

MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Tuesday, 1 November 2022 at 7.00 pm

IN ATTENDANCE: Councillors Chris Best (Chair), Aliya Sheikh (Vice-Chair), Peter Bernards, John Muldoon, Laura Cunningham, Stephen Hayes and Jacq Paschoud

ALSO PRESENT: Councillor James Rathbone, Iain McDiarmid, Tristan Brice (Associate Director, Community Support and Care) (Lewisham Integrated Commissioning Team), Tom Brown (Executive Director for Community Services), Hazel Gleed (LGT Divisional Lead) (Lewisham and Greenwich Trust), Stephen Kegg (Lead Consultant LGT) (Lewisham & Greenwich Trust), Kerry Lonergan (PH Consultant), Dr Catherine Mbema (Director of Public Health) (London Borough of Lewisham) and Katie Wood (Scrutiny Manager)

ALSO PRESENT VIRTUALLY: David Austin (Director of Corporate Services) and Joan Hutton (Director of Operations - Adult Social Care)

NB: Those Councillors listed as joining virtually were not in attendance for the purposes of the meeting being quorate, any decisions taken or to satisfy the requirements of s85 Local Government Act 1972

1 Minutes of the meeting held on 7th September 2022

1.1 RESOLVED:

That the minutes of the meeting held on 7th September 2022 be agreed.

2 Declarations of interest

2.1 RESOLVED:

Cllr Jacq Paschoud declared a personal interest in item 3 as she had a close family member in receipt of a care package from Lewisham Social Care.

3 Budget Reduction Proposals

3.1 Tom Brown, Executive Director, Community Services introduced the report on Adult Social Care Savings and new reforms and David Austin introduced the budget reduction proposals. Joan Hutton, Director of Adult Social Care, Tristan Brice, Associate Director, Community Support and Care and Catherine Mbema, Director of Public Health were also in attendance. In the subsequent discussion, the following key points were raised:

- The savings in learning disabilities and transitions listed in table 8 of the report were cumulative. The Committee heard that Lewisham was an outlier in terms of expenditure on transitions and there was potential to make efficiencies by improving processes.
- The Committee heard that the Council was on track to achieve the savings in full identified by the work by Newton Europe. The changes

brought about were also anticipated to help make future savings as well.

- The representative for HealthWatch and a Member of the Committee asked how confident the Council was in achieving the savings listed under New Burdens, particularly in light of the challenging national economic and social context.
- The work on enablement would help to speed up discharges from hospital and was the best way to help people be more independent. The biggest delays to hospital discharge were where a care home placement was needed.
- There was still uncertainty about the timings of the Fair Cost of Care reforms nationally.
- The Council was now in its 13th year of budget reductions following cuts from central government and the budget had been reduced by £137 million since that time. In the same period of time social care (adults and children) had changed from representing approximately 50% of the overall spend in 2010 to approximately 70%.
- There was still uncertainty around the levels of cuts due to the financial settlement from government still not being confirmed as well as general economic uncertainty and the effects of the higher inflation rates.
- Tables 5.8 and 5.13 listed the decisions that were being proposed to be made by Mayor and Cabinet and by officers as per the scheme of delegation in the Council's constitution. The Committee requested that all cuts should continue to come to the scrutiny committees regardless of whether they were delegated decisions for officers or decisions for Mayor and Cabinet.
- The reduction in hours at Lewisham Libraries would not come into effect until April so would not affect the Warm Welcome policy this winter. The Committee heard that detailed analysis of footfall would take place to fully assess any impact of reducing hours. The Committee requested that the Council should work with and consult community libraries on any proposals and that consideration should also be given to residents using libraries in summer to benefit from their air conditioning during very hot weather. Overall the proposal was for an approximate 4 hours reduction per week per library. There were no proposals to further reduce staff.
- Regarding saving COM_1 on electronic call monitoring, the new system would have benefits to both carers and individuals that use carers. The system would help monitor what was being commissioned and what was being delivered, ensuring the local authority was paying the correct amount for what was actually delivered by providers. It monitored that carers were coming in at the time agreed and staying for the time agreed and ensured data was available to the local authority to monitor care for vulnerable individuals and improve accountability. It could also save time and money investigating any disputes as to when a carer was in attendance. Work had been done with carers to ensure they understood and supported the new system.
- Regarding COM_3 on Care Plan re-assessments, Lewisham had very high costs in this area compared to statistical neighbours and too many people in residential care. Work had been done with Newton Europe looking at case studies and what would be the best outcomes for individuals. A member of the committee commented that some of the physical housing available in Lewisham may not be suitable and money would be needed to address this. The

Committee heard that the Disabled Facilities Grant should be better used to help adapt properties.

- Direct Payments helped people take on an employer role to get a personalised service and avoid agency costs.
- Regarding COM_SAV_04 on Empowering Lewisham, £4 million was reduced 2 years ago and the next set of reductions from the Newton Europe proposals were now being included. Members of the Committee requested a report back at the next meeting on the delivery of the savings proposed as part of the Newton Europe work.
- Regarding COM_SAV_10, members of the Committee were concerned that there had been an underspend in this service, in particular they felt that given the high rates of terminations and subsequent terminations and high rates of use of emergency contraceptive in the borough, it demonstrated more should be done to better support women with their reproductive health. The Committee were informed that the Public Health Budget was ring-fenced so any reduction in spending in one area would be used elsewhere and priority would be given to where there would be the biggest impact on outcomes.

3.2 **RESOLVED:**

The Committee requested that the following comments be referred to the Public Accounts Select Committee:

- 1) **Reducing hours at Lewisham Libraries (COM_SAV_08).** The Committee felt that in light of the policy on “Warm Welcomes” it was essential that the impact of the cut to library hours did not contradict the Warm Welcome Policy and that those groups particularly affected should be carefully considered before any hours were reduced.
- 2) **Sexual and reproductive health services in Primary Care (COM_SAV_10).** The Committee felt that having a £30,000 underspend did not show that the money was not needed and that the outcomes for the service such as Lewisham exceeding the London and national average in use of Emergency Hormonal Contraception and in abortion rates including very high repeat termination rates showed that there was already high levels of unmet need.
- 3) **ASC Empowering Lewisham (COM_SAV_04).** The Committee wanted reassurance that the savings listed were genuinely new savings and not double counting savings that had already been promised in previous budget reduction rounds. The Committee requested a report back on the delivery of the work from the Newton Europe Review.
- 4) **Reassessment of Care Plans (COM_SAV_03).** The Committee felt the proposal highlighted the importance of the DFG Grant and ensuring it was easy for residents to understand and to apply for grants. The Committee wanted to stress the importance of maximising the spend on the DFG as it was an annual capital grant from central Government and in the past had been underspent. The Committee felt it would be useful to know the previous spends and current spend on the DFG.
- 5) The Committee also highlighted that it was concerned with the implications of the economic context in which the cuts were being taken. The additional pressures faced on residents and the Council

from the cost of living crisis combined with uncertainties around the overall budget and financial settlement to local authorities, the Government's Fair Cost of Care initiative, and the Adult Social Care pre-cept coming through to the Council's general fund budget, meant that it was challenging to fully understand all the affects the combination of these and the savings proposals would have on vulnerable residents and to key services.

4 Proposed changes to Lewisham and Greenwich Trust - sexual health services in Lewisham

4.1 Catherine Mbema, Director of Public Health, Stephen Kegg, Lead Consultant for LGT, Kerry Lonergan and Public Health Consultant introduced the report to the Committee. Iain McDiarmid, Director - Adult Integrated Commissioning was also in attendance. During the subsequent discussion, the following key points were raised:

- A member of the Committee was concerned that the equalities implications in the report did not address those that were not using the service because they were unable to access it due to barriers. For example, there may be some embarrassment by individuals in accessing sexual health clinics in particular locations. The Committee heard that the service was aware of these challenges and worked on specific initiatives to help target under-served communities.
- Under the Pan-London tariff, Lewisham was a net beneficiary. The tariff was not currently in line with market value due to inflation.
- Contraceptive advice was available through pharmacists and many services were commissioned through pharmacists. They were also able to refer people on if they couldn't meet their needs. Some services in pharmacies had been reduced since Covid and additional online services have been commissioned to try and meet this gap. More investigation was taking place to assess the implications of this.
- A member of the Committee commented that there were challenges to accessing services online for some residents and that services being entirely online might miss opportunities for safeguarding young people that might be identified in a face to face appointment. The Committee heard that these matters related to other strands of work on sexual health and if requested a further report could come back to Committee.

4.2 RESOLVED:

That the report be noted.

5 Proud to Care update

5.1 Tristan Brice, Associate Director, Community Support and Care, gave a presentation to the Committee and presented a video that can be viewed [here](#). In the discussion that followed, the following key points were raised:

- **The Committee voted to suspend standing orders.**
- Members of the Committee commented that monetary remuneration for those on panels would be positive.
- Members of the Committee asked about succession planning and attracting younger people into careers in caring and whether there were apprenticeship opportunities, training and career progression. The

Committee heard that apprenticeships were part of the process and were being included from level 2 to level 7. The scheme aimed to recruit people through a pool allowing people to match to suitable vacancies and benefit from opportunities to learn and progress and to benefit from employment benefits such as pension and sick leave.

- The HealthWatch representative commented that in future updates it would be useful to continue to show the impact that coproduction with people with lived experiences was having on Proud to Care, including people's examples of being involved.

5.2 **RESOLVED:**

That the report be noted.

6 Cost of Living Crisis

6.1 Catherine Mbema, Director of Public Health introduced the report to the Committee. The following key points were raised in the discussion:

- A member of the Committee and the representative for HealthWatch commented that the "money first" approach was positive because addressing the root causes of poverty was the only way to solve the need for food banks or warm havens. Within the strategy, there was a focus on income maximisation and ensuring Lewisham residents were able to access all the benefits they were due and getting people employment support to help maximise income.
- Work was on-going with NHS partners as how to help build in support.
- Communication strategies were important for example around the Healthy Start programme. There needed to be a focus on outreach and getting out into the community and talking to people. It was challenging within the limited resources available. This linked into the work on the BLACHIR to address inequalities.
- A member of the Committee highlighted that those that have No Recourse to Public Funds (NRPF) and those in temporary accommodation were particularly vulnerable. The Director of Public Health said she would ensure these groups were considered as part of the strategy.
- A member of the Committee commented that warm spaces could be used to support other clubs such as homework Clubs.
- £100,000 had been invested by Public Health for local organisations to apply for projects related to Food Justice. This would be outlined in the plan.
- Mapping warm spaces by ward would be helpful.

6.2 **RESOLVED:**

That the report be noted.

7 Select Committee work programme

7.1 Councillor Chris Best, Committee Chair, introduced the report.

7.2 **RESOLVED:**

1. That the report be noted.

2. That following the item on the Budget Reduction Proposals, regarding **ASC Empowering Lewisham (COM_SAV_04)**, the Committee should have a report back on the delivery of the work from the Newton Europe Review for their next meeting.

The meeting ended at 10.11 pm

Chair:

Date:
