

Health Scrutiny Committee (HSC) Annual Report 2022/23

Chair's Foreword

“Although the Covid-19 pandemic has passed, it has had a profound long-lasting impact on health care services nationally. We are now in the mists of a cost-of-living crisis that has further impacted our residents and health care services as evident throughout this report. The Committee would like to express our gratitude and thanks to all of our healthcare staff, partners and key colleagues for their dedication and ongoing support to our scrutiny processes and residents of the Borough during these difficult times.

The Committee undertook extensive scrutiny to our health services that matter most to our residents. We have addressed a broad range of topics from updates from healthcare centres within the Borough such as the *Tulasi Medical Centre Update*, to more wider matters such as the *Health Inequalities Funding*.

Councillor Lumsden, Councillor Chowdhury and I have also represented the Borough at the wider forum of the Outer North-East London Joint Health Overview and Scrutiny Committee (ONEL JHOSC) this municipal year. ONEL JHOSC has the responsibility for local joint health scrutiny arrangements amongst the three of our neighbouring London Boroughs which includes Havering, Redbridge, and Waltham Forest. Through this, we have looked to echo the voices and concerns of our residents to ensure our key priorities are achieved.

I look forward to continuing to work with colleagues over the coming year, with a view to reaching our vision of continuously improving health services and amenities for our residents.”

Cllr P Robinson

Chair, Health Scrutiny Committee

Membership

During the 2022/23 municipal year, the Health Scrutiny Committee consisted of seven Councillors:

- Cllr Paul Robinson (Chair)
- Cllr Michel Pongo (Deputy Chair)
- Cllr Muhib Chowdhury
- Cllr Irma Freeborn
- Cllr Manzoor Hussain
- Cllr Chris Rice
- Cllr Maureen Worby (Invited to attend as Cabinet Member for Adult Social Care and Health Integration)

Support was received from Masuma Ahmed, Principal Governance Officer and Claudia Wakefield, Senior Governance Officer.

Proposed Diagnostic Centre at Barking Community Hospital

Members received a presentation on the proposed diagnostic centre at Barking Community Hospital (BCH). As part of a national NHS England-funded programme to improve access to diagnostics to support early diagnosis of disease, the £15 million CDC project would include CT, MRI, X-rays, ultrasounds, physiological measurements and blood tests. This would enable residents to benefit from a 'one stop shop' for diagnostics before secondary care referrals. Amongst the three CDCs which would open in the next few years, BCH CDC was proposed to open between October – December 2023.

Details surrounding the funding and organisation of the centre were outlined, alongside the strong apprenticeship model it carried as a representative of the local community. This would create 100 additional permanent jobs across the CDC as a means of starting a progressive career, with the support of an extra £250,000 from Health Education England in 2020 to improve its training academies. Although the CDC aimed to best serve the needs of the community, it was stated that mental health diagnostics were not included in the first stage of the CDC and would be introduced at a later stage. Engagement with the local community as service users was highlighted.

Enhanced Access Update

The Committee received an update on enhanced access. It was outlined that all Primary Care Networks (PCNs) in England were required to offer patients a new 'enhanced access' model of care from 1 October 2022, replacing the current Extended Hours and Extended Access services provided for non-urgent out-of-hours care. GP practices would be open between 6:30-8pm from Mondays to Fridays, and between 9am-5pm on Saturdays. Services would include GP, nurse, and therapy through face-to-face, telephone and remote appointments. Resident feedback and patient surveys would further develop the model, which would run from three local sites. Additional funding was secured to keep the current GP Access Hub service running until 31 March 2023.

Service users could choose their preferred appointment type with the 'enhanced access' model for routine patients, enabling approximately 72,000 additional appointments annually through six PCNs. GP practices aimed to accommodate 70 percent of appointments face-to-face, and the remaining 30 percent via E-Consult or 111 services, which would contribute to a reduction in patient visits to Accident & Emergency services. NHS NEL was also in discussion with Council colleagues on cost-effective, accessible sites such as Family and Children's Hubs to expand services across the Borough. GP practices would ensure that the availability of new staff and services would be best suited to patient's needs, alongside making services accessible for patients with learning disabilities. The Director of Public Health noted that the new 'enhanced access' model would create positive outcomes for residents who were unable to access current GP services due to work commitments.

Tulasi Medical Centre Update

Members received an update on the Tulasi Medical Centre (TMC) and the Faircross Health Centre (FMC), following their inadequate Care Quality Commission (CQC) ratings. TMC was rated inadequate and had its registration suspended based on the CQC's inspection of their practice as a safe, effective, caring, responsive to people's needs and well-led service. An action plan was necessary to address the highlighted issues such as medicine management, safeguarding and infection and disease control, where an NHS

NEL team would monitor weekly progress over a period of six months. Similarly, FMC was rated inadequate by the CQC, and received support from NHS NEL on its action plan, but remained registered with the CQC following the inspection.

A CQC reinspection was due to take place at the end of the six-month remedial period with a new team to perform thorough checks on the services. The change in GP practices over time was recognised, and associated with this was the increasing pressures on workload, workforce and funding which required improvement, and were looked into by the NHS NEL quality roundtable. Challenges during Covid-19 for TMC, and GPs in general, were noted as they provided multiple services due to high demand. To support this, there were monthly GP education and training events in Barking and Dagenham which explored common themes and issues. TMC also had additional resources to assist with remedial work, alongside resources and funding from the GP Federation and NHS NEL to further support them. Regular updates were provided to CQC and NHSE by TMC to track progress.

Updates relating to Winter Pressures, Vaccinations and the Cost of Living

The Committee received an update on the Integrated Care System (ICS) approach to managing winter pressures in 2022/23, and the recent winter summit held by Barking and Dagenham Partnership, to consider actions locally to keep people safe and well at home. The ICS received additional funding over winter, directed to providers such as Barking, Havering and Redbridge University Hospitals Trust (BHRUT), North East London NHS Foundation Trust (NEFLT) and the local authority, to invest in workforce capacity.

The funding would support care provider partnerships, training and skills development recruitment, social work in A&E and aimed to increase capacity in emergency response services. Other collaborative measures between Primary Care, community care and voluntary services include proactive care; the NEL ICB commissioned an enhanced health care home scheme to support residents in care homes with complex needs. Collaboration was essential for health management, where people received guidance on keeping well at home; and urgent care services, which enabled rapid community responses for people with long-term health conditions. Moreover, ICB Internal Discharge Hubs would support hospital discharge with ongoing care assessments which was strengthened during Covid-19. Discussions on the Winter Summit focused on children and young people's health through improving flu immunisation rates and addressing respiratory viruses for young children. It was highlighted that the cost-of-living also required collaboration, especially for clinically vulnerable people, to reduce A&E visits whilst educating them available support, medically or via warm spaces networks or organisations such as the Cost-of-Living Alliance. The Council's Cosy Homes Scheme was recognised to support residents facing the Cost-of-Living crisis to stay warm, save energy and lower their energy bills through subsidised energy-saving improvements.

Place-Based Partnership Update

Members received an update on the place-based partnership governance arrangements, outlining the structure and roles involved as part of this. The Council's Acting Chief Executive and Place Partnership Lead (ACEPPL), the Clinical Director for Barking and Dagenham, the Director of Integrated Care (DIC) at NEL ICB and the Integrated Care Director (ICD) at NELFT each outlined their vision for their roles as part of the Place-Based Partnership arrangements, as well as the importance of working collaboratively to address issues across the Borough.

Although the Health Scrutiny Committee would continue to have a key role in governance and decision-making, it was important that the Committee's work programme aligned with some of the decisions that were to be taken across the ICS. Going forward, the Committee would scrutinise decisions of all partners across place, including Health partners, system leaders such as the NHS, the Voluntary and Community sector, the Council and provider collaboratives. It was recognised that ensuring all key decisions were brought to the Committee to be able to deliver its statutory duties and service changes, would be a challenge for officers. Further, the terms of reference for the Committee would be amended to account for its wider role, as well as having a wider attendance to accommodate for additional key partners. A collaborative approach to address health inequalities within the Borough was highlighted, encouraging ongoing and open dialogue for effective decision-making to improve the quality and allocation of resources across services.

New Moorfields Hospital Eye Hub at Stratford, London

Members received a report on the proposal to provide additional eye care at a new site in Stratford from Spring 2023. This would facilitate a range of eye services for the local community including glaucoma, medical retina and cataracts, a specialist pharmacy, diagnostics, face-to-face and surgical treatments. The existing Barking would become a centre offering diagnostic tests for eyes, jointly operated by Moorfields, BHRUT and Barts Health. All face-to-face eye clinics provided at Barking would relocate to the new Stratford facility.

Details of patient accessibility were discussed, where transport for eligible patients would be available to and from the Stratford site which benefitted from better facilities, whilst the majority of patients continued to receive care at Barking. Alongside the Barking CDC, such facilities would enable diagnostic services for patients separate from hospital sites, effectively creating a 'one stop' model for services in a good location with parking and public transport links. A mixed pathway would be prioritised across various sites for patients with medical retina and glaucoma, depending on the frequency of treatment and intervention. The Trust was also explored its emergency care model of delivery; a pilot model at the City Road site enabled it to triage patients who were referred to A&E. Patient feedback suggested that this model should be available at the Stratford site in the future. Issues surrounding patient appointment attendance was also mentioned; the Trust aimed to reduce 'Did Not Attends' from 30 percent during the peak of Covid-19, to 10 percent by improving patient portal and communication.

Health Inequalities Funding

The Committee received a presentation on the Barking and Dagenham Health Inequalities Programme 2022/23, which provided context as to health inequalities in the Borough in comparison with London and nationally, how the funding was secured for the programme, programme workstreams and the benefits of the programme. The Council offered access to social prescribers providing expert advice on debt and health for adults who struggled with debt such as Council Tax or those who struggled with mental health problems, as shown on social care records. The Council aspired to upscale this facility with help from the NHS. It was detailed that the debt workstream focused on residents who were falling into debt prior to escalation, so referrals into Talking Therapies or IAPT would not be made as medical diagnosis or clinical assessment were not a part of the programme. The Council emphasised having a shared understanding on health inequalities across the

system to better support planning delivery and worked closely with its Data Insight Hub to put this into effect.

The NEL ICB stated that there was an opportunity to look at how residents could be better signposted to NHS services and confirmed the recurrent debt workstream funding which supported long-term planning. Self-referral into IAPT services was also available for concerned residents. Inequality Clinical Leads for each Primary Care Network also had access to resources to identify different conditions and provide a tailored approach to these areas. In consideration of children and young people, there was a workstream to identify interventions to target low-level mental health issues, alongside self-referrals to the Barking and Dagenham CAMHS service. Ensuring that school counsellors and GP services were young people-friendly was also mentioned, whilst promoting services across public spaces was key to encourage an open dialogue.

NHS North East London – Severe Weather System Response Presentation

Members received an update on the NHS North East London Severe Weather System Response. From a NEL ICB perspective, the main risk related to the Summer 2022 heatwave was around fire incidents. This winter, there had not been a cold weather alert but the presented risks were linked to Covid-19 and infection.

Elderly residents were recognised as a vulnerable group with increased likelihood of impacts from severe weather than younger patients, but as part of the Severe Weather Plan objectives, it was clear that the system for identifying vulnerable groups needed to be improved. To gain a better understanding of how crises impacted vulnerable groups at a local level, a data sharing agreement between local partners was suggested to support vulnerable patients effectively across the system. It was important to define the term 'vulnerability' to effectively provide support to patients in extreme weather cases which impacted treatment pathways and appointment attendance. The ICD at NELFT detailed the Government's 'Must Do Must Supply' energy list which included the NHS, which identified priority sites which would receive energy supply during crises. A local infrastructure forum looked to coordinate improvement actions required around estates, ultimately to re-provide services or potentially bring in capital to improve services. Specific sites would be prioritised through the Estates team and NELFT would look at options to ensure that services could continue running despite severe weather conditions. Moreover, uptake of the flu vaccine had been very low compared to the Covid-19 vaccine, despite its communications and publicity campaigns across North East London. The Director of Public Health stated the potential impact of flu could result in excess pneumonia deaths due to lack of vaccination.

Annual Report of the Director of Public Health 2022- 'People, Partnerships, Place Seizing new opportunities to improve health'

The Director of Public Health (DPH) presented his 2022 Annual Report, which was a statutory requirement of the DPH, mapping out the key issues facing Barking and Dagenham and considering potential solutions based on evidence and epidemiology.

