

# **MINUTES OF THE MEETING OF THE ADULTS & HEALTH SCRUTINY PANEL HELD ON MONDAY 4TH MARCH 2019, 6.30 - 8.45 pm**

## **PRESENT:**

**Councillors: Pippa Connor (Chair), Nick da Costa, Mike Hakata,  
Felicia Opoku, Sheila Peacock, Yvonne Say and Eldridge Culverwell**

**Co-opted Member: Helena Kania**

### **45. FILMING AT MEETINGS**

The Chair referred Members present to agenda Item 1 as shown on the agenda in respect of filming at this meeting, and Members noted the information contained therein'.

### **46. APOLOGIES FOR ABSENCE**

Cllr Opoku was present but gave apologies for needing to leave the meeting before the end.

### **47. ITEMS OF URGENT BUSINESS**

None.

### **48. DECLARATIONS OF INTEREST**

Cllr Pippa Connor declared an interest by virtue of her membership of the Royal College of Nursing.

Cllr Pippa Connor declared an interest by virtue of her sister working as a GP in Tottenham.

Cllr Pippa Connor declared an interest by virtue of Dr Peter Christian being a GP at her local GP practice.

Dr Peter Christian, Chair of Haringey CCG, declared an interest by virtue of his practice currently being involved in a bid for central NHS funds to merge three practices onto a new site.

#### **49. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS**

None.

#### **50. MINUTES**

Cllr Connor referred to a number of points in the minutes of the previous meeting relating to item 41 (Mental health services) that required further action:

- A bullet point in the minutes mentioned that the Haringey Wellbeing Network is available as a front door to a range of services. Having checked the website there appeared to be an assessment fee of £25 for counselling so Cllr Connor queried why fees were being charged. (ACTION)
- Another bullet point referred to section 136 suites. This related to a discussion at the meeting about a potential new specialist centre in Highgate which people with certain mental health needs could be treated as an alternative to A&E. Further clarification was requested on whether physical health assessments would also be done here. (ACTION)
- An action point under item 41 specified that a summary list of new projects and initiatives be provided to the Panel in writing. The Scrutiny Officer to the Panel confirmed that this request was currently being actioned and it was expected that the list would be circulated to Members shortly. (ACTION)

**AGREED: That the points above be noted for further action and that the minutes of the Adults & Health Scrutiny Panel meeting held on 29th January 2019 be approved as an accurate record.**

#### **51. ADULTS & HEALTH UPDATE**

Charlotte Pomery, Assistant Director for Commissioning, gave a short update on Osborne Grove Nursing Home feasibility study. The Frederick Gibberd Partnership had been appointed as the design team, they've come to the Osborne Grove co-design steering group chaired by Cllr James and the Community Options group chaired by Gordon Peters and a wider stakeholder event is being planned. A number of other studies are taking place alongside this including on sustainability and carbon management and ideas on what is possible in terms of the architecture based on the surrounding environment. In response to questions from the Panel, Charlotte Pomery said:

- That on the background of the Frederick Gibberd Partnership, they had recently redesigned an inpatient mental health unit in Harlow which had been redeveloped with the inpatients on-site which is clearly very pertinent to the work that the Council aims to do with Osborne Grove.
- That the membership of co-design group includes a Ward Member, the Cabinet Member for Adults & Health, the Cabinet Member for Finance, the CCG, family stakeholder members of those at Osborne Grove, members of the Planning

and Oversight group with a direct interest in older people, Healthwatch, Unison and officers.

- That the relevant stakeholders that the Frederick Gibberd Partnership had been engaging with include the members of the co-design steering group, the community links steering group, the Older People's reference group and other previously mentioned stakeholder such as Healthwatch and Unison.
- That Haringey Council's 'Caldicott Guardian' for Osborne Grove is Beverley Tarka.
- That the guiding design principles of the approach to the redesign include the primacy of nursing care, that it will be a community-facing asset and good quality care.
- That the preferred option is to develop a long-term plan rather than an intermediate plan as it is possible that an intermediate plan could slow down the long-term plan which is undesirable given the pressures on capacity.
- That according to the data there would be a need for a multi-use facility to support older people with frailty, dementia, complex needs, learning disability/autism and rehabilitation.
- That a set of options would be brought forward but the final decision is for Cabinet.

Charlotte Pomery, Assistant Director for Commissioning, provided a short update on the Making Every Adult Matter (MEAM) approach which aims to develop joint working for people with complex needs around homelessness, mental health, drug and alcohol dependency and criminal justice. This requires a more flexible way of working, such as ensuring that people without an appointment are not turned away and that people just below the eligibility threshold are supported. The work was partly prompted by a spike in deaths of people in supported housing and it was recognised that there was a gap in support available. This work has a high level of support from the Health and Wellbeing Board and a broad range of stakeholders is involved through a strategic steering group.

Work was ongoing to engage people with lived experience to help shape the approach.

The Panel requested that the draft terms of reference, the draft information sharing protocol and the membership of the steering group be provided. (ACTION)

In terms of timescale it was suggested that the Panel could look at this in more detail towards the end of the year.

## **52. IMPROVING PRIMARY CARE IN HARINGEY**

Dr Peter Christian, Chair of Haringey CCG, introduced this item noting that the Panel had read the paper supplied with agenda pack and that the key themes that should be

highlighted included the workforce, the estate and the escalating demand for primary care. Clare Henderson, Director of Commissioning at Haringey CCG, highlighted the long term plan which included developing more services and skills around primary care such as primary care mental health services for example.

In response to questions from the Panel, Dr Peter Christian and Clare Henderson said:

- That with regards to online booking systems and patients with limited internet access or computer skills, what is needed is systems that can operate in parallel. There had been huge demand from people who wish to interact with primary care in new ways including telephone consultations, which are popular, and online bookings. The development of systems that use new technology can't just move at the slowest pace but it is important to pay regard to people who find that the new systems don't work for them. There are never going to be enough appointments to meet demand in primary care and so meeting demand for need and ensuring that people who are acutely ill are seen promptly is the priority. Each practice therefore needs to design its own appointments system built around achieving this.
- That with regards to whether the rating by patients of GP practices as outlined in the report had been affected by difficulties in getting an appointment, it is likely that this had been a factor. The NHS 10-year Plan refers to drafting more staff into primary care who are not doctors and there is a challenge to communicate to the public in the coming years the concept of a primary care team, that the GP may not always be the right person to see and that it could sometimes be, for example, a pharmacist or nurse.
- On what action commissioners can take to ensure good performance from GP practices, firstly performance is managed through the contractual route via the contracts team at NHS England. Secondly, at a CCG there are primary care facilitators who engage with the GP practices and there are also annual board link visits. Practices work together in networks to learn from one another and there are practice manager forums.
- On patient satisfaction surveys, there can often be huge variations in the feedback on the same GP practice due to the subjective nature of the answers and because those you are dissatisfied can sometimes be more vocal than people who are satisfied. Cllr da Costa commented that it might be useful to cross-reference the patient satisfaction results with the CQC ratings. (ACTION)
- On whether the improvement plan focused mainly too heavily on the east of the Borough, there are also significant plans in the west including a business plan for the merger of three GP practices which aimed to improve the quality of services, a wider range of services and longer opening hours.
- On the accessibility of new practices after the various mergers, given that this leaves some wards without a GP practice, there is a balance to be struck between the benefits of larger practices which is increasingly becoming the preferred model, particularly by the younger GPs coming through who often prefer to be salaried GPs rather than operating a practice as a small business, and the practical arrangement such as the transport links available in the area.

There are also challenges involved with smaller practices closing down when GPs retire. The CCG works with public health on future population forecasts when developing proposals for sites. There had also been engagement with patient groups regarding the proposals. Cllr Connor commented that the point of transport links need to be flagged up as an important issue when these proposals go through Planning and also that Healthwatch are ideally placed to have further conversations with residents about transport.

- With regards to ongoing technological developments and new ways of working the use of unified electronic patient records could help to deliver significant improvements in patient care, and the increased use of Skype/video-based consultations may be beneficial for some patients but it is important to bear in mind that this does not necessarily enable GPs to do more in the limited time they have available. With all new ways of working need to mitigate against digital exclusion of patients who find it difficult to use technology.

Cllr Connor commented that some residents felt that the communications with them on what to expect from the process when their GP practice has received a poor CQC rating could be improved as the wording of the letters was unclear in parts.

### **53. PHYSICAL ACTIVITY FOR OLDER PEOPLE - SCRUTINY REVIEW UPDATE**

Andrea Keeble, Commissioning Manager for Active Communities, introduced this update report noting that the previous Adults & Health Scrutiny Panel took a lot of evidence which led to a series of recommendations that were agreed by Cabinet in March 2017 and had been worked on by the team since then.

Physical activity is incredibly important to wellbeing and this becomes more important as people get older but paradoxically as people age they tend to do less physical activity.

On policy the People theme and the Place theme in the new Borough Plan really emphasise the importance of physical activity. This is also much more prominent in commissioning including through care home contracts which now require monitoring on physical activity.

The recommendations referred to getting more money in for physical activity projects and there had been progress on this in several specific areas:

- A small amount of money had been provided for a project called Oomph, part funded by Sports England. This involves training practitioners and care workers at places such as the Haynes centre to deliver fun and innovative physical activity sessions.
- There is an initiative by the Mayor of London called the Laureus Model City project where Haringey is one of three London boroughs selected for funding to support bottom up working with community on what they want in order to generation ideas on how to increase physical activity, including among older people.

- The Wembley National Stadium Trust has provided a small amount of funding to support walking football and netball.
- The Silverfit programme was also continuing at Lordship Rec which involve older people coming to do activities such as yoga and badminton once a week.
- Some Comic Relief funding had been obtained to start a new project called Silver Sports to engage about 300 people in sheltered housing accommodation to do more physical activity.
- The CCG has been doing some work on “GP gyms” where GPs send people to specific classes in the local area and there is ongoing funding for this next year.

On communications, a booklet on the opportunities for physical activities for older people has been produced and distributed to GP practices and libraries which has proved to be popular.

Finally Fusion have been taking action to make their programmes more suitable for older people, more details are included under recommendations 5 & 6 in the report.

In response to questions from the Panel, Andrea Keeble said:

- On recommendation 21, the Panel had asked for a letter to be sent to the CQC to recommend that enabling access to physical activity should be regarded as part of the inspection process. This letter had been sent but it was not known what response has been received so it was requested that details about this should be obtained. (ACTION)
- In response to a query about the funding for the sheltered schemes at Palace Gates Church Andrea agreed to find out more about the current status of this. (ACTION) Cllr Connor commented that similar funding for the Priory in Muswell Hill had been provided by Ward Budgets but these were now unfortunately unavailable.
- On the lack of information about older people activity on the Fusion website, the information about classes are on the website but Andrea meets with them on the monthly basis so she would raise the need to get more specific information about activities for older people on the website at the next opportunity. (ACTION)
- On working with other departments to build a more joined up approach, the team works closely with Regeneration on issues such as, for example, to encourage people to be more physically active through positive changes to the public realm.
- On the Mayor’s Laureus Model City approach, the idea is that the community itself decides the approach and the vision to use sport to create change. There is a steering group with strong representation from the local community, a specific vision and objectives are being developed and there is a strong theme around reducing social isolation.
- Fusion have signed up to the Dementia Alliance, some of the staff have had training but the aim is to get more of them involved.
- On a suggestion that there should be more activity sessions for people with disabilities there are some available that are not advertised because they are

aimed at a specific population (such as at the Haynes Centre) but some of these are chair-based activities so there could perhaps be more activities aimed at other disabled groups.

- On the monitoring of communication materials there is a small team which gets out around twice a year to do some spot monitoring of the places where they should be available.
- With regards to the funding for Silverfit there is an ongoing discussion with public health and the CCG about the social prescribing model but the funding for next year is currently covered.

#### **54. WORK PROGRAMME UPDATE**

Cllr Connor provided a short update on the ongoing Day Opportunities scrutiny review. There had been some really interesting meetings with carers forums. The first service user engagement had been carried out and there had been some interesting discussion with service providers. A further session with commissioners was also planned.

The rest of the Work Programme was noted.

#### **55. NEW ITEMS OF URGENT BUSINESS**

#### **56. DATES OF FUTURE MEETINGS**

CHAIR: Councillor Pippa Connor

Signed by Chair .....

Date .....