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MINUTES OF A MEETING OF THE SOUTH AREA FORUM NHS SE ESSEX STRATEGIC PLAN SCRUTINY PANEL HELD AT COUNTY HALL, CHELMSFORD ON 30 JULY 2010 AT 11.30AM

* Mrs E Hart (Chairman)* C Riley* G Butland* B Robin

* A Crystall Mrs K Twitchen

* R Howard * M Velmurugan

* M Maddocks Ms P Weaver

Officers in attendance were:

Sallyanne Thallon - Area Co-ordinator
Graham Redgwell - Governance Officer
Matthew Waldie - Committee Officer

1. Apologies and Substitution Notices

 Apologies were received from County Councillor Twitchen, Borough Councillor Robin and Councillor Weaver.

2. Membership of Task and Finish Group

The following were confirmed as members of the Panel:

Essex County Councillors

Cllr Mrs Elizabeth Hart

Cllr Colin Riley

Cllr Kay Twitchen

Essex County Councillor HOSC Representative

Cllr Graham Butland

Essex County Councillor South Area Forum Representative

Cllr Ray Howard

Borough and District Councillors

Cllr Alan Crystall
Cllr Malcolm Maddocks
Cllr Blaine Robin
Cllr Dr Marimuthu Velmurugan
Southend Borough Council
Southend Borough Council
Southend Borough Council

Vacancy

Parish and Town Councillors

Cllr Patricia Weaver Rochford Hundred Association

Vacancy

^{*} Present

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3. Appointment of Chairman

Councillor Hart was confirmed as Chairman.

4. Declarations of Interest

The following declarations of interest were declared:

Councillor Crystall Trustee of Southend Hospital Trust

Councillor Riley In receipt of an NHS pension

Councillor Velmurugan Trustee of Southend Hospital Trust, practising

GP

5. Scoping Document

Members noted the scoping document AFSSP/SRC/01, as circulated.

The Chairman reminded members that the scrutiny commissioned by the Health Overview and Scrutiny Committee (HOSC) for the Panel to carry out concerned the deliverability of the strategic plan, not its content. She added that the full plan was substantial; HOSC had identified four particular aspects of the plan and the Panel must focus on these.

They were:

- 1, the productivity drive, especially in the context of current financial constraints and expected savings in management spend;
- 2, the high spend in relation to mental health commissioning compared to patient outcomes;
- 3,.how best to target spend in relation to public health to have impact on targeted priority areas;
- 4, delivering better access to community health facilities and addressing perceived East/West divide and postcode lottery of access to services.

The Panel agreed the terms of reference. The Area Co-ordinator **Agreed** to bring proposals for a communications strategy to the next meeting of the Panel.

It was noted that significant research would be required to enable the Panel to carry out its work effectively. This would not only involve relevant data from the SEE PCT, but would require comparative data from other PCTs. It was also noted that the Panel should be able to highlight good practice as well as areas of concern.

One concern was voiced: that the Panel must be careful to avoid duplication with any work that Southend had already carried out in this area.

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6. Identification of information required from NHS South East Essex

Relevant officers of the SEE Trust should be approached, including the Chief Executive, and various stakeholders should be identified and invited to contribute. Essex and Southend LINk would also be invited as witnesses. The importance of having contributions from actual working clinicians was acknowledged and two in particular were named: Dr Pelter and Dr Houston. They would be likely to provide interesting if very different views.

Councillor Butland proposed taking a particular line with the Trust with regard to the first issue, that of productivity. The Trust should be asked to set out its top six to ten areas of productivity that will (in the Trust's view) produce savings and have the greatest positive impact on patients. The document setting these out should be restricted to no more than two sides of A4. This exercise should concentrate the mind and help clarify the Trust's position for the Panel. The Panel agreed to this approach.

The Panel also noted that issues such as the merits of one approach to care rather than another were only relevant to the scrutiny insofar as they impacted on the Trust's ability to deliver. Consideration of such issues themselves might be covered at some later date, but this should not be the Panel's concern.

One further issue was raised, in the wake of the Government's White Paper, which had been published after the Strategy Plan. This proposed the commissioning of health care provision to GP led consortia. The Governance Officer pointed out that, even if the proposals in the White Paper were taken up, a lot of legislative change would be required for them to take effect. Consequently, the Strategic Plan would be relevant for some time to come.

7. Dates of next meetings

The date of the next meeting was confirmed: **Monday 23 August at 1.00 pm**. Venue: County Hall.

The proposed meeting on 27 September was not confirmed, as the Chairman would be unavailable on that date. Committee administrator to circulate potential alternative dates.

The meeting closed at 12.25 pm.