HEALTH AND SOCIAL CARE SCRUTINY SUB (COMMUNITY AND CHILDREN'S SERVICES) COMMITTEE Tuesday, 4 February 2014

Minutes of the meeting of the Health and Social Care Scrutiny Sub (Community and Children's Services) Committee held at Committee Rooms, West Wing, Guildhall on Tuesday, 4 February 2014 at 1.45 pm

Present

Members:

Wendy Mead (Chairman)
Dhruv Patel (Deputy Chairman)
Deputy Billy Dove
Randall Anderson
Judith Pleasance

Officers:

Ade Adetosoye - Director of Community & Children's Services

Neal Hounsell - Community & Children's Services

Philippa Sewell - Town Clerk's Department

Sheila Adam - Homerton University Hospital Louise Egan - Homerton University Hospital

Mark Cockerton - City & Hackney Urgent Healthcare Social Enterprise

Mark Scott - City & Hackney Clinical Commissioning Group

Michele Golden - Care Quality Commission
Mark Graver - Barts Health NHS Trust
Sandra Shannon - Barts Health NHS Trust

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 11 November 2013 be agreed as a correct record, subject to the amendment of *Hospital* to *Health* under item 4.

Matters Arising

Consultation on Cancer and Cardio

Members noted that the consultation was ongoing, being discussed at the Joint Overview and Scrutiny meeting on 17 February and that a written response would be provided to the Sub Committee once concluded.

Clinical Commissioning Group - Commissioning Intentions Update

The Director of Community & Children's Services reported that a meeting had been held with the CCG to discuss the capacity of GPs in the City, and a follow-up meeting had been scheduled for March 2014.

4. COMMUNITY NURSING SERVICES – NEAMAN PRACTICE

The Sub Committee received a verbal presentation from Sheila Adam and Louise Egan from Homerton University Hospital. Ms Adam and Ms Egan reported that this proposal would bring together small nursing teams into larger ones on the same site to foster better communication, support for lone workers and robust supervision. Ms Adam advised the Sub Committee that the Neaman Practice nurse would begin their day at the Rushton Practice for a brief handover before travelling to the Neaman Practice where they could be based for the rest of the day depending on patient appointments.

In response to Members questions it was established that:

- These new arrangements would be in place from the end of February 2014;
- This proposal would not reduce nursing provision and instead sought to enhance the service;
- The Neaman Practice nurse would not take on work from the Rushton Practice and nurses from the latter could be moved to the former should caseload increase:
- Despite historically there being no confusion regarding referrals to the District Nursing Service, discussions were ongoing with hospitals to ensure the process was understood and correct;
- Physical team working and handovers were preferred over telecommunications as they gave more scope for wider discussions of problems, challenges and best practice regarding clinical or professional issues, which would benefit the nurse's professional development as well as the safety of patients at the Neaman Practice.

The Chairman thanked Ms Adam and Ms Egan for their report, and Members agreed that an update report be brought to the next Sub Committee meeting.

RESOLVED – That an update report on Community Nursing Services at the Neaman Practice be provided at the next meeting.

5. GP OUT OF HOURS SERVICE

Members received a presentation from Mark Scott, from the City and Hackney Clinical Commissioning Group, and Mark Cockerton, from the City and Hackney Urgent Healthcare Social Enterprise. Mr Scott reported that the Out Of Hours provision has been a key priority for the CCG since its formal inception in April 2013, and work had commenced in December 2013. Mr Cockerton reported that each call would be received and clinically assessed by a GP; 60% of callers only needed advice over the phone, 35% were seen at primary care centre, and 5% were visited at home. Members noted that significantly more effort was being put into advertise the service, and therefore more people were utilising it so far. Patients still had the option to contact NHS 111 though only a small minority took that option.

Mr Cockerton reported that Institutional CUREiosity had been employed to gather patient feedback. This was an independent external company offering a

phone service for patients to give honest opinions of the Out of Hours service. Members noted that this was a different service to that used for complaints, and the Urgent Healthcare Social Enterprise were hopeful for its effectiveness. Members welcomed the involvement of the independent company, and requested the opportunity to link with the Healthwatch survey (discussed later in the meeting). Mr Cockerton advised the Sub Committee that, although the main base for the service was at Homerton hospital, arrangements had been confirmed for patients to be seen at Royal London hospital should they prefer. Mr Scott reported that regular monitoring by the CCG continued, with the City and Hackney Urgent Care Board meeting bi-monthly, and the Out of Hours service linked to Integrated Care Improvements.

The Sub Committee discussed the service and in response to Members' questions it was reported that Practices relayed the out of hours number rather than referring the call as at certain times of the day (i.e. just before or just after opening hours) most calls were for non-urgent issues (e.g. appointment booking). With regards to financial implications the expectation was to look at urgent care as a whole in March. It was also noted that fewer home visits were now being made as the Primary Care Service was more effectively staffed.

The Chairman thanked Mr Scott and Mr Cockerton for their presentation.

6. CARE QUALITY COMMISSION INSPECTION OF BARTS HEALTH NHS TRUST

The Sub Committee received a presentation from Michele Golden from the Care Quality Commission which gave an overview of the findings and recommendations from the inspection of Barts Health Trust. Members discussed the issues highlighted and raised the following points:

- The importance of staff motivation and visibility of leadership;
- The need to allow plenty of time for staff to provide meaningful and considered feedback in future reviews;
- That although the culture of bullying was a problem common to the NHS in general, it was a key issue for the Trust and needed to be addressed;
- There was a need to ensure front line staff felt listened to, engaged and supported; and
- That the Clinical Academic Groups (CAG) were a good vehicle to spread best practice e.g. regarding 'never events', and would become more effective as they become more established.

Mark Graver and Sandra Shannon from the Barts Health Trust responded that the findings of the inspection were tough but fair. Members noted that a variety of initiatives had been put in place to address the issues including opportunities to give anonymous feedback directly to senior staff, monthly staff surveys, a staff retention strategy, and the development of a newsletter to encourage team spirit. With regards to the criticisms concerning food at the St. Bartholomew's Hospital site, Members were informed that a change had been made to portion sizes, matrons were checking the food on ward rounds, and the overall provision was scheduled for review when the contract came up for renewal.

The Chairman thanked Ms Golden, Mr Graver and Ms Shannon for their presentation, and it was noted that Barts Health Trust would be producing a formal response by the end of February 2014.

7. HEALTHWATCH CITY OF LONDON UPDATE

The Sub Committee received a report of the Chair of Healthwatch City of London which had previously been discussed at the Health and Wellbeing Board on 31st January 2014.

Members were concerned that a low response rate had been received to the Healthwatch City of London GP survey and Members agreed with Board Members that the survey should be more interactive to capture as many opinions as possible. It was noted that Institutional CUREiosity, the independent company used to gather patient feedback for the Out of Hours Service, would form part of the revised survey.

Members also agreed that it would be useful to have two separate reports in future; one for the Health and Wellbeing Board to consider strategic health issues and the other for the Health and Scrutiny Sub Committee to consider scrutiny issues, though Members wanted to be kept updated as to the concerns being considered by both.

8. INNER NORTH EAST LONDON JOINT OVERVIEW AND SCRUTINY COMMITTEE MEETING - 17TH FEBRUARY

The Sub Committee noted the agenda would cover the Barts Health Report, changes to Cancer and Cardiovascular services and the Moorfields Eye Hospital move. It was also noted that the Chairman had sent her apologies for the meeting and the Deputy Chairman would attend on her behalf.

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

The Sub Committee noted the date of the next meeting was 19 May 2014 where Members would receive a presentation on Pharmacy Services, an update Quality Accounts for Homerton and Barts Health Trust, and an update on the Community Nursing Services. It was noted that any ideas for agenda items should be sent to the Town Clerk.

10. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT There were no items of urgent business.

11. EXCLUSION OF THE PUBLIC

RESOLVED – That under Section 100(A) 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 the Schedule 12A of the Local Government Act.

Items Paragraph 12 – 13 3

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

There were no questions.

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

There were no items of urgent business.

The meeting ended at 3.35 pm	
 Chairman	

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