

HEALTH AND SOCIAL CARE SCRUTINY COMMISSION

MINUTES of the Health and Social Care Scrutiny Commission held on Thursday 16 July 2020 at 7.00 pm at Online/Virtual. Members of the public are welcome to attend the meeting. Please contact FitzroyAntonio.williams@southwark.gov.uk or Julie.timbrell@southwark.gov.uk for a link.

PRESENT: Councillor Victoria Olisa (Chair)
Councillor David Noakes (Vice-Chair)
Councillor Helen Dennis
Councillor Maria Linforth-Hall
Councillor Darren Merrill
Councillor Charlie Smith

**OTHER MEMBERS
PRESENT:**

**OFFICER
SUPPORT:** Jin Lin, Acting Public Health Director
Dr Nancy Kuchemann, local GP and NHS CCG South East
London Clinical Lead
Genette Laws, Director of Commissioning , Southwark Council
Julie Timbrell, Scrutiny Project Manager

1. APOLOGIES

Councillor Helen Dennis gave apologies for lateness.

**2. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR
DEEMS URGENT**

There were none.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

There were none.

4. MINUTES

The minutes of the meeting on 22 June 2020 were agreed as an accurate record.

5. IMPACT OF COVID 19 ON RESIDENTS AND NHS

Dr Nancy Kuchemann, local GP and NHS CCG South East London Clinical Lead presented the health information and Jin Lin; Acting Director of Public Health presented the Public Health report.

The following points were made during the subsequent discussion:

- Members raised concerns with the delivery of the 111 service; the first port of call for COVID 19, and other medical matters. In particular a member highlighted a problem with translators, especially Spanish speakers; early in the pandemic people did not get a return call for a week. The GP lead said the 111 service was initially overwhelmed and she acknowledged that there were insufficient translators to cope with demand. She assured members that there is now planning to prevent this reoccurrence if there is resurgence. 111 performance had improved by May and GPs did not have a problem with interpreters.
- In response to questions concerning the large reduction in cancer referrals and attendance at A & E the GP lead said there was a big campaign to encourage people come back to NHS service sometime ago. GP services are open and the majority have remained accessible throughout the pandemic. There are people who do not want to attend hospital or have face to face appointments because they are shielding or worried about infection, however the chance of catching COVID 19 is quite low in our part of the country. Unfortunately here are people presenting later with greater severity of symptoms.
- A survey has been done on the impact of COVID 19 and more information will be ready in the autumn.
- The data on COVID 19 positive cases captures age and postcode; however it does not yet capture ethnicity. Officers do have access to ONS data, but there is a delay of two months. Officers intend to use this data to obtain more information on people with health conditions, and are using data to inform recovery plans and winter planning for a potential second wave , as well as ongoing services supporting people, such as the Community Hub .
- On line testing is available through the post in 24 hours, as well as a drive and walk through centre in Dulwich.
- The R rate in London is difficult to estimate accurately as the methodology becomes less accurate with smaller numbers.

Presently the R rate is released every Friday and is currently 0.7 – 1, however as this is problematic at low level; it is better to look at that in conjunction with new infections and estimated population rate. Using Pillar 1 Hospital data and Pillar 2 walk in and community data 7 new cases have been reported in the last few days, which is low. Southwark's population rate of infection is estimated to be 3 / 3.7 per 100,000, compared with a much greater magnitude in Blackburn, at 47 per 100,000 and 115 Leicester, at 115 per 100,000.

- Antibody testing is primarily currently being used for academic study to inform measurements of past infection rates, rather than being rolled out to the general population. A positive test ought not to change behaviour, as it does not mean that there will be immunity.
- The risk of contract of Covid mirrors class, ethnicity, population density, occupation.
- Public Health is learning about clusters. There are no clusters in Southwark, but officers are learning from outbreaks in meat factories, for example.
- Members raised the particularly difficulties and risks new parents face and officers said that they will be thinking about this through the survey and the health round tables that officers are planning to convene, to inform the recovery plan .
- A further report on the impact on children and young people and risks around Domestic Abuse will come to the next meeting.

6. CORONAVIRUS ACT CARE ACT EASEMENTS

A member asked if the easement powers had been enacted and officers explained that they had not.

7. SOUTH EAST LONDON CLINICAL COMMISSIONING GROUP (SEL CCG) MERGER

Dr Nancy Kuchemann, local GP and NHS CCG South East London Clinical Lead was present to take questions on the paper circulated with the agenda.

In response to questions she explained that regular meetings of the 6 borough CCG meetings are held and these are streamed with 40 members of the public and 8 Southwark residents present at the last meeting; recordings are not yet available to view on the website. Mental Health is delivered through borough based commissioning where possible, led by Partnership Southwark, who are recruiting. Lambeth is further

forward on Mental Health and more integrated. There are arrangements in place with SLAM.

8. SCRUTINY REVIEW: CARE HOME AND EXTRA CARE QUALITY ASSURANCE

Dr Nancy Kuchemann, local GP and NHS CCG South East London Clinical Lead, drew the members attention to slide 14 on the scrutiny review headline report, entitled NHS CCG contract management, where the scrutiny project manager had summarised information supplied by the CCG on services the NHS provide to Care Homes.

9. SCRUTINY REVIEW: CARE HOME AND EXTRA CARE QUALITY ASSURANCE - DRAFT REPORT

The chair invited comments on the headline scrutiny review report.

The Director of Commissioning, Genette Laws, offered to provide some clarifying text to explain the delivery of the additional care homes, which was welcomed.

There was a discussion on ensuring residents and families are able to utilise the complaint process. Members asked how well information is displayed and promoted to residents and family, provided in starter packs, displayed on notice boards, and also brought to their attention. Is there was more that could be done? The Director of Commissioning assured members that this was assessed during the contract monitoring process. The GP lead highlighted the principle of 'No wrong front door' when a concern or complaint is raised by anyone.

Members affirmed the importance of a recommendation on lobbying for Government for adequate funding for care homes, and the Director of Commissioning suggested this recommendation also highlights the need for sufficient funding to cover London Living Wage and Sick Pay, both of which are likely components of the Residential Care Charter, and members concurred.

RESOLVED

The report was agreed, subject to the above changes.

10. WORK PROGRAMME

A final meeting will be convened on the 10 September, and in addition to the work programme item listed, the cabinet lead for Public Health will be invited for an interview.

