

MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Tuesday 13 September 2016, 7pm

Present: Councillors John Muldoon (Chair), Stella Jeffrey (Vice Chair), Colin Elliot, Jacq Paschoud, Joan Reid, Alan Till and Susan Wise

Apologies: Councillors Paul Bell

Also Present: Aileen Buckton (Executive Director of Community Services), Tim Higginson (Chief Executive, Lewisham and Greenwich NHS Trust), Caroline Hirst (Joint Commissioner, Children and Young People's Services), Ruth Hutt (Consultant in Public Health, Lewisham Council), Sarah Perman (Consultant in Public Health), Joan Hutton (Head of Assessment and Care Management), Carmel Langstaff (Service Manager – Interagency Development and Integration), James Lee (Service Group Manager, Prevention, Inclusion and Public Health, Lewisham Council), Tony Read (Chief Financial Officer, Lewisham CCG), Warwick Tomsett (Head of Targeted Services and Joint Commissioning for Children and Young People, Lewisham Council), Geeta Subramaniam (Head of Crime Reduction and Supporting People, Lewisham Council), Danny Ruta (Director of Public Health, Lewisham Council), and John Bardens (Scrutiny Manager).

1. Minutes of the meeting held on 28 June 2016

Resolved: the minutes of the last meeting were agreed as a true record.

2. Declarations of interest

The following non-prejudicial interests were declared:

- Councillor John Muldoon is a governor of the South London and Maudsley NHS Foundation Trust.
- Councillor Jacq Paschoud has a family member in receipt of a package of adult social care.
- Councillor Susan Wise is a member of the King's College Hospital NHS Foundation Trust and the South London and Maudsley NHS Foundation Trust.

3. Health and Wellbeing Board response to Committee's referral on Healthwatch report

Resolved: the Committee noted the response

4. Health and adult social care integration - evidence session

Aileen Buckton (Executive Director of Community Services), Tim Higginson (Chief Executive, Lewisham and Greenwich NHS Trust), Tony Read (Chief Financial Officer, Lewisham CCG) introduced the report. The following key points were noted:

- The Council started integrating staff working in the community in 2011 – including district nurses, occupational therapists and physiotherapists. Virtual Neighbourhood Community Teams of social care staff and District Nurses working with primary care have now been established.
- Residents had said that they found it difficult and confusing to organise their care. GPs had also said that they were sometimes unsure about where to refer people to for additional care and support.
- GPs had said that many people they were seeing, particularly those who were lonely and isolated, could be better helped by other organisations in the community. The Community Connections programme has since been set up – matching people like this with appropriate organisations in the community.
- The Council and the CCG brought together health and social care commissioning some time ago and are now looking at joint commissioning across the whole system.
- A new virtual patient record, Connect Care, has been developed so that Patient records have also been integrated so that different health and care professionals can share information and work together.
- Integration work is also focused on reducing avoidable admissions to hospital and delays with discharge. It has also led to more efficient management and better co-ordination of services.
- The Government has now asked local authorities to have a plan in place by April 2017 for how they will fully integrate adult social care and community-based staff by 2020. Over the last year, Lewisham Health and Care Partners have reviewed the governance arrangements and established an Executive Board that will consider new models for health and adult social care integration.
- The Board will also be looking at estates and IT and the possibility of co-locating neighbourhood teams; and how the roles and responsibilities of the workforce can encourage closer and more person-centred care.
- A key part of this work includes closer integration with mental health services.

Aileen Buckton (Executive Director of Community Services) and partners answered questions from the Committee. The following key points were noted:

- A whole communications strategy about the wider transformation of services will come out alongside the SE London Sustainability and Transformation Plan (STP). It will be brought to the Committee before it goes out. The integration of health and adult social care is only a small part of this.
- The STP draws heavily on the Our Healthier South East London (OHSEL) programme, which has had significant public engagement. The STP submission itself hasn't been published yet because it hasn't been finalised. But people can

find a huge amount of information about it on the OHSEL website (<http://www.ourhealthiersel.nhs.uk/about-us/>).

