

# MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Monday, 21 June 2021 at 7.30 pm

PRESENT: Councillors John Muldoon (Chair), Coral Howard (Vice-Chair), Carl Handley, Samantha Latouche and Lionel Openshaw.

ALSO PRESENT: Tom Brown (Executive Director for Community Services), Kenneth Gregory (Joint Commissioning Lead, Adult Mental Health), Donna Hayward-Sussex (Service Director, South London and Maudsley NHS Foundation Trust), Dr Simon Parton (Chair, Lewisham Local Medical Committee), Ben Travis (Chief Executive, Lewisham and Greenwich NHS Trust), Dr Catherine Mbema (Director of Public Health), Sarah Wainer (Director of System Transformation), Councillor Chris Best (Cabinet Member for Health and Adult Social Care), Nigel Bowness (Healthwatch Lewisham), Corinne Moocarme (Joint Commissioning Lead, Community Support and Care, Community Services) and Councillor Jacq Paschoud.

## 1. Confirmation of Chair and Vice Chair

Resolved: that Councillor John Muldoon be confirmed as the Chair and Councillor Coral Howard be confirmed as the Vice-Chair of the Select Committee.

## 2. Minutes of the meeting held on 25 February 2021

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

## 3. Declarations of interest

There were no interests declared.

## 4. Responses from Mayor and Cabinet

There were none.

## 5. Lewisham system recovery

*Before inviting officers to introduce the item the Chair noted the committee's thanks to council officers, NHS staff, the voluntary sector, and everyone else who has been involved, for their tireless work during the Covid pandemic to support those in need.*

Sarah Wainer (Director of System Transformation) introduced the item by outlining the current position of the health and care recovery plan and noting that a full review of the plan is in progress and due to be completed by the end of July.

Ben Travis (Chief Executive, LGT) then gave a presentation on the recent experience and current situation at Lewisham and Greenwich NHS Trust.

- 5.1 It was noted that at the peak of the first wave of the pandemic there were around 300 Covid positive patients across the trust's two sites (University Hospital Lewisham and Queen Elizabeth Hospital). At the peak of the second wave there were almost 500 Covid positive patients across the sites.
- 5.2 These pressures created significant challenges around bed capacity, oxygen, and workforce in particular, with many colleagues needing to self-isolate or getting Covid themselves. Non-urgent service were also stood down and staff redeployed to deal with the unprecedented levels of pressure.
- 5.3 Mortality in the first wave (of those patients admitted to a bed) was 29.5% overall. In the second wave this reduced to 18.5% reflecting the work the whole system put into getting to grips with Covid.
- 5.4 The trust is staying vigilant about the likely possibility of a third wave in the late summer but is not expecting a similar experience to the first or second waves.
- 5.5 There are currently around 2,500 people that have been waiting more than a year for treatment. This is a significant challenge for the trust and a rigorous clinical prioritisation process has been agreed across southeast London to provide timely treatment to those most at risk.
- 5.6 Extra clinics are also being provided and some of the longest waiting patients are being moved to nearby trusts if they have shorter waiting times. There are plans to write to everyone on the waiting list to give them a realistic idea of when they will receive their treatments.
- 5.7 More virtual appointments are being made available, but the majority of patients are still being seen face to face. Around 25-30% of appointments are currently virtual.
- 5.8 It was also noted that emergency attendance at UHL (and across London) has increased significantly since January, but that more people are now being seen within the four-hour target. Lewisham and Greenwich Trust is currently seeing more patients within the four-hour target than any other trust in London.
- 5.9 The Trust has recently moved to an online booking system for blood testing services. This was intended to support infection prevention measures but has also presented operational challenges and caused frustration for some residents. The trust is improving the platform and the process for urgent requests but also noted that there has been a 40% increase in requests since April.
- 5.10 All of the trust's services are now back up and running and visitor restrictions are being gradually reduced. There are also now clinics in place for patients suffering from long Covid.
- 5.11 The trust worked with private hospitals during the first and second waves to carry out urgent elective work but they are also now keen to return to providing their own clinics.
- 5.12 The trust is now working closely with Guy's and St Thomas' and King's College Hospital Trusts to set up clinical network covering the biggest specialities. This includes establishing surgical hubs for high volume but low complexity work. However, given the challenges with workforce in particular, it is likely to take 2-3 years to return to the pre-Covid position.

- 5.13 The trust is confident that it will be able to continue with elective work during a third wave.
- 5.14 One of the key learning points from the first and second waves is that more needs to be done around redeployment of staff to help staff get to know their new environment and new colleagues.
- 5.15 In response to questions from the committee, it was noted that from now on the 'designated setting' for people being discharged from hospital but unable to return to a care home (because of their Covid status) will be Eltham Community Hospital.

Donna Hayward-Sussex (Service Director, South London and Maudsley NHS Foundation Trust) provided an overview of the experience of mental health services on behalf of the mental health alliance.

- 5.16 Mental health referral rates increased significantly during the second wave, both through primary care and emergency crisis presentations.
- 5.17 The most significant increase has been in people presenting with symptoms of depression and anxiety. Worryingly there have been increases in presentations of psychosis.
- 5.18 There has also been a significant increase in the number of people approaching mental health services for the first time. In one month 50% of those presenting at the emergency department were previously unknown to mental health services.
- 5.19 The 'front door' services, primary care, IAPT, and early intervention are all being fully staffed to address the need coming through.
- 5.20 The trust also wants to be able offer first appointments very quickly, within days rather than weeks, to quickly establish what type of support is most appropriate.
- 5.21 The trust is cautious about a potential third wave and would only consider closing services again as a last resort.
- 5.22 The trust is also developing a self-referral/advice line for people and professionals to approach the trust for help directly. The aim is for this to be in place by September.

Kenny Gregory (Joint Commissioning Lead, Adult Mental Health) informed the committee of two projects that have been commissioned to address health inequalities among black and African-Caribbean communities.

- 5.23 One is a research project into the experiences of black and African-Caribbean communities using mental health services to understand what can be done to improve experiences and outcomes. The findings of this work are due to be considered by the mental health alliance in July.
- 5.24 The second project is a series of emotional wellbeing and personal resilience workshops. The first one was aimed at community members and the second at staff affected by the pandemic. The workshops are intended to be safe spaces for people to talk about their concerns.

Simon Parton (Local Medical Committee, Chair; Primacy Care Network Forum, Chair) gave a brief overview of the current position in primary care.

- 5.25 Primary care is facing a significant increase in demand at the same time as dealing with a stretched workforce. Colleagues are working hard to support the workforce.
- 5.26 Primary care has moved at pace to a remote monitoring/consultation model using video calls and various online platforms, but continues to provide face-to-face appointment for those that need it.
- 5.27 Lewisham is one of the only boroughs in southeast London to have an active and effective community long-Covid service.
- 5.28 The main challenges going forward are reactivating proactive care, that which is above and beyond core services, and ensuring that primary care is accessible to all. This is an opportunity for primary care to learn and develop and to work with the community to coproduce models and approaches that work for patients; prioritise groups; encourage use of resources like pharmacies; and encourage self-care where appropriate.
- 5.29 In response to questions from the committee it was noted that staff in GP practices are familiar with the new blood testing booking system. A lot of time has also been spent letting patients know how it works. The possibility of an online as opposed to phone booking system is being explored.

Dr Catherine Mbema (Director of Public Health) provided an overview of the scale of the pandemic in Lewisham and the ongoing work of the public health team.

- 5.30 As of 11th June 2021 there had been 22,000 cases of Covid-19 in Lewisham, since February 2020. As of 4th June 2021 there had been 602 deaths due to Covid-19 in Lewisham.
- 5.31 The public health team has developed and put in place a local outbreak management plan which covers a range of activity from testing and contact tracing to outbreak response and support for the vaccination programme.
- 5.32 The public health team are working with the community and southeast London CCG to ensure the vaccine roll-out is as effective as possible and addresses any longstanding inequalities.
- 5.33 The local outbreak plan is underpinned by the analysis of timely data and insight from 170 Covid-19 community champions.
- 5.34 The committee stressed that as well as the serious health impacts of the Covid-19 virus the pandemic has also led to secondary issues such as food insecurity.
- 5.35 The public health team are supporting a number of initiatives in relation to food insecurity. This includes the Covid-19 food network and the surplus food hub. A food poverty summit is also planned for the autumn.

Resolved: the committee thanked the officers for their presentations; noted the information presented; and agreed to receive an update in 6 months.

## **6. Select Committee work programme**

Resolved: The committee agreed its work programme for the year ahead for submission to Overview and Scrutiny Business Panel on 20 July.

The meeting ended at 9.30 pm

Chair:

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Date:

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