

EPHING FOREST DISTRICT COUNCIL OVERVIEW AND SCRUTINY MINUTES

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|---------------------------|--|--------------|----------------------------|
| Committee: | Overview and Scrutiny Committee | Date: | Thursday, 13 December 2007 |
| Place: | Council Chamber, Civic Offices, High Street, Epping | Time: | 7.30 - 9.35 pm |
| Members Present: | Councillors R Morgan (Chairman) D Bateman, R Church, K Chana, M Colling, R D'Souza, Mrs H Harding, D Kelly, G Mohindra and Mrs J H Whitehouse | | |
| Other Councillors: | Councillors Mrs D Collins, Mrs A Cooper, R Frankel, T Frankland, Mrs A Grigg, Mrs P Smith, Ms S Stavrou and C Whitbread | | |
| Apologies: | Councillors K Angold-Stephens, Mrs A Haigh, J Hart and Mrs P Richardson | | |
| Officers Present: | D Macnab (Deputy Chief Executive), I Willett (Assistant to the Chief Executive), N Richardson (Principal Planning Officer), J Gilbert (Director of Environment and Street Scene), S G Hill (Senior Democratic Services Officer), A Hendry (Democratic Services Officer) and Z Folley (Democratic Services Assistant) | | |
| By Invitation: | R Powell (Princess Alexandra Hospital), J Day (Princess Alexandra Hospital), A Thomas (West Essex Primary Care Trust) and J Carr (West Essex Patient and Public Involvement Forum) | | |

48. WEBCASTING INTRODUCTION

The Chairman made a short address to remind all present that the meeting would be broadcast on the Internet, and that the Council had adopted a protocol for the webcasting of its meetings. The Sub-Committee noted the Council's Protocol for Webcasting of Council and Other Meetings.

49. SUBSTITUTE MEMBERS

It was reported that Councillor K Chana was substituting for Councillor J Hart and Councillor Mrs J Whitehouse was substituting for Councillor Mrs A Haigh.

50. DECLARATIONS OF INTEREST

No declarations of interest were reported pursuant to the Councils Code of Conduct.

51. APPOINTMENT OF VICE - CHAIRMAN

RESOLVED:

That Councillor Mrs H Harding be appointed as the Vice – Chairman for the duration of the meeting.

52. MINUTES**RESOLVED:**

That the minutes of the meeting held on the 8 November 2007 be taken as read and signed by the Chairman as a correct record.

53. FOUNDATION TRUST STATUS APPLICATION: THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST

The Chairman welcomed to the meeting Mr R Powell and Mr J Day of the Princess Alexandra Hospital (PAH) who was in attendance to report on their application for Foundation Trust Status. Also in attendance was Aidan Thomas, the Chief Executive of the West Essex PCT and Mr John Carr of the West Essex Public Involvement Forum who reported the views of their respective organisations on the proposals.

It was noted that NHS Foundation Trusts were 'not for profit', public benefit corporations which were still part of the NHS 'family' (a copy of the PAH presentation is attached). He advised on the key features of the applications which provided for the hospital to:

- exercise more say in how the hospital was run and financed;
- consolidate and enhance their role as the local hospital of choice;
- enable staff and members of the public to be more involved in decision making and the planning of services;

He reported on the consultation process for the plans for trust status involving the provision of information, a newsletter, events for feedback and opportunities to elect representatives and stand for elections on the Council of Governors for the Trust. A Public meeting would be held in each constituency. The deadline for responses to the plans was 13 January 2008.

- **Governance Arrangements**

Mr Powell advised that the plans provided for PAH to be governed by an elected Board of Directors, a Council of Governors chaired by the Chair of the Trust and a membership drawn from staff, local people and partners.

The Board and Governors would be accountable to the membership who would have the choice of being actively involved in the Trust. The Electoral Reform Society had undertaken to run the elections and provide information on ways of voting.

It was planned that the Board of Directors would meet on a monthly basis and the Council of Governors on a quarterly basis. It was suggested that the meetings should be webcast to open them up to the public. A Member questioned the Boards ability to hold the Trust to account given they shared the same Chairman? It was clarified that this element of the structure was determined by government legislation. The hospital would continue to be monitored by the Healthcare Commission.

- **Membership**

The Trust aimed to have a membership of 7,500 by the summer of 2008. There was no upper age limit on membership but the minimum age was 14.

The Committee noted that the hospital was encouraging both Council Members and staff to take up membership of the Trust to enable them to report the views of the local constituents and scrutinise performance. It was recommended that steps should be taken to encourage such involvement.

- **Funding**

The proposals would enable the PAH to exercise more control over their budget, invest surplus funding into their own services and borrow money for services. However, they would still have to achieve balanced budgets.

The plans would also enable the hospital greater freedoms to run their services. The Strategic Health Authority would set a Performance Framework for the Foundation Trust.

A Member asked about the funding spent on administrative staff? Mr Powell stressed the need for such staff as they enabled the clinical staff to perform their roles rather than administrative duties. He was also of the view that there was a shortage of administrative staff at the hospital.

- **Response by PCT and PPI**

Aidan Thomas of the PCT reported the views of the PCT. He reminded members that the PCT commissioned services from the PAH and carried out work with the hospital to develop Accident & Emergency Services and improve performance. The PCT had expressed support for the application but still felt a number of issues required further consideration. These related to the 'patient experience' and the problem of MRSA.

He advised that there were plans to cut health services in Hertfordshire and increase housing numbers in the region. He stated that this was expected to place additional pressure on PAH services and increase dependence on the service. Given these challenges, he stressed the need for continued close working between the PCT and PAH. He felt that the proposals would facilitate the services required for dealing with these pressures.

He reminded Members that Trust status would provide opportunities for public and PCT involvement in the running of the hospital. There was also uncertainty over the future of PAH should Trust Status not be granted.

John Carr of the Patient and Public Forum (PPI) reported the views of his organisation. The PPI broadly shared the views of the PCT. All of their Members had received an opportunity to comment on the proposals. He reported on concerns surrounding the hospitals Breast Screening Service. He reported that the government had reduced the minimum age for mandatory breast screening from 56 to 47 placing additional pressures on the service and a backlog. There were also concerns around the hospitals discharge procedures.

Mr Thomas clarified that the PCT did not have the capacity to solve the backlog as the problems related to issues outside of their control. A recent Audit inspection suggested that the options identified for dealing with this were unsafe.

Mr Powell agreed to look into these issues. He asked for specific details of the problems.

- **A&E Services**

It was noted that demand on A&E was increasing. There was a need to increase the capacity of these services. The Committee were reassured that these services would not be placed at risk. There were plans to increase investments in these services to expand capacity.

Having considered the application, the Committee expressed the Councils full support for the application and agreed that the Council should nominate a Partner Governor to the Trust once it has been agreed by the Secretary of State.

RESOLVED:

- (1) That the Council expresses its full support for the application by Princess Alexandra Trust for Foundation Trust Status
- (2) That the Council nominate a Partner Governor to the Trust once it had been agreed by the Secretary

54. AREA PLANS SUB-COMMITTEE - THREE WEEK CYCLE

The Chairman of the Constitution and Member Services Standing Panel, Councillor R Church, invited the Committee to consider and the Panels recommendations on their review of the frequency of Area Plans Sub – Committees.

The Panel had been asked by the Director of Planning and Economic Development to review arrangements for the frequency of Area Plans Sub – Committee. The Panel noted that it was his view that changes in the frequency of meeting would assist in achieving top quartile performance in dealing with planning applications.

The report recommended that with effect from 2008/09 provision be made in the Council's calendar of meetings for a meeting of each Area Plans Sub Committee every three weeks.

The Committee noted that the Local Town and Parish Council had been invited to respond to the proposals. The Committee received written responses from a number of Local Councils – (North Weald, Loughton TC) and comments from Councillor Mrs C Pond. A key concern was that the proposed changes did not allow them sufficient time to respond. They were also of the view that a three weekly cycle could restrict their ability to properly consider cases and submit comments in time for inclusion on the Area Sub agenda.

The Committee heard that assessments had been carried out to identify the accommodation, staffing and printing costs of the additional meeting. The proposals would require an additional 14 meetings of Area Plans South and officer support from Planning and Democratic Services for each of the additional meetings, together with rent and printing costs.

