

MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Monday 3 December 2018, 7.00pm

Present: Councillors John Muldoon (Chair), Coral Howard (Vice Chair), Carl Handley, Octavia Holland, Sue Hordijkeno and Sakina Sheikh.

Also Present: Ben Travis (Chief Executive, Lewisham and Greenwich NHS Trust), Lynn Saunders (Director of Strategy, Business and Communications, LGT), Salena Mulhere (SGM Inter Agency Service Development & Integration), Catherine Mbema (Acting Consultant in Public Health), James Lee (Service Group Manager, Prevention, Inclusion and Public Health Commissioning), Catherine Bunten (Service Manager, CYP Joint Commissioning), Tony O'Sullivan (Save Lewisham Hospital Campaign), Aileen Buckton (Executive Director for Community Services), Sarah Wainer (Programme Lead, Whole System Model of Care, Lewisham CCG), Nigel Bowness (Healthwatch), and John Bardens (Scrutiny Manager).

1. Minutes of the meeting held on 9 October 2018

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

2. Declarations of interest

The following non-prejudicial interest was declared:

- Cllr John Muldoon is a day patient at Guy's and St Thomas' NHS Foundation Trust (in relation to item 6).

3. Responses from Mayor and Cabinet

- 3.1 The committee received a report explaining the error in the despatch for the November Health and Wellbeing Board (HWB) meeting which meant that it was not possible for the committee's referral on changes to sexual health services in the borough to be considered by the HWB at its November meeting.
- 3.2 It was explained that the error was due to an oversight in the relevant team and that all staff have since been reminded of the importance of following due process and utilising systems for the effective management of agendas and reports. Managers will also continue to support staff learning and development.

Resolved: the committee noted the report.

5. Lewisham hospital (systems resilience)

Ben Travis (Chief Executive, Lewisham and Greenwich NHS Trust) introduced the report. The following key points were noted:

- 5.1 Lewisham is currently one of the best performing hospitals in London against the four-hour A&E waiting time target.
- 5.2 While winter does not always lead to increased attendance at the emergency department, there tends to be an increase in people requiring admission.
- 5.3 Improving patient flow is one of the main aims of this year's winter planning.
- 5.4 Patient activity and treatment will be monitored more closely to ensure a productive stay in hospital.
- 5.5 Plans for discharge will begin from the day patients come in, with better coordination among hospital teams and with the local authority.
- 5.6 The hospital will work with care homes to support them to treat patients without having to bring them into the emergency department.
- 5.7 The hospital is considering a criteria-led discharge process, which would involve doctors talking to their teams and setting criteria for patients to be discharged, rather than doctors having to be there to sign-off the discharge of every patient on the day of their discharge.
- 5.8 A "crisis café" will open on the Lewisham hospital site to provide a calmer environment and take referrals from the emergency department for patients with mental health issues. This is being created in conjunction with the local mental health trust and third sector partners with funding from NHS Improvement.
- 5.9 It was noted that due to the pressure on the London and national mental health system there had been a number of occasions where there had not been any free mental health beds in the country.
- 5.10 Workforce is the biggest challenge for the hospital, with, for example, a higher number of nurse vacancies than it would want.

The committee asked a number of questions. The following key points were noted:

- 5.11 The committee queried if any of the 23 patients with mental health issues who had exceeded a 12-hour wait were children. Officers from the hospital said that this would be highly unlikely but agreed to check the figures and provide a response. (The Trust responded post meeting to confirm that all of these patients were adults).

- 5.12 The committee queried the potential risks of a criteria-led discharge process and what could be done to mitigate these.
- 5.13 The hospital stressed that the only way that a criteria-led discharge process will work in practice is if doctors are fully behind it. Criteria-led discharge has been put in place in other areas by being clear about what the specific criteria are. The hospital would also closely monitor the impact on readmission rates.

Resolved: the committee noted the report and agreed to arrange a site visit to the Lewisham Hospital Crisis Cafe.

6. Pathology services

Lynn Saunders (Director of Strategy, Business and Communications, LGT) introduced the report. The following key points were noted:

- 6.1 There is a national drive to change the way pathology services are provided across the country. All pathology services in England are expected to be joined in networked services. Lewisham and Greenwich NHS Trust (LGT) was advised that it was expected to be part of the southeast London network.
- 6.2 Pathology services at LGT are provided differently to local partners such as Guy's and St Thomas' (GSTT) and King's College Hospital. The GSTT and King's service is a joint venture with a private sector partner, which has been running for 10 years, but is due to expire towards the end of 2020. The LGT service is run entirely within the NHS.
- 6.3 The potential value of pathology services in southeast London would be £2.25bn over 15 years. LGT wanted to see an NHS option developed and given equal consideration. However, there were no NHS providers interested in taking on such a large contract.
- 6.4 LGT decided therefore to explore other NHS networks that it could be part of. LGT is now working with Barts Health and South West London Pathology and is expecting to make a decision by the end of January 2019 to determine which network it will join.
- 6.5 A key consideration for LGT is the provision of pathology services to GPs. LGT currently provides pathology services to all GPs in Greenwich, Bexley, and Lewisham and for Oxleas Trust. However, Clinical Commissioning Groups (CCGs) and GPs are currently part of the southeast London procurement process. LGT intends to work with their CCG colleagues to find the best solution for the borough and hopes to continue providing services for GPs, which will maintain the important clinical links between GPs and local hospital clinicians.

