

**Academic Health Science Centre Programme
STAKEHOLDER GROUP**

1st February 2007

Boardroom, Charing Cross Hospital

Present:

Chair: Julian Nettel (JN), Chief Executive, SMH
Christopher Buckmaster, (CB) Chair, Kensington and Chelsea Health OSC
Peter Ellis (PE), People in Health
Paul Herbage (PH), Director, The Charitable Fund for Charing Cross, Hammersmith
& Queen Charlotte's & Chelsea Hospitals
Carolyn Keen (CK), Chair, Westminster OSC
Chris Kennard (CKN), Deputy Principal, Faculty of Medicine, IC
Brigitta Lock (BL), Chair, Westminster PCT PPIF
Jane Miles (JM), Chief Executive, St Mary's Paddington Charitable Trust
Maria Murray (MM), Communications Manager, SMH
Don Neame (DN), Programme Communications Lead
Roy Oliver (RO), Chair, St Mary's PPIF
Nick Samuels (NS), Director of Communications, HHNT
Abu Sufian (AS), Partnership Development Officer, Voluntary Action Westminster
Jasbir Sunner (JS), Director of Corporate Development and Strategy, SMH
Amjad Taha (AT), Manager, Black and Minority Ethnic Health Forum
Barrie Taylor (BT), Chair, Health & Social Care Scrutiny Task Force, Westminster OSC
Peter Tobias (PT), Chair, Health & Adult Social Care Committee, H & F OSC
Jeff Zitron (JZ), Hammersmith Hospital PPIF

Apologies:

Simon Crawford, Chief Executive, West London Mental Health Trust

In Attendance:

Kim Michaelis, Forum Co-ordinator for the PPI Forums for Hammersmith Hospitals
and Hammersmith & Fulham PCT

1. Introductions

2. Overview of the Academic Health Science Centre

Julian Nettel gave an overview of the Academic Health Science Centre. **ACTION:**
DN to circulate Powerpoint presentation.

JN explained that one option being pursued on governance was that the partners would apply to be an Academic Foundation Trust under section 5 of the Health and Social Care Act. This had not been done before, but potentially allows organisations or individuals other than NHS bodies, to apply to be a foundation trust.

Barrie Taylor explained the role of the scrutiny committees (to make an assessment of the proposal and to ensure the public have been consulted properly); and indicated that the OSCs were likely to form a joint committee.

Christopher Buckmaster welcomed the concept and looked forward to details. What will happen to Imperial's relationship with other hospitals? (CKN – this will continue as before). Is this a proposal for a new build hospital? (JN – no – we will utilise

existing sites but there may be some relocation of services e.g the success of renal services – but these would be subject to further consultation)

Brigitta Lock. Who are we consulting with? (JN – very widely, and will discuss at future meetings). Will committees be fully involved by the time of the merger (JN – yes, hopefully well before)

Paul Herbage. What funding and assets are Imperial bringing (JN and CK – funding would be brought under the control of the AHSC, but would need to be ringfenced as it is not possible to merge DH and DfES funds without further legislation

Peter Tobias. Clarified that the OSCs reserved the right to convene separate committees if conflicting interests became apparent.

Carolyn Keen. The community will want continuity of care, good basic premises and services, employment of local people etc, not cutting edge science.

Amjad Taha. Need to reach BME groups and to feedback and make sure that any changes do not disadvantage any sections of the community. He advised that an equality impact assessment would be required (DN – the consultation is on the formation of an AHSC which will enable service changes but any proposals for service changes will be subject to separate consultation).

Jeff Zitron. The AHSC needs to be honest about the fact that service changes will occur. (JN. We recognise that fact and aim to engage people for the long term).

3. Terms of reference

CK clarified that by participating the OSCs were not compromising their scrutiny function in the future.

NS clarified that the meetings were not 'held in public' although members were free to report back to colleagues unless items were indicated to be confidential. The terms of reference and membership which had been circulated prior to the meeting were approved

RO requested a GP representative to be invited to meetings. **ACTION: DN**

4. Election of a chair

Members indicated that they would like JN to continue as Chair. JN suggested that if was the case then it should be shared between himself and Derek Smith.

5. Review of engagement leaflet and future work

DN received comments on the engagement leaflet.

Roy Oliver. How will the group be involved in consultation? (DN – variety of ways, eg expectation that all consultation materials would be presented to the group and in the shortlisting and interviewing of consultation consultants who would be responsible for collecting and collating consultation responses and providing a report). **ACTION: DN to circulate tender.**

6. Date of next meeting

Tues 27th Feb at 3pm