The Committee felt that the Council should aim to deliver a first class services to its residents. However in order to enable them to carry out a proper cost/benefit assessment of the options, they agreed that a further report on the following points needed to be prepared:

- costs of moving to a three weekly cycle;
- implications of using the 'fallow week' in the calendar (where there was no meeting of the Area Plans Sub – Committees) for extra meetings of Area Plans South;

- implications of the plans to provide extra April/May meetings of the Sub – Committees during the Electoral period. It was suggested that the Council should test out this step before considering the need for a three weekly cycle;
- referring the matter to the Task and Finish Panel for the Provision of Value for Money in Planning Services who were currently reviewing the Development Control Service.
- revising the delegated powers scheme to enable more cases to be dealt with under such powers;

It was also suggested that the reports should cover:

- customer views on performance;
- the numbers of applications deferred at meetings;
- the Planning Services Improvement Plan – measures and indicators for improving performance;

The Committee also expressed a wish to give Local Council's more time to consult their Members on the proposals and submit comments.

In view of these issues, the Committee agreed to defer the item for consideration at their next meeting on 31 January 2008 to allow for a report on the outstanding issues to be prepared.

They also noted the need to approve any changes before April 2008 at the latest to give officers time to finalise the calendar of meetings for 2008/09 and arrange the accommodation required for a three weekly cycle.

RESOLVED:

(1) That the recommendations of the Constitution and Member Services Panel arising from their review of the frequency of Area Plans Sub – Committee meeting be deferred for consideration at the 31 January 2008 OSC;

(2) That a further reported on the outstanding issues identified by the meeting be submitted to that meeting.

55. ACCESS TO COMMUNICATION AND INFORMATION ARRANGEMENTS

It was reported that at their last meeting, the Constitution and Members Services Panel considered a request submitted by Councillor Mrs Cooper for scrutiny of communication and access to information arrangements. This request had been referred to the Panel by this Committee.

The Panels proposals indicated a pragmatic approach to the issues raised. Recommendations (1) and (6) would require further reports to members. The other recommendations could be programmed and/or actioned as appropriate. There were no Constitutional issues.

The Committee supported the proposals.

RESOLVED:

- (1) That a review of the use of ward Councillors forms be undertaken and reported back to the Panel;
- (2) That consideration be given to including a session within the Members Training Programme about how issues are considered by the Councils Committee and where to go for information about services;
- (3) That a hierarchy chart of the Council staff and structure be provided for members on completion of the Senior Management review;
- (4) That officers be reminded of the desirability of reports from meetings not attended by Members appearing in the Council Bulletin as and when appropriate;
- (5) That a 'new documents' shelf be created in the Members Room together with work to remove old and obsolete materials to enable faster location of documents;
- (6) That consideration be given to including a summary box on committee reports;
- (7) That future planning training sessions cover the main aspects of the various local and national plans and related current issues; and
- (8) That consideration is given to strengthening the advice to potential Councillors about the need for attending new Councillor induction sessions following their election.

56. WORK PROGRAMME MONITORING

The Committee reviewed and noted the work programme for the Overview and Scrutiny Committee and its standing panels.

(i) Finance and Performance Management Standing Panel

The Chairman of the Panel, Councillor J M Whitehouse, reported that the Panel had considered figures for KPIs performance during the first six months of this year. He advised that the target set by the Cabinet of achieving 75% in the top quartile was ambitious. The Panel had undertaken to review the targets next year. The Panel had also considered proposals for next years Fee and Charges and referred these to the Finance and Performance Management Cabinet Committee. The Panel also considered a report on the Land Assessts Review and agreed to keep a watching brief over the emerging plans.

(ii) Environmental and Planning Services Standing Panel

The Chairman of the Panel, Councillor, Mrs P Smith, reported that the Panel had last met on 6 December 2007. The meeting was held to consider the findings of their sub group on the Cleaner Neighbourhoods Act 2005 and the Rogers Review of Enforcement Priorities. It was noted that the Panel had made some changes to their recommendations to clarify the aims of the review. They would be submitting their formal report to the next meeting on 31 January 2008.

(iii) Crime and Disorder Task and Finish Panel

The Panel was currently being held in abeyance as it was awaiting to receive directions from government. The Committee expressed concern at this and asked that its Terms of Reference be reviewed at the annual review of the plan in March 2008.

57. CABINET REVIEW

The Committee considered the Cabinet agenda for its meeting on 12 November 2007. No further issues were raised for consideration by the Cabinet.

CHAIRMAN

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Why we want to become an
NHS Foundation Trust

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Overview

- What is an NHS Foundation Trust?
- What are the benefits for the local community and for our staff?
- Proposals for the new structure of the NHS Foundation Trust
- Examples from other Foundation Trusts
- How you can get involved
- Timescale for the consultation process and beyond
- Listening to your views

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What is a Foundation Trust?

- NHS Foundation Trusts are organisations which are better able to develop services to suit the needs of the communities they serve
- As not for profit, public benefit corporations, they are still part of the National Health Service ‘family’
- Most importantly, Foundation Trusts are accountable to staff and local people through their membership and an elected Governor Council of Governors which will work closely with the Trust’s Board of Directors to influence decision making and planning

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What Foundation Trusts are...

- Hospitals are still firmly part of the NHS
- Offering treatment free at the 'point of access'
- Still have to achieve national quality of care performance standards
- A public benefit corporation
- Continue to be monitored by the Healthcare Commission
- Still have to achieve balanced budgets
- Continue to work with key partners
- Provide greater accountability to local people and staff
- Have greater freedoms to invest in services and respond to changing needs of the local population

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What Foundation Trusts aren't...

Busting the Myths...FTs are NOT...

- Private hospitals
- 'Closed' organisations
- Organisations with no accountability to their local people and staff
- Organisations which are not accountable to Parliament
- Organisations which are no longer subject to NHS quality standards, performance ratings and inspections

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Why we want to be an NHS Foundation Trust

We want to deliver our vision for the future

Our vision is: to enhance our position as the local hospital of choice by ensuring that all services are innovative, high quality and patient centred. This will be supported by our service ethos which promotes reliability, safety and effectiveness.

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Benefits for local community

You can....

- Find out more about the work of the hospital and Trust through events and updates and a Members' newsletter
- Give your views on services and the Trust's plans for the future both in informal discussion and through surveys and formal consultation events
- Join and participate in special interest groups and take part in seminars and workshops on health issues
- Learn more about how to improve your own health and take part in health promotion campaigns in the community
- Become more informed of the work of the Trust and promote the work of the Trust in the local community
- Elect representatives from the Trust membership to the Council of Governors
- Stand for election on to the Council of Governors

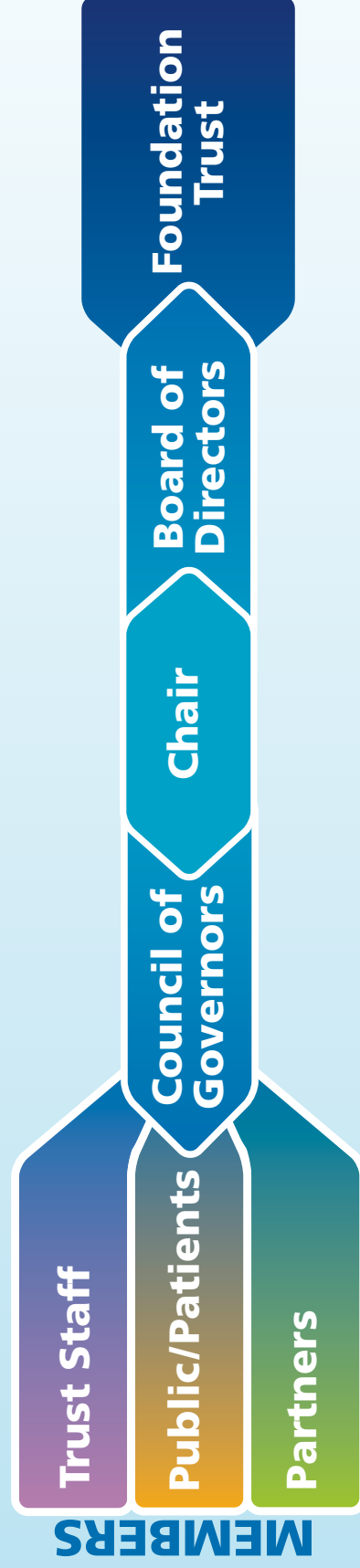
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Proposals for the new structure

Foundation Trusts are organised and governed differently

- Members
- Council of Governors
- A Board of Directors



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Members

- Aiming for a membership of 6,000 plus by January 2008 and 7,500 by the summer of 2008
- Comprising:
 - public (including patients)
 - staff
 - partners (local councils, PCTs)

Membership is free – but means participation and responsibility

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Public Members (including Patients)

Who can be one?

- Open to anyone who is resident in the local authority districts of
 - Broxbourne
 - East Hertfordshire
 - Epping Forest
 - Harlow
 - Uttlesford

Staff members

Intention to have an opt out scheme for staff

Eligibility:

- have a contract of employment that does not have a fixed term, or
- have a contract of employment with a fixed term of at least 12 months, or
- have been continuously employed for at least 12 months, or
- hold an honorary contract for no fixed term for at least 12 months, or
- be registered with the hospital Staff Bank (requirements as above), or
- be employed by another organisation that is providing services to the Trust under an ongoing service contract in excess of 12 months,
- be a volunteer working in the Trust in excess of 12 months

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Other members

- Nominated from organisations such as West Essex Primary Care Trust, GPs, local authorities, voluntary and community organisations

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Members will:

- Have the choice of being involved in a range of activities at the hospital
- Be kept up to date with what's going on at the hospital
- Work with hospital staff to improve the patient experience of our services
- Influence proposed changes to services and future developments
- Vote to elect Governors or stand for election on the Council of Governors

Council of Governors

Members of the Council of Governors

- Will act as 'critical friends' to the Foundation Trust
- Will be led by the Chair of the Foundation Trust
- Must be elected from the body of the membership
- Will represent a particular constituency either: - professional group in the case of staff,
 - geographical area for the public member, or
 - a particular partner organisation in the case of nominated members
- Represent the views of the Trust's membership
- Work alongside the Board of Directors
- Share local responsibility for the success of the Trust
- Promote public health within the activities and services provided by the Trust
- Act as guardians in ensuring the Trust operates within its terms of authorisation
- Act as ambassadors for the Trust

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Governors' formal responsibilities

- Appoint the Chair and Non-Executives Directors of the Foundation Trust
- Approve the appointment of the Chief Executive Officer
- Appoint the Trust's Auditors
- Make recommendations for the revision of the Trust's constitution
- Elected to serve for three years – training provided for all Governors

Governors are NOT responsible for day to day management of hospital services

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Proposal for Council of Governors



The Chair of the Trust presides over the Council of Governors

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Board of Directors...

...will be responsible for the day to day management and accountability of the Foundation Trust.

Made up of:

- six Non-Executive Directors, one of whom is the Chair
- five Executive Directors, one of whom is the Chief Executive Officer and another the Chief Financial Officer, plus a registered medical or dental practitioner and a registered nurse or midwife

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How you can get more involved

- Give us your views and feedback on this consultation – complete the consultation questionnaire
- Tell us what you think about the proposals for the governance structure, in particular your views on the constituency breakdown
- Tell others about this exciting opportunity
- We will use your comments and feedback in our submission to the Secretary of State for Health

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Timescale

- 22 October 2007
- 13 January 2008

We welcome invitations from groups and organisations to come and talk to you.

Public meetings will be held in each constituency:

| Constituency | Date | Venue | Time |
|-------------------|----------------------------------|--|--|
| Uttlesford | Monday 5 November 2007 | Uttlesford Council Offices, Committee Room, High Street | |
| | | Dunmow CM6 1AN | 7.30 – 8.30pm |
| Epping | Monday 12 November 2007 | Epping Town Council Offices, Epping Hall, St John's Road, | |
| | | Epping CM16 5JU | 7.30 – 8.30pm |
| Harlow | Thursday 15 November 2007 | Harlow District Council, Civic Centre, The Water Gardens, | |
| | | The High, Harlow CM20 1WG | 7.30 – 8.30pm |
| Harlow | Tuesday 20 November 2007 | Princess Alexandra Hospital, Social Club, Hamstel Road | |
| | | Harlow, Essex CM20 1QX | 7.30 – 8.30pm |
| Broxbourne | Tuesday 27 November 2007 | Borough Offices, Bishop's College, Beaufort Suite | |
| | | Churchgate, Cheshunt, Waltham Cross, Hertfordshire EN8 9XQ | 7.30 – 8.30pm (note: can also use rear car park) |
| East Herts | Wednesday 5 December 2007 | Rhodes Art Complex, Cedar Room | |
| | | South Road, Bishop's Stortford, Hertfordshire CM23 3JG | 7.30 – 8.30pm |

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We want to hear from you!

Questions???

Thank you for listening

- Website: www.pah.nhs.uk
- Email: ft@pah.nhs.uk
- FREEPHONE: 0800 032 9006