

minutes



Meeting	LOCAL IMPROVEMENT FINANCE TRUST (LIFT) SELECT COMMITTEE
Date	Monday, 10th March 2008 (commencing at 2.30 pm)

Membership

Persons absent are marked with `A`

COUNCILLORS

Chris Winterton (Chair)
Brian Wombwell (Vice-Chair)

	Mrs K Cutts	Edward Llewellyn-Jones
A	Andy Freeman	Martin Suthers OBE
A	Pat Lally	A Parry Tsimbiridis
A	Bruce Laughton	

Co-opted Members: Ms Shirley Inskip)
Mr Tom Turner) Patient & Public Involvement Forum
Mr Glen Swanwick)

ALSO IN ATTENDANCE

Ms Jo James – Nottinghamshire County Teaching PCT – Manager - Health Centres

APPOINTMENT OF CHAIR AND VICE-CHAIR

The appointment by the Overview and Scrutiny Committee on 28th January 2008 of Councillor Chris Winterton as Chair and Councillor Brian Wombwell as Vice Chair of the Select Committee was noted.

MEMBERSHIP OF THE SELECT COMMITTEE

The Committee noted that Councillors Pat Lally, Mrs K Cutts, Bruce Laughton and Martin Suthers OBE had been appointed to the vacancies on the Select Committee, and that Ms Shirley Inskip, Mr Tom Turner and Mr Glen Swanwick had been appointed as co-opted members of the Select Committee.

The membership of the Select Committee was noted.

APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Andy Freeman and Councillor Bruce Laughton.

DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS

None.

SCOPING REPORT FOR SCRUTINY REVIEW – LIFT BUILDINGS

Matthew Garrard – Scrutiny Officer – presented the report and detailed the history of the provision and use of LIFT buildings in Nottingham and Nottinghamshire. Local Improvement Finance Trusts are public private partnerships contracted to provide buildings for use as centres of healthcare within local communities, especially those where there is a lack of provision of services. The buildings remain the property of the company for the 25 years of the contract and are leased to local General Practices, Social Services, and other public bodies that provide services to the community. The report listed the buildings currently in operation as care centres and compared the services that were proposed with those that were being provided.

He pointed out the concerns raised by the Joint Health Scrutiny Committee and the Patient & Public Information Forum (PPIF) about the proper utilisation of space, with particular regard to Stapleford and Keyworth Care Centres, and the need for future developments to ensure that the buildings were suitable for the purpose intended. He highlighted some issues that the Committee may wish to consider within the scope, such as the process involved in developing a proposal, the company role in project management, the design in relation to proposed use, the allocation of space and service agreements with potential occupiers.

He reported that Nottinghamshire County Teaching PCT (NCtPCT), in partnership with Practice Based Commissioning, were responsible for commissioning services and aim to provide healthcare care services to patients in the community. The Committee may wish to look at how the NCtPCT were involved in arrangements for the use of buildings, identified the needs of various clusters, developed the provision of additional services, and planned to utilise any unoccupied space.

Councillor Wombwell expressed the view that clinics dealing with problems specific to a community should be treated in that community, and that Consultants should be made aware of the facilities provided locally. He was concerned that the Care Centres had a lot of unutilised space, and that the first class provision of treatment centres and operating suites, which were unused, was a waste of valuable resources.

Jo James, NCtPCT, explained that Practice Based Commissioning provided General Practitioners and Specialist nurses to provide healthcare services for patients in the community, that outreach services have different models of care from those provided in the past and this must be taken into account.

Tom Turner, PPIF, said that the public and some patient groups had been consulted during the planning stages of the buildings but some of the facilities proposed do not materialise, and others are unused because treatment continues to require hospital referral.

Councillor Mrs Cutts suggested that the Committee should look at other service providers to the community that could be accommodated in the buildings, clinics specific to elderly patients who often had difficulty accessing the larger Hospital

Trusts who would benefit from local provision. Pharmacy, Xray, Physiotherapy, Social Service departments and the Police should be encouraged to use the facilities to provide services where required. Councillor Suthers pointed out that, since the buildings had been provided at considerable expense, they should be fully utilised if treating patients in the community is to become standard practice as originally intended. Shirley Inskip thought that improvements in occupancy should be a priority, so that best value was achieved.

Glen Swanwick reported that Social Services and Broxtowe & Hucknall PCT, who originally planned to use a centre as its headquarters, had been involved in the planning and allocation of space and then did not move in, resulting in two floors of office space not being used. He suggested that proper agreements were required with potential users, and, following complaints from charitable organisations that could provide café facilities and patient support that the leasing costs were prohibitive, that more information should be provided with regard to leasing costs.

Councillor Winterton proposed that that the Committee should visit at least two of the care centres, Stapleford in an urban area, and Retford in a rural area, to present contrasting examples of what can be provided, to look at successes and failures, and establish best practice for future developments. Councillor Llewellyn-Jones suggested that all the other centres be contacted in writing and asked to provide members with information about current trends.

WORK OF THE PATIENT & PUBLIC INVOLVEMENT FORUMS (PPIF)

Shirley Inskip, Tom Turner and Glen Swanwick, members of the Patient & Public Involvement Forum, explained how the PPIF had been involved in the development of services to be provided in LIFT buildings from the beginning, through 'friends of ' groups and the Patient Advice Liaison Service (PALS).

Glen Swanwick pointed out several areas of concern, such as the provision of office space that remains unoccupied, theatres and treatment areas not being used, proposed services that do not materialise for various reasons, poor access to buildings and car parks unsuitable for use by patients with disabilities. He also thought it was unreasonable for service providers, who had agreed to move into the buildings and therefore been allocated appropriate space, to then pull out when the building was completed. He was in no doubt that potential occupants should be contracted to take up the space provided to their specifications.

Shirley Inskip reported that concerns raised by the PPIF about buildings with 60% occupancy had still not been addressed, that resources were not being used effectively and patients were not receiving the benefits of local healthcare services. Councillor Winterton noted that most business premises aimed for at least 80 – 85% occupancy rates and suggested that user groups could be set up to maximise the use of facilities.

As an example of the failure to properly anticipate requirements, Tom Turner explained the situation with regard to the proposed Renal Unit that was unable to proceed due to the lifts in the building that were unable to accommodate the stretcher which would be required if a patient collapsed. Jo James pointed out that when buildings were designed for a specific purpose, the space was not always

flexible and agreed that this could lead to under utilisation, but she was sure that other services could be provided given time.

It was agreed:

- a. that representatives of the LIFT Company should be invited to attend the next meeting and provide Members with information about the process and development of a LIFT building, the allocation of space, agreements with potential users and leasing costs.
- b. that NCtPCT should be invited to attend the next meeting to make a presentation to Members outlining the use of LIFT buildings, any recent changes of use, measures adopted to utilise unoccupied areas, services proposed for future provision and how they meet local health needs.

The next meeting of the Select Committee will take place on Monday, 21st April 2008 at Stapleford Care Centre, if this can be arranged.

The meeting closed at 3.35 pm.

CHAIR

Ref: Lift Select.10 March 2008