

MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Thursday, 25 February 2021 at 7.30 pm

PRESENT: Councillors John Muldoon (Chair), Coral Howard (Vice-Chair), Kim Powell and Leo Gibbons, Jacq Paschoud, Joan Millbank and Alan Hall.

ALSO PRESENT: Nigel Bowness (Healthwatch Lewisham), Georgina Nunney (Principal Lawyer), Tom Brown (Executive Director for Community Services), Sarah Wainer (Director of System Transformation, Lewisham Health and Care Partners), and Joan Hutton (Director of Operations - Adult Social Care).

1. Minutes of the meeting held on 13 January 2021

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

2. Declarations of interest

Cllr Jacq Paschoud has a close family member in receipt of a package of adult social care.

3. Responses from Mayor and Cabinet

3.1 The Chair noted that last week he received a request from the Lewisham Refugee and Migrant Network and the Save Lewisham Hospital Campaign asking for the committee to support a call on access to vaccines for migrants and marginalised groups and to forward this to Mayor & Cabinet.

3.2 The Chair noted that to deal with this request in the most timely way possible he asked the Chair of Overview & Scrutiny to hear the request at last week's meeting of the Overview and Scrutiny Business Panel under the regular Covid-19 response item.

3.3 The Chair noted that after listening to the speaker the Business Panel did decide to make a referral the Mayor & Cabinet along the lines of what was requested.

No responses to note.

4. Adult social care review update

Tom Brown (Executive Director for Community Services) introduced the report and the following key points were noted:

4.1 At the request of the Public Accounts Committee the council is undertaking a formal review of adult social care to ensure that the council is getting value for money and improving outcomes.

4.2 The council is currently in the process of engaging an external organisation to carry out the review and help the council to deliver the budget cuts identified.

- 4.3 There are some specific areas that the council intends to look into, including: the number of people asking for support and not accessing services; information and advice; prevention; and initial assessment.
- 4.4 There are also some gaps in services, which are being commissioned, such as provision for people with learning disability and complex needs. The review will explore this and other gaps in order to help identify savings.
- 4.5 There will be a focus on transformation, looking at what other places have done and using the expertise of the external organisation carrying out the review to help the council support its workforce to change the way it works to deliver improved services for residents.
- 4.6 A lot of work has already started. The council is aware of a lot of action that needs to be taken although there are still gaps to explore with the external organisation.
- 4.7 The committee asked how adult social care is planning to meet the needs of residents who have been newly or further disabled by Covid-19.
- 4.8 The council and its health partners have recently started discussions on exploring, across Lewisham and southeast London, what might be the short, medium and long-term impacts of Covid-19.
- 4.9 The external organisation carrying out the review will have skills and experience that the council does not have in house. It will be a one-off cost but will produce recurrent savings.
- 4.10 The council needs to get a better understanding of why Lewisham has, compared to its comparator boroughs, a higher proportion of people making contact but not going on to use services.
- 4.11 It might be related to factors ranging from the deprivation in the borough to the information available online.
- 4.12 The council needs to find out so that it can provide people with the right information at the right time to help themselves and be able to support those in the greatest need as soon as possible.
- 4.13 The council has not yet assessed which type of individuals are contacting us but not needing services. It is suspected that a lot of people are struggling to find information online and therefore phoning in.
- 4.14 The committee asked how the review would reach the BAME community and whether the council would consider commissioning BAME organisations to get involved.
- 4.15 It was noted that the review is going to work with a wide range of stakeholders, including some of our voluntary sector and BAME community groups. The council wants to reach all marginalised groups, including those who have been disadvantaged by Covid.
- 4.16 The council isn't intending to commission anything at this early, diagnostics stage, but if the review does identify unmet need that specific community groups could address better than existing services then this is the route the council would go down.
- 4.17 The committee stressed the importance of ensuring that, in the event that any services are outsourced as a result of this review, that any employees

taken on after any transfer have the same conditions of service as transferred staff so that there isn't a two-tier workforce.

Resolved: the committee agreed to note the report, monitor the review and receive an update at the appropriate time.

5. Better Care Fund review update

Sarah Wainer (Director of System Transformation) introduced the report and the following key points were noted:

- 5.1 The report sets the current line-by-line review of the Better Care Fund to ensure that the council and its health partners are getting value for money, using resources effectively, and getting the right outcomes from the expenditure.
- 5.2 The aim is to identify areas where expenditure could be realigned to enable more investment in prevention and early action in order to reduce expenditure elsewhere in the system.
- 5.3 It was also noted that last year there was a significant inflation increase from NHS England which has provided £500k towards the £1m that needs to be identified as part of the budget cuts.
- 5.4 It was noted that the Better Care Fund supports a wide range of services, including SAIL, Community Connections, extended GP access, rapid response, and some related to hospital discharge. It also funds digital work and the use of technology for prevention.
- 5.5 One of the aspirations is to support more people with complex needs out of hospital to prevent admissions and give people a better experience.
- 5.6 It was noted that this review should complement the review of adult social care discussed under the previous agenda item.
- 5.7 The committee asked whether the council would consider commissioning BAME organisations as part of this work.
- 5.8 It was noted that the council is committed to working with the whole community to make sure that the right support is in place and that services reach those who are excluded or marginalised.
- 5.9 One member, speaking under standing orders, asked for clarification on how the unallocated money received for inflation could be used to contribute towards budget cuts.
- 5.10 The inflationary increase received from NHS England remains unallocated due to NHS England confirming their budget much later than usual. The council is able to make a decision with its health partners about where that money is spent and the intention is to invest it in services that will release money from the council's general fund and preserve social care services that would otherwise be cut.
- 5.11 The member speaking under standing orders noted that it would be preferable to have more information on how this money will be spent so it could be properly scrutinised in case the review leads to any service changes.

5.12 It was noted that the council can't decide alone what the Better Care Fund is used for and that local health partners have to be satisfied that any spending is an appropriate use of resources. Local health partners routinely look at where to invest to get best value for money and this review is not about stopping a service but how the money is used to prevent services being stopped.

Resolved: the committee agreed to note the report, monitor the review and receive an update at the appropriate time.

6. **Select Committee work programme**

John Bardens (Scrutiny Manager) introduced the work programme and the committee discussed a number of suggestions for next year's work programme including:

- The role of local authorities and scrutiny in Integrated Health Systems (ICSs)
- The relationship between health and housing locally.
- The local care market.
- And items from this year that couldn't be considered due to Covid-19.

Resolved: the committee noted the completed work programme.

The meeting ended at 8.54 pm

Chair:

Date:
