

<b>Item No.</b> 11.	<b>Classification:</b> Open	<b>Date:</b> 2 October 2014	<b>Meeting Name:</b> Health and Wellbeing Board
<b>Report title:</b>		Access to Health Services in Southwark (Health, Adult Social Care, Communities & Citizenship Scrutiny Sub-Committee)	
<b>Ward(s) or groups affected:</b>		All	
<b>From:</b>		Healthy Communities Scrutiny Sub-Committee	

## RECOMMENDATIONS

1. That the Health and Wellbeing Board notes the contents of the review report: 'Access to Health Services in Southwark' and that the board provide a response to the relevant recommendations at the following board meeting on 20 November 2014, and convey that to the Healthy Communities scrutiny sub-committee.

## BACKGROUND INFORMATION

2. Attached is the final report arising from the scrutiny review of Access to Health Services in Southwark, produced by the previous administration's health scrutiny committee: 'Health, Adult Social Care, Communities & Citizenship scrutiny sub-committee 2013/14' – Appendix A.
3. Access to health services throughout Southwark is varied, with differing issues presenting at each access point. Each of these issues is interlinked, and an under-performance in one sector will necessarily impact on other health services. With increased, sustained pressure on the health service it is important, now more than ever, to have services which are truly delivering for our residents. The Health, Adult Social Care, Communities & Citizenship Scrutiny Sub-Committee therefore decided to consider the range of health services provided in the borough, and the ways in which our residents interact with these. In doing so, the sub-committee found a number of key issues which are leading to strains being placed on other health services
4. The scrutiny review focused on four areas of concern:
  - Access to out of hours care – specifically the 111 Service and rollout in Southwark
  - Understanding the reasons for increased use of A&Es over winter and how this could be reduced
  - Access to individual GP surgeries and walk-in centres
  - The implications of the Trust Special Administrator (TSA) and King's Health Partners (KHP) merger on access to emergency and urgent care.

5. The 2013/14 Overview & Scrutiny Committee considered the sub-committee's report at its meeting on 10 March 2014. The committee welcomed the report and the valuable work of the sub-committee.
6. Southwark Council's cabinet provided a report responding to the review's recommendation for the local authority on 16 September 2014 - Appendix B.
7. The CCG, Hospital Acute Trusts and NHS England have been asked to provide a response to the Healthy Communities scrutiny sub-committee by 23 October and present at the committee meeting on 11 November.

## **HEALTH, ADULT SOCIAL CARE, COMMUNITIES & CITIZENSHIP SCRUTINY SUB-COMMITTEE RECOMMENDATIONS**

8. The sub-committee's recommendations are set out below in full, with those for consideration by the Health and Wellbeing Board set out in bold: recommendations 3, 8 & 13.

### **Recommendations**

#### **The 111 Service**

1. We recommend that the Clinical Commissioning Group should report an update when there are next discussions on the potential rollout of the NHS 111 Service in Southwark.
2. We recommend that the Clinical Commissioning Group should provide clarity on the telephone numbers that residents can use to access out of hours healthcare services in the borough.
3. **We recommend that the Health & Wellbeing Board and the Clinical Commissioning Group place signposting to healthcare services as a key priority for 2014/15, with key activities to reach all communities throughout the borough.**

#### **Accident and Emergency Departments**

4. We recommend that the Trusts regularly report to the sub-committee on current staffing levels and the ways in which they are working to ensure that they are adequate.
5. The sub-committee recommends that Hospital Trusts should report quarterly on the number of beds available to A&E patients and how this compares to the number of beds needed, with particular reference to emergency admissions for older people and people in mental health crisis.
6. The sub-committee commends the 'Not Always A&E' campaign and recommends that it is rolled out throughout the year to help promote public awareness of the alternative healthcare services that residents can access.
7. We further recommend that Public Health supports the CCG in their campaign, ensuring that public awareness of the alternative healthcare services increases.
8. **We recommend that the Health & Wellbeing Board and the Clinical Commissioning Group make raising the public awareness of the healthcare services available to Southwark residents a priority for the next year.**

9. We recommend that the Clinical Commissioning Group continues its programmes working specifically with older people and that Public Health identifies the further support that we, as an authority, can be giving them.

10. This sub-committee commends the work of the CCG, jointly with the local authority and community services to help people stay well at home for longer. We would like to see further evidence of the work being done on the frail elderly pathway to ensure that we are offering our residents the best care services.

