

MINUTES OF HEALTH SCRUTINY COMMITTEE

Tuesday, 11 September 2018
(7:00 - 8:59 pm)

Present: Cllr Eileen Keller (Chair), Cllr Paul Robinson (Deputy Chair), Cllr Peter Chand, Cllr Irma Freeborn and Cllr Emily Rodwell

Apologies: Cllr Chris Rice

1. Declaration of Members' Interests

There were no declarations of interest.

2. Joint Health Overview and Scrutiny Committee - Update

The Chair asked members to note a report on the Joint Health and Overview Committee (JHOSC), which as well as providing background and information on local joint health scrutiny arrangements between the borough, and the boroughs of Havering, Redbridge and Waltham Forest, asked members to confirm the appointment of three members of the Committee to the JHOSC.

The Committee agreed to appoint Councillors Keller, P Robinson and E Rodwell to the JHOSC for 2018-19.

3. Ilford Urgent Care Centre - Inadequate Rating by CQC

Sharon Morrow, Chief Operating Officer at Barking and Dagenham Clinical Commissioning Group presented a report on the Ilford Urgent Care Centre Inadequate Rating by the Care Quality Commission (CQC).

Following publication on 22 August of the CQC report into the Urgent Care Centre service at King George Hospital (KGH), provided by the Partnership of East London Cooperatives (PELC), Barking and Dagenham, Havering and Redbridge CCGs, together with Barking, Havering and Redbridge University NHS Hospitals Trust, took immediate action and conducted a formal, clinically-led quality assurance visit to the site the next day in order to determine any patient safety issues.

After the CQC inspection in April 2018, PELC implemented a number of changes to practices at KGH. Following a visit by the CCG, they were assured of the safety of services provided by PELC at KGH and that patients could be confident in the safety and quality of the services being provided in the Urgent Care Centre.

The CCG had placed PELC on an enhanced level of surveillance for the next six months and issued a list of immediate actions to be completed. The CCG reported that within a matter of days of this new process being in place, all immediate risks to patient safety had been fully mitigated and all deadlines for completion of actions had been met.

In response to questions, the Committee were advised that:

- The Director of Nursing was removed from post following the CQC's findings;
- A new Medical Director had been appointed; and
- A recruitment process was underway for a new Chief Pharmacist, although it was noted that there were no control drugs held at the urgent care centre.

The Committee **resolved** that the item be referred to the Outer North East London Joint Health Overview and Scrutiny Committee.

4. BHR NHS Trust - Financial Update

Chris Bown, Interim Chief Executive of Barking, Havering and Redbridge University Hospitals NHS Trust gave a presentation to the Committee on the current finances of the Trust.

Mr Bown gave a detailed presentation to the Committee, covering the following areas:

- Performance;
- Finance;
- Moving Forward;
- Working in Partnership; and
- Next Steps.

A cash shortfall had been discovered by the Trust in Autumn last year and in February 2018 the trust was placed in to Special Measures for Finance. Placing the Trust in Special Financial Measures would return the Trust to a period of financial stability. PricewaterhouseCooper had been appointed to support the Financial Recovery Plan delivery, which was approved by the Trust's Board in June 2018.

Grant Thornton were appointed to undertake an independent study into underlying issues and the report, published in April, highlighted concerns including:

- Higher demand and delivery of services above the levels agreed with the clinical commissioners; some optimistic assumptions about 2017/18; overspending; weak financial control; a lack of forward analysis of our cash requirements; and
- the robustness of the trusts approach to delivering the Quality and Cost Improvement Programme (QCIP)

The Committee were concerned that the issues with cash flow were only noticed when there was a significant shortfall and were advised that changes had been made to ensure Board reports contained details about the cash flow going forward.

The report was noted.

5. Review of Mortality at Barking, Havering and Redbridge Hospitals NHS Trust

Magda Smith, Acting Medical Director, presented a report on mortality at the Barking, Havering and Redbridge Hospitals Trust.

Barking, Havering and Redbridge Hospitals NHS Trust (BHRUT) was a busy

acute care organisation with a catchment population of over 750,000. The Trust had over 2,000 deaths per annum and the demand placed on developing a Mortality Review Service had been considerable. The Trust had engaged and implemented a Lead for Mortality who directed the Trust's Learning from Mortality Strategy.

The Trust aimed to review 100% of deceased patient records using an established checklist review. This was completed by the doctor at the same time as the death certificate. The Trust had completed over 6,000 reviews since June 2015 with a current average completion rate of 75%.

The BHRUT Mortality Faculty regularly undertook a schedule of case record reviews following the Royal College of Physicians (RCP) methodology. This provided the Trust with a resource to deliver a baseline of mortality reviews. The purpose of these reviews was to identify areas of good and poor practice and to develop strategies for care quality improvement. Alongside this the trust were developing a Faculty of Junior Doctor mortality reviewers who would have the opportunity to use the review process as part of identified Quality Improvement projects, as well as developing the use of local mortality reviews in specialty Mortality and Morbidity meetings.

