HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE Wednesday, 10 November 2021

Minutes of the meeting of the Health and Social Care Scrutiny Committee held at Committee Room 3 - 2nd Floor West Wing, Guildhall on Wednesday, 10 November 2021 at 11.00 am

Present

Members:

Michael Hudson (Chairman)
Wendy Mead (Deputy Chairman)
Vivienne Littlechild
Steve Stevenson

Officers:

Ben Dunleavy - Town Clerk's Department

Simon Cribbens James Gibson -

Sarah Greenwood - Policy & Communications Manager,

CCS

Chris Lovitt - Deputy Direcor of Public Health

Annie Roy -

Also in attendance:

Dan Burningham - NHS North East London CCG
Emily Carter - Barts Health NHS Trust

Paul Coles - Healthwatch

Dr Waleed Fawzi - East London NHS Foundation Trust
Kelvin Hankins - NHS North East London CCG
Claire Hogg - NHS North East London CCG

Eugene Jones - East London NHS Foundation Trust

Charlotte Painter - NHS North East London CCG

1. APOLOGIES

Apologies were received from Andrew Mayer.

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

The following declarations were made:

- Vivienne Littlechild;
- Steve Stevenson;

both declared they were resident in the City and patients of the Neaman Practice.

3. MINUTES

Vivienne Littlechild asked for a correction to the minutes of the meeting on 30 June 2021.

RESOLVED – That the public minutes of the meeting held on 30 June 2021 be agreed as a correct record, as amended.

4. HEALTHWATCH CITY ANNUAL REPORT

Members received a report of the Director of Community and Children's Services.

The Chairman regretted that the report did not mention that Steve Stevenson was the Healthwatch representative on the Health and Social Care Scrutiny Committee, and hoped that this would be included in the next report.

RESOLVED, that – the report be received and its contents noted.

5. WARD RELOCATIONS - EAST LONDON FOUNDATION TRUST

Members received a report of the Director of Service Transformation, East London NHS Foundation Trust (ELFT) on the proposal to relocate inpatient dementia assessment services to East Ham Care Centre (EHCC).

Members noted that while EHCC was close to public transport options, a travel analysis had shown that the majority of journeys to EHCC were carried out by car. EHCC offers cover for journeys done by minicabs and taxis, and financial support for charges incurred on private journeys. The Committee requested that a letter from the Director of Service Transformation confirming these transport support arrangements.

It was noted that COVID-19 had been a catalyst in relocating the inpatient dementia assessment services to EHCC. The pressures placed on Mile End Hospital to clear bed space and create safe paces meant that the move to empty spaces at EHCC had come before the proposal and consultation. ELFT was now consulting on whether the relocation should be made permanent.

It was further noted that within ELFT there was a drive to reduce waste within NHS space. A number of buildings had been reconciled and repurposed, and they were working towards a point where no space or buildings were unused.

In reply to a question by Deputy Chairman on how secure the capital funding for the investment into Cazaubon ward was, the Director of Service Transformation said that the works would be undertaken and funded by ELFT which had reserves to cover the costs.

It was noted that EHCC was currently working with Hackney Healthwatch but they were hoping to extend this to other branches. Members requested that they approach Healthwatch City of London.

The Deputy Chairman asked if it would be possible for the Committee and Healthwatch City of London to visit EHCC, and the Director was happy for a visit to be arranged.

The Chairman commented that the question options should allow scope for a 'don't know' or 'no difference' answer, and also suggested that it would be appropriate to include a question about whether the drawbacks of the location outweigh the advantages for City residents. The Director of Service Transformation replied that he would take these suggestions on board; it is still a draft paper and so can be amended.

The Chairman also commented that it would have been more appropriate to conduct an Equality Impact Assessment (EIA) before the proposal, rather than afterwards. The Director of Service Transformation replied that they plan to prepare a draft EIA to be conducted alongside the public consultation. Feedback from the consultation will be incorporated into the final EIA.

The Chairman suggested that City Matters should be included in the list of Printed Information in the report, and that information should be made available for the City's public libraries. The Director thanked the Chairman for this suggestion, and said they were in consultation with Healthwatch on how to further publicise information.

RESOLVED, that – the report be received and its contents noted.

6. ST BART'S MINOR INJURIES UNIT REOPENING

Members received a presentation of the Divisional Manager of Emergency Care and Trauma, St Bart's Hospital.

Members noted that the Minor Injuries Unit (MIU) would return to its previous location on the St Bartholomew's Hospital Site.

Members felt it would be useful to advertise the reopening of the MIU, and the Divisional Manager undertook to provide material to be distributed to various relevant publications in the City of London.

Members felt strongly that there should be positive consideration for the reopened MIU to provide an x-ray service. The Divisional Manager undertook to consider this, and to feedback to the Committee if it was a viable option, but was unable to commit to any future provision.

The Deputy Chairman asked where patients arriving at the unit with suspected heart issues would be sent. The Divisional Manager replied that the MIU is staffed with experienced EMTs who would make a clinical assessment and send patients to the Barts Heart Attack Centre if appropriate. The Deputy Chairman requested for this information to be sent in a letter to the Committee.

RESOLVED, that – the oral update be received.

7. RECOVERY OF PLANNED/ELECTIVE CARE POST COVID-19

Members received a joint presentation of the Director of Planned Care, North East London ICS and Acute Alliance and the Acting Workstream Director for Planned Care, NHS North East London Clinical Commissioning Group, and City and Hackney Integrated Care Partnership and North East London Health and Care Partnership.

It was noted that there was still active recruitment of doctors and nurses, both in Europe and internationally.

The Chairman commented that the aim to return to pre-pandemic levels by March 2024 seemed unambitious. In reply, Members heard that this date was based on national recovery modelling. Local modelling in North East London has not yet taken place in detail but the scale of the challenge is likely to be similar. They are seeing increasing levels of referrals due to new patients, and efforts to clear the backlog. They are looking into how physical and workforce capacity can be improved in North East London, and can feed back to the Committee once more work on this has been done. There are plans to ensure a significant reduction in patients waiting over 52 weeks during this financial year, which is a key milestone in the delivery of our aim. The Directors stressed that it is important to be realistic about what could be achieved and set trajectories and milestones that reduce waiting list size and waiting times over the next 2 years.

It was noted that the proportion of operations currently being carried out compared to 2019 is about 80%. The Chairman asked if waiting lists were going up. In reply, the Directors said that the waiting list for non-admitted patients was increasing, but the waiting list for admitted patients was currently going down. When asked how many people were waiting to go onto the waiting list, the Directors said that this could only occur if GPs were "holding on" to patients. A subsequent increase in referrals in June 2021, after a drop during the pandemic, suggests that GPs are not holding on to patients. The Chairman referred to Dame Alwen Williams' response to his question on this topic at the Inner North East London Joint Health Overview and Scrutiny Committee meeting on 23 June 2021, where she referred to a holding list for patients before they are placed on a waiting list. The Chairman and the Committee found this to be an unacceptable practice. In reply, the Directors said that they had not been aware of Dame Alwen's response, and were not aware of this practice occurring in any of the Trusts.

A Member asked what the estimated extra number of deaths between October 2021 and March 2024 was. This was not information that the Directors had immediately available, but was something they could look into.

RESOLVED, that – the oral update be received.

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

There were no questions.

9. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

The Town Clerk undertook to circulate a list of possible agenda topics for the next meeting of the Committee.

The meeting ended at 12.53 pm

Chairman

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