

HEALTH AND SOCIAL CARE SCRUTINY SUB (COMMUNITY AND CHILDREN'S SERVICES) COMMITTEE

Monday, 2 November 2015

Minutes of the meeting of the Health and Social Care Scrutiny Sub (Community and Children's Services) Committee held at the Guildhall EC2 at 12.00 pm

Present

Members:

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| Wendy Mead (Chairman) | Philip Woodhouse |
| Randall Anderson (Deputy Chairman) | Steve Stevenson |
| Ann Holmes | |

Officers:

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| Philippa Sewell | - Town Clerk's Department |
| Neal Hounsell | - Community and Children's Services Department |
| Chris Pelham | - Community and Children's Services Department |
| Farrah Hart | - Community and Children's Services Department |
| Poppy Middlemiss | - Community and Children's Services Department |

1. APOLOGIES

Apologies were received from Emma Price.

2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

There were no declarations.

3. MINUTES

RESOLVED – That the minutes of the meeting held on 16 June 2015 be agreed as an accurate record.

Matters Arising

Members queried the lack of a follow-up report with specific case studies of integrated care projects. Officers apologised, and it was agreed that this would be circulated electronically before the next meeting.

4. HEALTHWATCH CITY OF LONDON UPDATE

Steve Stevenson presented a report from Healthwatch City of London. Members agreed that a Sub Committee visit should be arranged to the cardiology department at Barts Hospital in order to review the new arrangements and see what has changed in other departments as a result.

Members discussed the Healthwatch Annual Conference held on 8 October, noting it was an excellent opportunity for networking, but that public attendance had been disappointing despite publicity of the event.

A Member queried the level of scrutiny this Sub Committee had for University College London Hospital. Officers advised that Care Navigators were in place to work with UCL, The Royal London and Barts Hospital, and Members agreed to review this service at a future meeting.

RESOLVED – That:

- (a) a visit be arranged to the cardiology department at Barts Hospital
- (b) the Care Navigator Service be reviewed at a future meeting;
- (c) Healthwatch forward details of disability inequality observed at UCLH to officers; and
- (d) the report be noted.

5. **REVIEW OF HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY GOVERNANCE**

Members considered a joint report of the Town Clerk and Comptroller & City Solicitor regarding the review of governance arrangements for the Sub Committee, and raised the following points:

- The dual Chairmanship exception could be reviewed after a year.
- Restricting membership to exclude Community & Children’s Services Committee Members was necessary to ensure there was no conflict of interest, but would severely reduce the ‘pool’ of Members likely to serve on the Health & Social Care Scrutiny Committee.
- Having a stand-alone Health & Social Care Scrutiny Committee would highlight the issues being considered, and acknowledge their importance.

RESOLVED – That it be recommended to the Community & Children’s Services Committee that:

- (a) the recommended option of dissolving the Health & Social Care Scrutiny Sub Committee and retaining the combined responsibility for scrutiny of health and social care under a new stand-alone Health & Social Care Scrutiny Committee be agreed;
- (b) no Member of the Community & Children’s Services Committee or the Health & Wellbeing Board should serve on the Health & Social Care Scrutiny Committee; and
- (c) the Health & Social Care Scrutiny Committee be listed as an exception under Standing Order 29(3) in terms of dual Chairmanship.

6. **SUICIDE PREVENTION ACTION PLAN DRAFT SUMMARY**

The Sub Committee received a report of the Director of Community & Children’s Services providing a summary of the draft Suicide Prevention Action Plan. It was noted that, once the stand-alone Health & Social Care Scrutiny Committee was in place, documents like this would only be available for the Scrutiny Committee to review once they had been agreed by the relevant Grand Committee.

Officers reported that the action plan had been developed in collaboration with Clinical Commissioning Groups, the Samaritans, Metropolitan Police, and City of London Police, and would be considered by the Health and Wellbeing Board at their next meeting.

Members noted that the priority areas for action were:

- To reduce the risk of suicide in key high risk groups (with a focus on young and middle-aged men);
- Tailor approaches to improve mental health in specific groups (with a focus on people with untreated depression and children and young people);
- Reduce access to the means of suicide;
- Provide better information and support to those bereaved or affected by suicide;
- Support the media in delivering approaches to suicide and suicidal behaviour;
- Support research, data collection and monitoring.

Members queried 'the Bridge Pilot', and officers reported that this was a 6-month initiative to affix signage to London, Hungerford and Waterloo Bridges advertising a free-phone Samaritans number to dissuade people from jumping. Members noted that, although permission was still being sought from Lambeth and Westminster Councils to secure the signs for the latter two bridges, signposting people to where they could get support had been successful at Clifton Bridge, the London underground and 'hot-spot' car parks. Members discussed the report, and requested officers to write to the Health Scrutiny Committees of both Lambeth and Westminster Councils once the plan was finalised, to highlight this initiative with them and encourage support.

RESOLVED – That officers write to the Health Scrutiny Committees of both Lambeth and Westminster Councils once the plan was finalised to highlight the Bridge Pilot with them and encourage support.

7. **CARERS - PEER REVIEW OF SUPPORT AND SERVICES**

The Sub Committee received a report of the Director of Community & Children's Services regarding the peer review undertaken by senior officers from different boroughs across London to assess the City of London's services and support for carers. This took place between 30 September and 2 October 2015 and focussed on the implementation of the Care Act. Members noted the findings, which were set out in full in the report, and noted that the recommendations would be implemented by a task and finish panel to ensure they were in place by the end of the financial year.

RESOLVED – That the report and findings of the peer review be noted.

8. **BARTS HEALTH NHS IMPROVEMENT PLAN**

The Sub Committee received a verbal report regarding the Barts Health NHS Improvement Plan detailed at the Inner North East London Joint Health Overview and Scrutiny Committee (INEL JHOSC) meeting held on 26th October. Members noted the following points:

Each of the four sites would have their own Senior Management Team rather than the Clinical Advisory Groups. This would require a higher level of resources; Barts NHS Trust had confirmed that additional funds had been

agreed from Central Government, but did not disclose any details. With regard to this Sub Committee, Members agreed to arrange a meeting with the new Management Team for the Barts Site as part of their visit to the new cardiology department to discuss their plans.

Officers reported that the Barts NHS Trust had confirmed the budgeted deficit would be exceeded, owing to the restructure and agency staff being used to fill the high number of vacancies, and they welcomed the Department of Health review of agency fees. Officers also advised the Sub Committee of the 5 never-events that had occurred subsequent to the 9 between November 2013 and January 2015 referred to in their Improvement Plan, which had been followed up with further training.

Members highlighted the need to focus on the University College London Hospital to the same degree as Barts. Officers undertook to circulate the figures regarding number of City patients accessing UCLH and Royal London, and Steve Stevenson advised that query had been raised at the Neaman Practice and they were roughly 50% each.

RESOLVED – That the report be noted.

9. INEL JHOSC - TRANSFORMING SERVICES TOGETHER

The Sub Committee received a verbal report regarding the Transforming Services Together update provided at the Inner North East London Joint Health Overview and Scrutiny Committee meeting held on 26th October, and noted that fully costed proposals had been requested, but were still awaited.

RESOLVED – That the report be noted.

10. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE

There were no questions.

11. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

There was no urgent business.

12. EXCLUSION OF THE PUBLIC

RESOLVED – That, under Section 100A of the Local Government Act 1972, the public be excluded from the meeting for the following items on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A of the Local Government Act.

Item Nos.
13-14

Exempt Paragraph(s)
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13. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE

There were no questions.

14. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

There was no urgent business.

The meeting closed at 12.54 pm

Chairman

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