11. This sub-committee welcomes the work being taken forward by the Adult Social Care department. We recommend an update report on the services provided for older people with high needs to be made to the next sub-committee.

12. We recommend that further work is done by the Adult Social Care team within the council, looking specifically at the ways in which we can identify and support older people to prevent admissions to A&E.

**13. We remain concerned however that there seems to be a lack of co-ordinated action by the health community to tackle the issue of increased acuity of patients. The subcommittee recommends that the Health & Wellbeing Board places this as a priority for 2014/15 and that Public Health carries out a piece of research into the reasons behind the increased acuity in Southwark.**

14. We also recommend the establishment of a joint working group, led by the CCG and working alongside those involved in the JSNA and including the council, Hospital Trusts, Public Health and Healthwatch to look specifically at the ways in which we can support those people with long-term conditions in the community, and reduce presentations at A&E wards.

15. We recommend that the Mental Health sub-group of the Lambeth and Southwark Urgent Care Board presents its final Action Plan to the sub-committee for further comment.

16. We recommend that the final draft of the Joint Mental Health Strategy is presented to the sub-committee ahead of publication for further scrutiny.

17. We welcome the decision by SLAM to collate information on classifications of presentations to Emergency Departments and would recommend that this information is shared as part of the Joint Mental Health Strategy that is being developed.

18. We recommend that Kings College Hospital and Guy's and St Thomas' place the provision of safe, secure spaces for the treatment of patients presenting with mental health conditions as a key priority in their workplans for 2014.

19. The sub-committee welcomes the services that are currently provided by SLaM to support those with mental health conditions in Southwark. We recommend that priority is placed by SLaM on supporting people with mental health in the community, and intervening ahead of any admissions to A&E wards.

### **Access to GP Services**

20. We recommend that the CCG and Hospital Trusts work together to reduce the time taken for GP surgeries to receive outpatient reports. We also recommend the CCG look into the ways in which they can provide template forms and support to GPs to

help them reduce the time taken on administrative tasks related to patient consultations.

21. We recommend that the Housing Options & Assessment and the Disabled Travel Team should carry out a review looking at the ways in which to influence customer signposting to ensure that residents are aware of the services that the council provides in terms of assessing residents for blue badges and receipt of benefits.

22. This sub-committee has actively followed and partaken in the consultation around the future provision of health services at the Dulwich Hospital site. We have welcomed the work done by the CCG, and the sub-committee recommends that the CCG provides an update as necessary.

23. We recommend that the CCG report back to the sub-committee on the Lister Urgent Care Centre once more work has been done on the preferred option for the provision of urgent care services in the south of the borough.

24. We recommend that GP services promote the SELDOC service within their local practices, to signpost patients to out of hours services.

25. We recommend that NHS England report to the sub-committee with an update on proposed opening hours of GP surgeries.

26. We recommend that NHS England, with the support of the Clinical Commissioning Group, undertake a study into the best method for providing appointments consistently across the borough and consider a Southwark offer that ensures minimum standards of access for patients in Southwark in regards to contact with a GP if appropriate following NHS England's Call for Action response.

### **The Kings Health Partners Merger**

27. The sub-committee noted with interest that this process has now been delayed and recommends that when a Full Business Case is developed, King's Health Partners should return to the sub-committee for further scrutiny.

### **BACKGROUND DOCUMENTS**

<b>Background Papers</b>	<b>Held At</b>	<b>Contact</b>
<a href="#">Overview &amp; Scrutiny Committee Agenda 10 March 2014</a>	Scrutiny Team 160 Tooley Street London SE1 2QH	Julie Timbrell 020 7525 0514

### **APPENDICES**

<b>No.</b>	<b>Title</b>
Appendix A	Report of the Health, Adult Social Care, Communities & Citizenship Scrutiny Sub-Committee
Appendix B	Cabinet response to the review report

## AUDIT TRAIL

<b>Lead Officer</b>	Shelley Burke, Head of Overview & Scrutiny	
<b>Report Author</b>	Julie Timbrell, Scrutiny Project Manager	
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<b>Dated</b>	17 September 2014	
<b>Key Decision?</b>	No	
<b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b>		
<b>Officer Title</b>	<b>Comments Sought</b>	<b>Comments Included</b>
Director of Legal Services	No	No
Strategic Director of Finance and Corporate Services	No	No
Chief Officers	No	No
<b>Cabinet Member</b>	No	No
<b>Date final report sent to Constitutional Team</b>		17 September 2014