- Delays in discharging people from hospital are sometimes down to the hospital not doing its side of things, not doing all of the assessments for example. But it is increasingly down to problems finding the right placements for people with very complex needs.
- Providing better support for people in their homes will help with discharge delays as well as reducing unnecessary admissions.
- Health partners are also now much more aware of who those people with complex needs are and why they are not being discharged in good time. They also know that a significant number of re-admissions are down to people not having the right support at home and in the community.
- In Lewisham, it's rare that a delayed discharge is down to a social care package not being ready. It's normally down to the need to find specialist placements or when someone has chosen to go to another borough. Staff are starting to plan patient discharges at the time of admission.
- Local health partners are held jointly accountable for the hospital's four-hour A&E target, and this target also relates to delayed transfers of care. The data is scrutinised by a board of local health partners every fortnight.
- Health and care partners are looking to expand admission avoidance services. The enhanced care and support workstream is looking, for example, at "home wards", so that people can receive treatment within their own home rather than within a hospital.
- The capacity of Lewisham's rapid response team is being extended to a 7 day, 8am to 8pm service to increase access, particularly over the weekend.
- The Council and SLAM are working together to improve access to health services for people with mental health needs. This includes looking at whether assessments can be done somewhere else rather than A&E.
- Services in the community are being extended – the social work offer is very close to being 7 days a week. There will be extended access to GPs 7 days a week, 8am to 8pm.
- Under the proposed model, an individual's key worker will think more holistically about what's needed and co-ordinate care around the person's needs as a whole. It doesn't mean there will be only one person – others will be brought in as and when they were needed.
- Pharmacies, although not part of multi-disciplinary teams – as they don't go into people homes the same way – are very much part of whole wider community network.

The Committee made a number of comments. The following key points were noted:

- The Committee noted that major service transformation is best achieved by taking people with you. People must be told about the changes that are coming and much thought must be given to how this is done.
- The Committee noted that in developing new models of care, public involvement and co-production is needed right from beginning. There's a lot of suspicion and fear around the STP process because of the perceived secrecy.
- The Committee also noted that it is important to look at people's personal support networks as well as community and social services. Lots of vulnerable people – those with mental health needs, substance abuse issues as well as older people – are still ending up in A&E when it's not best for them.

Resolved: the Committee noted the report.

5. Lewisham Future Programme

A18 – widening the scope of charging for social care services

Joan Hutton (Head of Assessment and Care Management) introduced the report. The following key points were noted:

- £200,000 of the proposed savings will be achieved by, among other things, removing the subsidy and increasing charges for day care meals; charging arrangement fees for those who fund their own social care; increasing charges for the Linkline/community alarm service; and changing the non-residential charging policy to reflect Government guidance.
- A further £300,000 will be saved by improving the way payments are collected. This includes making service users aware of care charges, and sending out invoices at an earlier point in the process.

Joan Hutton (Head of Assessment and Care Management) answered questions from the Committee. The following key points were noted:

- The exact amount that each individual charging proposal will save will be identified by analysis of each element and confirmed once the proposal has been agreed.
- Previous IT systems have prevented the Council from being able to collect payment in better way Officers are confident that the new IT system will help improve things.
- People are less likely to try to avoid paying care fees if it the costs are made clear to them early on in the process.
- The social care arrangement service will continue to be provided by the Council when charges come in for those who fund their own care.
- Proposed charges will market tested and put out to consultation for three months.

The Committee made a number of comments. The following key points were noted:

- The Committee noted that some people can well afford to pay for their social care. And that with some social care debts running into the tens of thousands of pounds, this affects the care the Council is able to provide to those who genuinely can't afford to pay.
- The Committee noted that some of the proposed charges seemed quite high and expressed concern that they may lead to fewer people using these services, simply creating pressures in other parts of the system – the Linkline alarm service for example.

Resolved: the Committee agreed to refer its views on this proposal to the Public Accounts Select Committee:

The Committee expressed concern about the possibility of vulnerable people choosing not to use services like this as a result of increased charges – the Linkline alarm services in particular. The Committee recommended, should this proposal be accepted, that the Mayor and Cabinet make sure that any decrease in use by vulnerable people is closely monitored.

A19 – reduction in the staffing costs for assessment and care management

Joan Hutton (Head of Assessment and Care Management) introduced the report. The following key points were noted:

- The proposed saving of £500,000 will primarily come from deleting 12 to 15 FTE posts from across the assessment and care management teams.
- Savings will also come from improving staff IT, introducing mobile working, and improving access to information, advice and signposting for service users.

