that the Chairman should write a letter to the Secretary of State for Health detailing the following concerns.
- 79.2 The committee recognised that the GP survey is concerned with services provided under the GP contract and not with other services which may be based in practice premises, but which are not GP-provided services (for example, community midwifery). However, members thought that this division between GP-provided and GP practice-based services, whilst sensible from the perspective of NHS contract management, was unlikely to be considered so by members of the public, who would prefer the opportunity to comment on all services provided at GP practices via the GP survey.
- 79.3 The committee agreed that GP practice opening hours were an important issue, but felt that an opportunity had been missed to comment on the opening hours of prescribing pharmacies. Members argued that there was often little point in being able to access a GP in the evening if it was then impossible to get a prescription filled until the next morning. A question asking respondents how important they considered round-the-clock pharmacy services would have allowed the NHS to assess the level of demand.
- 79.4 Committee members also thought that the survey did not make adequate provision for respondents who are registered with a GP practice which has restricted working hours. It was felt that the survey was worded in such a way that respondents with poor access to a GP might struggle to convey their access problems adequately, and the survey might consequently give a false impression of satisfaction levels.
- 79.5 **RESOLVED** – That the Chairman should write a letter to the Secretary of State for Health setting out members' concerns (as outlined in points 79.2, 79.3 and 79.4 above).

80. HEALTH OVERVIEW & SCRUTINY COMMITTEE (HOSC) WORK PROGRAMME

- 80.1 Members discussed the committee work plan, noting that items on the Brighton & Hove Local Involvement Network, Section 75 Agreements and Organisations in the Local Health Economy had been postponed until later meetings.
- 80.2 Items arising from this meeting which will need to be added to the work programme are: dental services review and report on chiropody services.
- 80.3 Amanda Fadero, Deputy Chief Executive, NHS Brighton & Hove, suggested that the Committee might wish to receive an update on the Community Care strategy alongside the scheduled report on plans to develop tertiary care at the Royal Sussex Hospital site (the '3 Ts' initiative).

81. ITEMS TO GO FORWARD TO CABINET OR THE RELEVANT CABINET MEMBER MEETING

81.1 there were none.

82. ITEMS TO GO FORWARD TO COUNCIL

82.1 There were none.

The meeting concluded at Time Not Specified

Signed

Chair

Dated this

day of