

HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE
Wednesday, 9 October 2024

Minutes of the meeting of the Health and Social Care Scrutiny Committee held at
Committee Room 1 - 2nd Floor West Wing, Guildhall on Wednesday, 9 October
2024 at 11.00 am

Present

Members:

Deputy Christopher Boden (Chairman)
Michael Hudson
Andrew Mayer
Steve Stevenson

Officers:

Simon Cribbens	-
Chris Lovitt	- Deputy Director of Public Health
Ellie Ward	- Community and Children's Services Department
Jayne Moore	- Clerk

1. **APOLOGIES**

Apologies were received from David Sales, Deborah Oliver, and Alpa Raja.

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

There were no declarations.

3. **MINUTES**

RESOLVED – That the public minutes of the meeting held on 15 May 2024 be agreed as a correct record.

4. **APPOINTMENT OF HEALTHWATCH CO-OPTEE**

RESOLVED, That Steve Stevenson be appointed the Healthwatch representative to the Committee (moved by Michael Hudson and seconded by Andrew Mayer).

5. **FORWARD PLAN**

The Committee noted the forward plan.

The meeting noted that the City of London Corporation (CoLC) has signed up to the Armed Forces Covenant and that the Royal Hospital Chelsea undertakes outreach work that focusses on military veterans.

The meeting discussed whether there was merit in asking for a document to be submitted to the Committee on the health and social care of military veterans, and heard that there did not appear to be any "disadvantage compared to other

citizens in the provision of public and commercial services” (as per the Covenant’s first principle), also noting that during the 2023-24 period fewer than five UK military veterans were recorded as rough sleepers out of approximately 650.

The Committee agreed to remove the military veterans item from the Forward Plan.

6. SEND SEF

The Committee received the report of the Head of Education and Early Years at the City of London Corporation.

A Member sought clarification on the section of the report on educational attainment in CoL settings, querying whether the figures accurately reflected this statement:

“In 2023 the proportion of children with SEN Support meeting the expected standard for reading, writing and maths exceeded the performance of their contemporaries at the Aldgate School without special needs”.

The meeting heard that further clarification would be provided on that apparent discrepancy.

A Member sought clarification on children with EHCPs and/or those with SEND support who were subsequently designated as individuals with learning disabilities, and asked to what extent those children were later deemed as having learning difficulties, and their support needs where appropriate, noting the low levels of meaningful employment, poor self-sufficiency, and diminishing agency among adults with learning difficulties nationwide that in some cases led to lifelong institutionalisation. The meeting heard that young people for whom there was a specific statutory responsibility (those with EHCPs) had a plan that could be in place till the age of 25 (though that was not always the case). The meeting heard that transition forums were an opportunity to discuss the support needs of young people who may need support as adults. Members noted that the CoL does not have statutory responsibility for children who receive in-school SEND support and that the outcomes and possible further support needs of those children are carefully considered working closely with adult skills entities, and that the work to support the growing number of neuro-diverse young people into adulthood is ongoing – though lengthy. A Member asked whether targets were set around that, and the meeting noted that as many opportunities as possible are provided via employer forums among other things, though there are no fixed targets around employment but 16-18 year-olds ‘Neets’ are monitored alongside any SENDs – noting also that it is not easy to measure conditions such as autism.

Members noted that the CoL closely monitored all of its children with EHCPs (currently 25), and that conversations around post-16 options for those children begin at Year 9.

A Member asked that serious consideration be given to target-setting around how to avoid lifelong institutionalisation where meaningful employment and more fulfilling lives was a possibility so that achievements could be monitored and measured.

On Areas for Development as set out in the report, a member asked for more information on what was not working so well. The meeting heard that the focus tends to be on solutions and that further work would be done to develop that area of the reporting, particularly in covering all four areas of any SWOT analysis.

7. **IMMUNISATIONS**

The Committee noted the report of the Consultant in Public Health at City & Hackney Public Health.

Noting that many vaccination rates were below the 95% target to achieve herd immunity, Members asked what was being done around future target-setting. The meeting heard that that target is being met in very few places, particularly in London, and that work on improving rates is ongoing.

Members commented on apparent data paucity around vaccinations among CoL residents and apparently low rates at the practices of Goodman's Field and The Spitalfields, noting that around 30 children aged 1-11 are not registered at a practice (with work ongoing to remedy that).

On immunisation rates at the Neaman Practice, Members noted the high correlation between deprivation and non take-up of immunisations whereas the Neaman Practice covers relatively wealthy parts of the City (which correlates with higher take-up rates) and commented that if anything the Neaman Practice's immunisation rates should be better than 93% given the relative lack of deprivation. The meeting heard that other factors might account for inaccuracies (for example, patients having moved out of the area).

Members heard a recent update on the data situation: work is under way to develop a dashboard that will give more granular information and that Local Authority data is being gathered onto NHS platforms, noting the challenges of IT infrastructure and systems at the NHS.

A Member asked what national-level studies on vaccine hesitancy were being used to inform strategies. The meeting noted that a wide range of evidence has been used to inform strategies, including capturing local barriers to vaccine uptake (including complacency, convenience, confidence, uncertainty, and disinformation). A Member requested that an evidence base be circulated *[circulated on 10 October 2024]*.

8. **HEALTHWATCH CITY ANNUAL REPORT 2023-24**

The Committee received the report of the Healthwatch General Manager and Chair of Trustees.

The Committee thanked the Trustees, staff and volunteers for their invaluable work.

On the income and expenditure section (p.26 of the report) a Member noted the income and expenditure figures and asked what the total reserves figure was (and what plans there were for that figure). Noting the statutory reserve requirements for a charity, the meeting heard that greater certainty around the contract meant that more plans could be rolled out across the next five years to include more event-planning and better publicity.

A Member asked whether charges were levied for CPR training (noting that St John's Ambulance charge for such sessions) and whether the attendees were community-based rather than corporate-based. The meeting noted that London Ambulance delivers the free training and Healthwatch provides the venue, and that the training is delivered to the community.

A member commented that health needs varied across the City of London and asked to what extent Healthwatch is able to cater to the greater need to people living in areas of greater deprivation. The meeting heard that events are held in such areas, attracting varied levels of attendance and that there are challenges around reaching those communities.

On City workers' needs, a Member asked whether there was any interaction with the business community (or whether there are any volunteers in the business community). The meeting noted that there is no specific interaction with City workers and that major corporate names tended to have private medical services and that hidden lower-paid menial and shift workers are more of a priority.

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

RESOLVED, That David Sales be appointed as the Representative to the Joint Scrutiny Committee subject to the consent of David Sales, with Michael Hudson as the substitute.

10. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

There was no other business.

11. 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.

xxx

Exempt Paragraph(s)

x

12. NON-PUBLIC MINUTES

RESOLVED - That the non-public minutes of the meeting held on 15 May 2024 be agreed as a correct record.

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 other business.

The meeting ended at 12.40 pm

Chairman

Contact Officer: Jayne Moore