The presentation detailed the context of the report, and provided links between the report itself, the Health and Wellbeing Strategy and the Integrated Care Strategy. A focus on contributing factors to widening health inequalities was highlighted; these included individuals' reluctance to come forward for early identification of disease, implications surrounding the Covid-19 pandemic and the cost-of-living crisis within the Borough.

Potential solutions were suggested, such as through the development of the Place-based arrangements and the Integrated Care System.

Shaping the Refresh for the Joint Local Health and Wellbeing Strategy 2023-28

The Committee received a report to provide comment on the direction of travel for refreshing the Joint Local Health and Wellbeing Strategy (JLHWBS), in the context of the newly established Place-based Partnership and Integrated Care System. The current Barking and Dagenham Health and Wellbeing Strategy (HWBS) would end in March 2023, replaced with the Joint Local Health and Wellbeing Strategy (JLHWBS), to include the new Integrated Care System (ICS) and the Council's relationships through the new place-based arrangements. The refreshed Strategy would set out a renewed vision for improving residents' health and wellbeing whilst reducing inequalities at every stage of residents' lives by 2028. It was noted that the NHS NEL ICS would need to be considered when preparing the new Strategy. A Joint Forward Plan would be developed to deliver the ICS, in alignment with a Local Delivery Plan.

The importance of ensuring that all documents tied in together and reflected Barking and Dagenham priorities, as well as those of the other boroughs within outer North East London, was highlighted. This would allow for the Committee to challenge and identify any potential gaps which would help to create an effective local Strategy. The priority of mental health related issues, such as anxiety and depression, were most prevalent in Barking and Dagenham highlighted necessary improvements to be made, including CAMHS' waiting lists. Whilst many issues affected other Boroughs, it was important to understand that the needs and unique representation of the Borough were reflected. The involvement of Partnership Board, as well as NELFT AND NEL ICB into Barking and Dagenham Health Scrutiny Committee was useful for Members to look at items of interest and examine changes to services.

North East London Integrated Care Strategy Development

Members received a short update on the North East London Integrated Care Strategy Development, which was originally presented to the ONEL JHOSC at its meeting on 10 January 2023. The update focused on key points such as the next steps around the development of smarter metrics to measure success against the Strategy's objectives, and engagement work which was undertaken by the Voluntary Sector as part of the Strategy development. Opportunities for the Committee to provide feedback on the Strategy were raised to be shared with NEL ICB.

The Cabinet Member for Adult Social Care and Health Integration shared details about a programme called 'the Big Conversation' in North East London, which was useful for community consultation and the development of the Strategy. These conversations would be influenced on a place-level, conducted within each borough and the best practise would be reflected into the engagement process. As community feedback was received, the Strategy which was an interim document, would continue to change. This would ensure that the Strategy and community conversations would be as effective as possible.

NELFT CQC Inspection Update: March 2023

Members received an update on the NELFT Care Quality Commission (CQC) Inspection as of March 2023. The CQC Well-Led inspection of NELFT between April to June 2022

was completed with a new rating of 'Good', with positive feedback received regarding NELFT safeguarding policies and the Well-Led Improvement Plan would be monitored for progress.

The response backlog for complaint response times through Datex, an electronic system for NELFT's incident reporting and complaints monitoring, was discussed. NELFT's acknowledgement rate of complaints within a three-day period was now at 90%. The Lead Inspector praised NELFT in 2022 for its cultural and behavioural changes alongside senior leadership improvements, which helped to address its previous challenges in its 2019 inspection. NELFT aspired to become an 'Outstanding' trust by engaging with its CQC action plan through its new place-based arrangements, though they faced challenges such as significant population growth and the continued impact of Covid-19. Staff recruitment and retention programmes were also discussed. NELFT staff surveys suggested the work environment was based on inclusivity, agile working and flexibility. Despite a national workforce shortage, NELFT recruited over 240 internally educated nurses. Further, 18-week breaches in Adult's Autism, Paediatric Autism and Paediatric Speech and Language pathways were problematic due to suspended physical assessments during the pandemic. Waiting lists depended on the service, and some services focused on providing assessment and initial treatment, as opposed to longer-term treatment. Group provision had been introduced above one-to-one service, and other interventions included utilizing Assistant Psychologists to provide lower intensity programmes whilst patients waited for treatment.