The Committee were also advised of the mortality governance process of the Trust which included:

- Mortality Checklist

Using various prompting questions, the Trust try to identify whether the patient had any significant concerns about problems in care that may have contributed to patient death.

- Mortality Reviews

Assurance that clinical reviews undertaken by the Mortality Faculty had identified a majority of good practice and no avoidable death.

- Mortality outliers and Care Quality Commission alerts

BHRUT was identified as being an outlier for mortality in patients with pneumonia and for patients with biliary sepsis. The Trust engaged the clinical teams responsible for the care of these patients to undertake the mortality reviews of the appropriate mortality groups and then develop a quality improvement strategy based on their learning from.

In response to questions, the Committee were advised that:

- Mortality in relation to high risk surgery was around the national expected figures;
- Referrals from other hospitals did not have an impact on mortality rates in the Borough;
- There was a high number of hospital deaths compared to a low number of 'at home' deaths in the Borough as many patients did not present themselves to health services until it was too late, for example late stage four cancer patients were found presenting themselves for the first time at Accident and Emergency

Departments; and

- The CCG had agreed to establish an Older Peoples Transformation Programme due to the growing population which would assist in aligning GP practices to care homes;

The Committee noted the report.

6. Scrutiny Review: Childhood Obesity

Tom Stansfield, Health Improvement Advanced Practitioner- Policy Officer, gave an in-depth presentation on obesity in children.

Barking and Dagenham had among the highest rates of overweight and obesity in reception and year 6 children in London. In order to reverse this system wide action, taking into account the work of the council, NHS and voluntary and private sectors, was required.

The Health Scrutiny Committee (HSC) had requested a review of system-wide action on childhood obesity. The aim of the review would be to bring together all the available information to date and make recommendations to tackle the obesity problem from a system-wide approach.

The Committee were advised that the requested review was timely as Public Health England and the Local Government Association had been working on developing guidance for a whole systems approach to obesity since 2015. The programme placed considerable emphasis on creating the right environment for change in the local area, collaborative working across the local system and the dynamic nature of such a system.

To assist the Committee in their review, the officer advised that the council were currently engaged in several initiatives to tackle childhood obesity which included:

- The application of fast food exclusion zones of 400M around schools.
- The implementation of the Healthy Pupil's Capital Fund (the soft drinks sugar levy).
- Street Tag – a fun and interactive game designed to get people walking more.
- A recently completed piece of work into behaviour change and attitudes to weight management, which will influence how we develop future obesity prevention and support programmes in the borough.
- Healthy living promotion is a key requirement of our commissioned children's 0-19 services, including the taking part in the National Childhood Measurement Programme.
- A fully subsidised year-round holiday activity programme for children and young people aged 5 – 11years. This works in partnership with local clubs and organisations to deliver a range of inclusive cultural, sport, health and fitness activities.

The Council had also commissioned a structured programme for children and their families with a high BMI, that consisted of healthy eating education and support, plus exercise. The courses were borough-wide and delivered in schools and community venues. The programme underwent a re-launch earlier in the year and was now called 'The LEAN Beans Club'. It was designed to be fun, engaging and

interactive.

The following terms of reference and work programme were then proposed to the Committee for the scrutiny review:

Terms of Reference

1. Are the identified outcomes from the Healthy Weight Strategy, the right ones to focus on?
2. What is happening locally already to tackle obesity?
3. What are the evidence-based interventions which will have most impact?
4. What could we and should we be working together on in order to address gaps in the system and become more effective in making a difference at scale and pace?

Work Programme

11 September 2018

Presentation of draft scoping report & visual presentation of the issue to HSC meeting

September

Healthy New Towns workshop

Provide the Health Scrutiny Committee with a chance to understand how Barking Riverside Healthy New Town provides opportunities for the whole systems approach to obesity, and how this might inform their recommendations.

October

Stakeholder workshop

An opportunity for members of the Health Scrutiny Committee to hear the views and recommendations of stakeholders in childhood obesity such as BeFirst, Education and the Voluntary Sector.

This will include action planning for stakeholders to feedback the views and opinions from the respective communities and sectors that they are involved with.

October

Q&A with Healthcare Representatives

Provide members of the Health Scrutiny Committee with the opportunity to question NHS representatives on their work to reduce the burden of obesity, their plans and the best evidence around taking a whole systems approach.

November

Councillor visit to 'Lean Beans' programme

Provide members of the Health Scrutiny Committee with an opportunity to visit the current programme for children and families around exercise and nutrition. Including opportunities to speak to residents taking part and people running the sessions.

18 December 2018

HSC meeting - Draft report and recommendations

25 March 2018

HSC meeting – presentation of final report

The Health Scrutiny Committee discussed the proposal in detail and **resolved** to agree the proposed terms of scope and work plan for the Scrutiny Review.

7. Health Scrutiny Committee Draft Work Programme 2018/19

The Committee received report on the work programme for 2018-19 and agreed to adopt the draft work programme for 2018-19.