Resolved: The committee noted the report, welcomed the decision of the LGT Board to step out of the southeast London private/public partnership in order to maintain a 100% NHS contract, and asked to be informed when a decision about the network partners is made.

4. Public health grant cuts consultation

Catherine Mbema (Acting Consultant in Public Health), James Lee (Service Group Manager, Prevention, Inclusion and Public Health Commissioning), and Catherine Bunten (Service Manager, CYP Joint Commissioning) introduced the report. The following key points were noted:

- 4.1 The Government will be making a further cut to the Public Health grant to local authorities for 2019/20. In Lewisham, the cut for 2019/20 will be £642,000. This will reduce the grant for 2019/20 to £23,683,000.
- 4.2 In response to the cuts the Council carried out a range of consultation activity as part of an overall 15-week consultation process. The officer report included in the agenda papers presents the findings of the consultation activity.
- 4.3 The vacancies within the health visiting workforce are reflective of nationwide vacancy rates. If there were no vacancies officers would explore other areas, such as staffing structure, in order to make the cuts.
- 4.4 Officers noted that they will need to work closely with Lewisham and Greenwich NHS Trust in order to complete all mandatory health visiting checks and consider in the future carrying out some of the checks in group settings. Officers would always recommend, however, that children within the targeted caseload have such checks in their home.
- 4.5 A member of the public, representing the Save Lewisham Hospital Campaign, addressed the committee. They noted that the first 100 days of a child's life are critical to determining health and wellbeing and asked the Council to look at all possible alternatives to the proposed cut to health visiting services.
- 4.6 The committee expressed concern about long-term vacancies in the health visiting workforce, noting that the population in Lewisham is expected to grow substantially and that health visitors may be the only professionals that see some very young children. The committee noted its concern about any future reduction of the health visiting service.
- 4.7 The committee expressed concern about the different figures for estimated health visitor caseload ratios being referred to by officers and members of the public and asked officers to seek clarification before presenting its report to Mayor and Cabinet.

Resolved: the committee agreed to refer its views on the health visiting element of the proposed public health grant cuts in the following terms:

The Healthier Communities Select Committee notes the Mayor's manifesto pledge to continue to give the highest priority to our children and family services and to ensure all our young people – no matter what their background or challenges – achieve their potential and thrive. Having heard the responses to the public consultation on public health cuts, specifically health visiting cuts, the committee is concerned about the impact the proposed cuts would have on current and future life experiences of children and young people in Lewisham. The committee therefore asks Mayor & Cabinet to make its decision on the proposed cuts to health visiting services having regard to these points and the evidence produced on health visitor to children ratios in paragraphs 11.21 to 11.33 of the Mayor & Cabinet report on these cuts.

7. Care at Home: integrating health and care services

Aileen Buckton (Executive Director for Community Services) and Sarah Wainer (Programme Lead, Whole System Model of Care, Lewisham CCG) introduced the report. The following key points were noted:

- 7.1 On 21st November 2018 Mayor & Cabinet approved the proposal to formally integrate a number of social care and health services that support adults in their own homes to improve the quality of service provision.
- 7.2 This includes the Council entering into a Section 75 (NHS Act 2006) agreement with Lewisham and Greenwich NHS Trust (LGT) and, in the future, South London and Maudsley NHS Foundation Trust (SLaM).
- 7.3 Although the formal agreement is only between LGT and the Council, there will be close working with other partners, including in the voluntary sector.
- 7.4 The integration of services is intended to break down the barriers between different professionals working in people's homes and to ensure that people cared for in their homes are central to way in which they work.
- 7.5 Every local authority in England has to have proposals on how it is going to integrate with its health partners by 2020.
- 7.6 The full business case for the proposals has been to the Lewisham Health Care Partners and the new arrangements are expected to be in place by 1 April 2019.

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

- 7.7 The committee noted concerns over the stability of the care sector and asked about the plans to mitigate these risks.

7.8 The committee were informed that the proposals seek to work with the care sector to support and develop it further and to look at training opportunities to make it more attractive for staff.

Resolved: The committee noted the report.

8. Information item: partnership commissioning intentions

Resolved: the committee noted the report.

9. Select Committee work programme

John Bardens (Scrutiny Manager) introduced the work programme.

9.1 The Scrutiny Manager agreed to arrange the site visit to the Lewisham Hospital Crisis Café and to notify other members who may be interested.

Resolved: the committee agreed the work programme.

10. Referrals

Resolved: the committee agreed to refer its views on item 4, *Public health grant cuts consultation*, in the following terms:

The Healthier Communities Select Committee notes the Mayor's manifesto pledge to continue to give the highest priority to our children and family services and to ensure all our young people – no matter what their background or challenges – achieve their potential and thrive. Having heard the responses to the public consultation on public health cuts, specifically health visiting cuts, the committee is concerned about the impact the proposed cuts would have on current and future life experiences of children and young people in Lewisham. The committee therefore asks Mayor & Cabinet to make its decision on the proposed cuts to health visiting services having regard to these points and the evidence produced on health visitor to children ratios in paragraphs 11.21 to 11.33 of the Mayor & Cabinet report on these cuts.

The meeting ended at 21.55pm

Chair:

Date:
