

EXECUTIVE SUMMARY OF THE ADULTS AND HEALTH SCRUTINY PANEL
29TH JULY 2013

LC1. BEH CLINICAL STRATEGY - BOROUGH UPDATE

The panel received a presentation on the BEH Clinical strategy.

Key discussion points:

- There is a directive from the Secretary of State to make the changes in the BEH Clinical Strategy.
- Clinical Commissioning Groups (CCG) will meet in September to make a judgement on when these changes will take place, based on clinical safety.
- The programme is currently working towards the changes taking place in November. If the changes do not go ahead it would have a significant impact on Haringey residents.
- There is a potential legal challenge from Enfield Council with regards to the changes going ahead, and work is being done by the BEH clinical strategy team around this. The legal challenge is based on access to primary care.
- There is a Quality and Safety Scorecard which is monitored regularly.

Agreed:

- The Panel would visit North Middlesex Hospital.
- The Panel supports the BEH Clinical strategy changes going ahead.

LC2. MENTAL HEALTH AND WELLBEING

The Panel received a presentation from Dr Tamara Djuretic, AD Public Health.

Key points noted:

- 48% of Employment and Support allowance claimants whose condition is “mental and behavioural disorders”.
- Suicide rates are higher than the national average and are higher in the East of the Borough. Suicide rates are also higher in men aged between 25-44 years of age.
- There are high rates of mental health needs in Haringey.
- We rely on national research and prevalence data to estimate local needs.
- There is a higher number of boys with autism in the East of Haringey and a difference between prevalence and referral rates. This needs to be looked at in more detail to understand the reasons behind this, however it doesn't necessarily mean there is a higher autism rate, just that they are more likely to be diagnosed and receive support.
- Adults are more likely to have mental health needs if they are living alone. Data also suggests that you are more likely to develop mental health needs if you live with someone who has mental health needs themselves.
- Homelessness is also a risk factor, and you are also more likely to be homeless if you have mental health needs.
- Women are more likely to access IAPT (Improving Access to Psychological Therapies). This is linked to ‘health seeking behaviour’ rather than prevalence.
 - IAPT has employed staff from a range of communities to attempt to increase uptake across the borough.
- People with mental health needs are being placed within the borough, and subsequently need access to services.
- Haringey is in the top 3 in London for rate of psychosis.
- People with mental health needs are more likely to die on average ten years earlier than average.

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- There is a need to improve access to other accommodation so that people are not unnecessarily in expensive acute beds. Getting a person reconnected to power can take weeks; this has an impact on a person being discharged from acute care.

LC3. MENTAL HEALTH PROJECT SCOPING

The Panel agreed to undertake two projects focusing on mental health:

1. Access to accommodation for people with mental health needs, including on discharge from acute care.
2. The link between physical health and mental health.

It was agreed that both of these projects would have a specific BME strand to them.

LC4. WHITTINGTON HEALTH - TRANSFORMING HEALTHCARE FOR TOMORROW

- The Whittington Health Clinical Strategy is the main driver to changes, with other strategies following this.
- Integrated care is a way of thinking for example Enhanced Recovery
 - Systematic with patient at the centre.
 - Getting people up and about quickly.
 - Multi-disciplinary case conferences.
- Ambulatory care is about keeping people moving/walking and not in beds for long periods of time.
- Aim to make decisions on care needs faster so that patients aren't admitted just because the decision maker isn't available at the time.
- Maternity - The aim is to have 4,700 births per year.
- Bed numbers - Any reduction in bed numbers will only take place if there is a reduction in activity.
 - Best estimate is that the number of beds will be stable for at least the next 18 months.
- Whittington Health recognise that they upset the community in the way that they consulted previously.
- Following the listening exercise changes have been made to the Estates Strategy.
- There is a Transformation Board which has member of the CCG and Whittington Health on it. The Council is due to be invited onto this.

Cllr Adamou noted that she is happy that there is no cap on maternity and raised concerns about ensuring that older people are not moved out of hospital too soon.

LC5. WORK PROGRAMME 2013/ 14

The Panel felt that more information was needed on the Corporate plan for example:

- What is the background and context?
- Where have the priorities come from?
- What consultation took place?
- What are the current performance figures in relation to the targets?

AGREED:

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- The Corporate Plan would form an agenda item on the Overview and Scrutiny Committee work plan.
- Cllr Winskill would be invited to informal meetings between the Chair of the Panel and Healthwatch Haringey.

Cllr Gina Adamou

Chair