Early Pregnancy Assessment Unit (EPAU)

The Committee received a presentation on the Early Pregnancy Assessment Unit (EPAU), which focused on the accessibility of the service, miscarriage care and support, the Trust's efforts to decrease the risk of repeat miscarriages and patient feedback.

Effectively managing miscarrying patients included facilities such as a quiet room for patients and their families who received bad news. A bespoke quiet room was not currently available due to changes during the pandemic. Furthermore, the decreased miscarriage rate in 2022/23 in comparison to the pandemic was directly linked to lower birth rates recently. Support in the Early Pregnancy Unit was acknowledged through mental health first aid for both staff and patients, alongside training on communication skills to deal with sensitive situations effectively. BHRUT was linked with SANDS (a bereavement charity); bereavement midwives further provided close support with links to Adults and Perinatal mental health services, making direct and inpatient referrals easily accessible if required during early stages of pregnancy. NELFT perinatal infant mental health services (PIMS) and the Tulip services were available as a maternal mental health specific pathway. The Committee also suggested that support for fathers, partners and vulnerable populations such as teenagers who experienced miscarriage and pregnancy loss was essential. Women were encouraged to visit GPs, antenatal services and Early Pregnancy Units through self-referral to receive support early on. Genetic testing for women who experienced recurrent miscarriages to investigate potential underlying causes under the Fetal Medicine Unit. Safeguarding was highly important, and the importance of looking after staff health and wellbeing due to the emotional burden and psychological challenges they may face.

Proposed Governance for Place-Based Partnerships

Members received an update on the developing place-based partnership arrangements, which the Council had to agree with the North East London Integrated Care System (NEL ICS) and partners such as BHRUT and NELFT to come into place from 1 April 2023.

Discussions focused on streamlining processes to reduce the number of meetings with the same agenda items. Therefore, a joint Committee of the Health and Wellbeing Board meeting at the same time as the Integrated Care Board Sub-Committee would be a useful approach, to speed up decision-making and reduce health inequalities in a more efficient manner. Between now and July 2023, all partners would need to consider how this approach would operate in consideration of factors such as administration. Moreover, refinements of the Health and Wellbeing Board were to be considered; for example, Primary Care Networks (PCNs) and the GP Federation were not currently on the HWB or the ICB Sub-Committee. Once the Committee agreed, it was hoped that the new arrangements would bring issues closer to local politicians and residents in order to have more involvement in decision-making over services and resource allocation according to the needs of local people.

Joint Local Health and Wellbeing Strategy 2023-28 Refresh Framework for Delivery – Consultation

Members received a presentation on the Joint Local Health and Wellbeing Strategy 2023-28 refresh framework for delivery and consultation. This set out the health and wellbeing needs of residents and the proposed actions to be undertaken over the following three to five years to improve health outcomes.

The Council was engaging on the Strategy with professionals, partners and the wider community through social media, digital media through the website and the Council's newsletter. The outcomes of the recently undertaken consultation on the Council's Bets Chance in Life Strategy for prenatal conception care through to age 25 were considered in the Health and Wellbeing Strategy. Moreover, the Council's engagement with 'harder to reach' patient groups, including the homeless, asylum seekers and emerging communities, such as the growing Romanian community, was recognised through its existing networks, partners and Healthwatch. Challenges due to complex medical language, speech and language barriers or learning disabilities were highlighted in relation to delivering medical and mental health care. However, the Council was investing in more interpretation services for patients, alongside introducing community advocates by co-locating community hubs within faith community spaces to improve health inequalities overall. NELFT's contract with the Language Shop which provided interpreting services across London boroughs for both sign and spoken languages, both in-person and over the phone. Engagement through annual school health surveys and the LGBTQ+ community was also mentioned, where the Borough had well-established partners. The needs of the Lithuanian community needed to be better considered, and further work would be done to improve their access to services.

Scrutiny Review on the potential of the Voluntary and Community Sector 2022/23

The Committee agreed to undertake a scrutiny review in 2022/23 on the Voluntary and Community Sector (VCS) to consider how it may contribute to reducing health inequalities within communities and identify opportunities to ensure that the VCS and residents have a

meaningful role in shaping future strategy/ service delivery. This review has recently concluded and I will be updating all members on this in due course.

Contact

For further information on the Health Scrutiny Committee, or the Council's scrutiny arrangements in general, please contact:

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