Joan Hutton (Head of Assessment and Care Management) answered questions from the Committee. The following key points were noted:

- The proposals are not just about cutting staff – they're also about better managing and reducing demand at the front end. This includes using multi-agency staff to make sure that every contact counts and people get the right assessments.
- Savings will also come from a more proportionate approach to assessments. This involves making sure that people are signposted to other services in the community at the right time – reducing the demand for Council services.
- The Live Well App will also help save money by providing professionals with access to range of advice and information about services – helping them to navigate residents around the system.

Resolved: the Committee agreed to refer its views on this proposal to the Public Accounts Select Committee:

The Committee expressed concern about possible increases in delays for assessments, and decreases in the quality of assessments, as a result of deleting 10% of posts in the assessment and care management teams. The Committee recommended, should this proposal be accepted, that the Mayor and Cabinet make sure any negative consequences are closely monitored.

A20 – reduction in Day Care

- The proposed saving of £300,000 will come from not renewing the existing block contract for 50 day care places across two sites. Demand has been falling and people will instead be funded on an individual basis by personal budgets and direct payments.

Joan Hutton (Head of Assessment and Care Management) answered questions from the Committee. The following key points were noted:

- The current direct payment amount is £50 per day.

Resolved: the Committee noted the proposal

A21 a) and b) – reduction in mental health spend

Joan Hutton (Head of Assessment and Care Management) introduced the report. The following key points were noted:

- Of the proposed saving, £300,000 will come from better managing demand for accommodation-based care. A further £200,000 will come from making sure that people subject to s117 of the Mental Health Act are reviewed and discharged when appropriate – meaning that they may need to contribute to the cost of their care.

Joan Hutton (Head of Assessment and Care Management) answered questions from the Committee. The following key points were noted:

- Focusing on prevention is more cost-effective and will help absorb the savings.
- Officers agreed to provide more detail about the proposals, including the numbers of people affected, to Committee members by the next day.

The Committee made a number of comments. The following key points were noted:

- The Committee expressed concern about the ability for sector to absorb the when mental health services are already seriously underfunded.

Resolved: the Committee noted the proposal, subject to further detail being provided the next day.

L10 – Adult Learning Lewisham subsidy

Aileen Buckton (Executive Director of Community Services) introduced the report. The following key points were noted:

- The proposed saving of £40,000 will come from removing the Council's subsidy for Adult Learning Lewisham. There will be no impact on the service.

Resolved: the Committee noted the proposal

Q7 a) and b) – review of Child and Adolescent Mental Health Services (CAMHS)

Warwick Tomsett (Head of Targeted Services and Joint Commissioning for Children and Young People) introduced the report. The following key points were noted:

- Child and Adolescent Mental Health Services (CAMHS) are one part of a broader range of support for the emotional and mental health needs of children and young people in Lewisham.
- The proposal will involve reducing the Council's financial contribution and using more funding from the pupil premium grant.

Resolved: the Committee noted the proposal

6. Public health savings

Danny Ruta (Director of Public Health, Lewisham Council) and colleagues introduced the report. The following key points were noted:

- The Council has to save £4.7m after the Government announced further cuts to public health funding. The Council have tried to protect public health services as much as possible and believe that the impact of residents could have been greater without this. But there is still a £300,000 shortfall and officers will have to come back with further proposals in the future.
- The current proposed savings come from preventative health services; health visiting and school nursing; and sexual health services.

Danny Ruta (Director of Public Health, Lewisham Council) and colleagues answered questions from the Committee. The following key points were noted:

Preventative health services

- Given the level of cuts, closer integration between services and making sure every contact counts will become increasingly important in the future.
- Officers pointed out that Stop Smoking services are a cost-effective intervention and said that the health service will have to pay sooner or later for more preventative services.

- Lewisham's Staying Healthy pilot, for example, is about looking at the whole environment that people live in and tackling those parts that make people fat.
- Officers also pointed out that Lewisham has been given highest level of 'Baby Friendly' award and that the borough is also on the right path to increasing breastfeeding.

The Committee made a number of comments. The following key points were noted:

- The Committee expressed particular concern about cuts to Stop Smoking Services. The Committee also accepted, however, that if we don't cut these services we will have to cut services for the most vulnerable.
- The Committee noted that it is disappointing to see cuts to public health when much of the drive towards further integration is about prevention too

Resolved: the Committee voted against making a referral to Mayor and Cabinet and noted the proposal.

School nursing and health visiting

Warwick Tomsett (Head of Targeted Services and Joint Commissioning for Children and Young People) and colleagues introduced the report. The following key points were noted:

- Officers received lots of positive feedback about these services during the consultation – and a mixed reaction to the proposed changes.
- People were broadly supportive of changes to school nursing. People were also supportive of more integration between health visitors and children's centres. But there was some concern about the possibility of families with high needs being lost by making changes to the universal health checks to include more group-based activity.
- The Council's equalities analysis assessment found that the proposed changes do not discriminate. But these are not finalised proposals. There will be more engagement, including with providers.

Warwick Tomsett (Head of Targeted Services and Joint Commissioning for Children and Young People) and colleagues answered questions from the Committee. The following key points were noted:

- Representatives from the Save Lewisham Hospital Campaign expressed particular concern about the damage to children's health. They said the cuts to CAMHS, health visiting and school nursing were very risky and concerning. They stressed how dangerous it is to make cuts so early in a child's life. They said that evidence shows children need support early on – especially under the age of five.

- Representatives from the Save Lewisham Hospital Campaign said they were worried about the extra pressure on GPs and the drop-off in people using the help that's there if it's more difficult to access. They also said they were worried about the possibility of services being provided by private companies in the future. They asked the Committee to reject the cuts.
- Officers noted that there is currently some overlap and duplication in services and that the proposals maintain a universal service. Support will be maintained for the most vulnerable. Officers are working with providers and stakeholders to ensure that the needs of vulnerable parents will continue to be identified and the report outlines how the risks will be mitigated.
- A member of the public, a health visitor, said it is very hard for many people to speak out in a group. Another health visitor added that the Council should avoid cutting health visitor team leaders as they proved essential support.

The Committee made a number of comments. The following key points were noted:

- The Committee noted the potential risks of making cuts at early points in children's lives, when they are so vulnerable.
- The Committee also expressed concern about the increased risk that the most vulnerable people won't be recognised and supported.

Resolved: the Committee noted the proposal

Sexual health services

- The proposed savings will be achieved primarily through a new way of charging for sexual health activity (a new integrated sexual health tariff) and moving uncomplicated contraception and STI testing online and into pharmacies.
- Consultation found high level of support for proposals, in particular online testing. Many people said they'd experienced long waits at sexual health clinics.
- Consultation also found a high level of support for young people's sexual health services. Officers will be looking to develop a teenage wellbeing service – focused on sex and relationships education as well as STI prevention.

Ruth Hutt (Consultant in Public Health, Lewisham Council) and colleagues answered questions from the Committee. The following key points were noted:

- Officers noted that some people from high-risk groups may still choose to visit specialist clinics out of borough. Officers said that this was right for some people but that they still didn't want others to feel forced out of borough.
- Officers said that the best way to deal with high rates of re-infection among 15-24-year-olds is to get partners tested – breaking the chain of infection – and encourage condom use.

Resolved: the Committee noted the proposal

7. Devolution pilot business case

Aileen Buckton (Executive Director of Community Services) introduced the report. The following key points were noted:

- The Council is asking for more powers in how it manages its estates and workforce. Officers are asking for the freedom to set up hubs of community-based care and to create more flexible health and social care roles (as used in the Buurtzorg model from the Netherlands).

Aileen Buckton (Executive Director of Community Services) and partners answered questions from the Committee. The following key points were noted:

- The next steps for the pilot will be developing more detail about each area and working with the London-wide team to see what might be done without formal devolution of powers. Officers will come back to the Committee in the future with more details about workforce changes,

The Committee made a number of comments. The following key points were noted:

- The Committee noted the importance of retaining the freehold of any estates.

Resolved: the Committee noted the report.

8. Select Committee work programme

John Bardens (Scrutiny Manager) introduced the report.

Resolved: the Committee agreed the work programme

9. Referrals

The Committee agreed to refer it's views on savings proposals A18, widening the scope of charging for social care services, and A19, reduction in the staffing costs for assessment and care management, to the Public Accounts Select Committee.

The meeting ended at 10.15pm

Chair:

Date:
