

Health and Social Care Scrutiny Commission

MINUTES of the OPEN section of the Health and Social Care Scrutiny Commission held on Thursday 21 January 2021 at 7.00 pm at

PRESENT: Councillor Victoria Olisa (Chair)
Councillor David Noakes
Councillor Maria Linforth-Hall
Councillor Charlie Smith
Councillor Bill Williams
Councillor Kath Whittam

**OTHER MEMBERS
PRESENT:**

**OFFICER
SUPPORT:** Sam Hepplewhite , Director of Integrated Commissioning
Kirsten Watters FFPH Deputy Director of Public Health (Interim)
Liz Brutus, Consultant in Public Health (Health Improvement),
Julie Timbrell, Scrutiny Project Manager

1. APOLOGIES

Apologies were received for Cllr Sandra Rhule and Cllr Sunny Lambe . Cllr Kath Whittam attended as a substitute for Cllr Sunny Lambe.

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

There were none.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

Cllr Bill Williams declared his husband works for the NHS.

4. MINUTES

The minutes of the meeting on 10 November 2020 were agreed as an accurate record.

5. VACCINE AND TESTING ROLL-OUT, SAFETY AND CONFIDENCE

Vaccine rollout

Sam Hepplewhite, Director of Integrated Commissioning, Southwark NHS, gave a presentation on vaccine rollout. The chair then invited questions and the following points were made:

- Sam Hepplewhite confirmed that cohort 4 is the over 70s and people who are clinically extremely vulnerable.
- Councillors have been contacted by people concerned that they will miss communication for their vaccine appointment as many do not have a mobile phone to receive a text and in some areas the post is unreliable. Sam Hepplewhite said that GPs will use multiple ways to contact people, including ringing landlines.
- Some people have received duplicate vaccine invitations from their GPs, local hospitals and the national programme based at the Excel because of different lists being used by different institutions, which have not yet been integrated. There will be multiple invitations until the process is coordinated, however the NHS believe more is better , as there is only a small risk people will have more than one vaccination , which is in any case not a health risk.
- The vaccine refusal rate is declining – and some people may change their mind and decide to be vaccinated later down the line. So far 71% of over 80s are receiving the vaccine.
- Cohorts may get done in different orders depending on geography as the priority is speed of distribution. Southwark were ready before Bromley so will move onto new cohorts once top priority people are vaccinated.
- The second dose has been set aside for 12 weeks, and this will come before some cohorts are given their first jab.
- The Excel centre is run nationally and the criterion is living within a 40 minute travel time.
- There is not an open access list for vaccines left over. There is a list of NHS staff members who can come in at short notice so no vaccine is wasted.

- London has given out all the vaccines received.
- People who have received the vaccine will get a card and a sticker.

RESOLVED

Sam Hepplewhite undertook to respond to councillors regarding any community concerns generally and with more details on how GPs will be contacting vaccine candidates in particular.

Lateral Flow tests

Liz Brutus, Consultant in Public Health (Health Improvement), provided a presentation on Southwark Council's Lateral Flow Testing Rollout. The chair then invited questions:

- The Damilola Taylor Youth Centre is being used for testing. Members raised concerns about people having to travel long distances by bus and place themselves at more risk of Covid, in order to test and asked if there was a possibility of using local pharmacies as test locations, particularly as some local ones are keen. Liz Brutus said local pharmacies are being encouraged to provide 'expressions of interest' to deliver tests. One of the challenges of rolling out testing from local pharmacies are the financial issues of breaking even. However officers do want to open up testing across the borough.
- Officers have scoped out a space in Southwark Park, which is north of the borough. Once teething problems with Damilola Taylor Youth Centre have been ironed out they will likely make a decision shortly to proceed.
- Members asked why private company Trojan were appointed to deliver Lateral Flow tests, instead of council officers or NHS staff, and if a fair commissioning process was used? Officers said that they did consider redeploying council staff however the time scale were very short so instead an open tendering process was used to appoint Trojan.

6. NHS SOUTH EAST LONDON CLINICAL COMMISSIONING GROUP - INTEGRATION

David Cooper and Steve Lancashire from Keep Our NHS Public (KONP) provided a presentation with reference to the paper supplied. The chair then invited questions and the following points were made:

- Councillors on the Joint Health Overview and Scrutiny Committee (JHOSC) working across South East London (SEL) said that Southwark Council did

not support becoming a partner of the STPs (Sustainability and Transformation Plans) when they were first brought in by central government several years ago to work across the 6 local CCGs (Clinical Commissioning Groups) of South East London (Southwark, Lambeth, Lewisham, Bromley, Greenwich and Bexley). The situation has now moved on and the 6 CCGs are now merged into one and the Our Healthier South East London (OHSEL) programme established.

- KNOP representatives said that NHS structures are a central government political decision and somewhat out of control. The changes brought in by the Coalition Government under the Health and Social Care Act 2012 was referred to, and the subsequent increase in commissioning outside of the NHS. A member said that the changes brought in at that time included the move of Public Health to local authorities, which has generally been welcomed; furthermore councils have in many ways been commissioning services for longer. The various structural and legal changes to promote integration with social care were referred to, with KNOP emphasising the importance of good relationships to actually effect change and closer working.
- KONP said that the NHS is underfunded, with more money going to the private sector, and what recent investment there has been for Covid has been directed to the private sector, where they raised concerns about ineffective delivery and cronyism nationally.
- KONP and members concurred that local scrutiny does offer an opportunity to influence local NHS delivery, integration and community engagement, both through local borough scrutiny, and the JHOSC working across South East London to deliver OHSEL. These are good fora to register concerns about transparency, accountability, and democracy. KONP said that most of the governance done by the CCG is by clinical experts, who do have knowledge and skills, alongside bog accountancy firms like Mckinsey, with little understanding of the local population, and there is a gap in local democratic representation and limited community engagement. Covid has been given as a reason by the NHS for more limited community engagement however in KNOPs view this was limited even before the pandemic.
- A member agreed that local politicians ought to be involved in steering the work of the NHS, particularly given the health inequalities of the population of Southwark, and emphasised the importance of a diversity of local leadership. Other members and officers said that presently the clinical lead for the 6 CCGs is a longstanding Southwark local doctor, who trained locally, with a passion and expertise in health inequalities.
- Members said the OHSEL JHOSC was not meeting as regularly as it once did, which is a concern. When the JHOSC did last meet community engagement was raised by members as a key issue. There are local

discussions with Lambeth scrutiny colleagues and a meeting of the OHSEL JHOSC is planned soon.

- KNOP acknowledge the enormous challenge of conducting health scrutiny and said they were delighted to hear about Southwark scrutiny members connecting with Lambeth members .They suggested linking up with Lewisham and Greenwich and urged councillors to dig deeper as sometime the communication from NHS can be bland .They did however praise the Southwark NHS local responsiveness, particularly Sam Hepplewhite's recent work addressing pensioners' concerns over vaccines.
- Members said that the 6 borough CCG is now very big and there is a risk it becomes distant from local populations. There are however local level partnership arrangements between the NHS, council, and the voluntary sector, Partnership Southwark, which Sam Hepplewhite chairs. She was unable to attend for this item, and sent apologies, because of the pandemic and vaccine rollout pressures on the NHS but offered to attend for the March meeting.
- KNOP highlighted the recent government consultation on Integrated Care Systems (ICS), which are the direction of travel for the merged SEL 6 CCGs. Integrated Care Systems primary legislation is due soon and they recommended councillors keep an eye on this and the governance options that will be pursued locally as the definitions can be quite woolly.
- The good community engagement that took place at the Southwark and Lambeth Integrated Care (SLIC) was recommended by KNOP as a good model. The SLIC was set up in 2012 for four years and was a partnership of commissioners and providers, with citizens, working together to improve the value of care in Southwark and Lambeth to help local people live healthier and happier lives. The partnership comprised the local GP Federations, the three local NHS Foundation Hospital Trusts - Guy's and St Thomas's, South London & Maudsley and King's College - Southwark and Lambeth Clinical Commissioning Groups, Southwark and Lambeth local authorities and local people, supported by the Guy's and St Thomas' (GST) Charity.

RESOLVED

This item will be returned to at the 23 March meeting which Southwark CCG will attend.

7. INTERVIEW WITH THE CABINET MEMBER FOR SOCIAL SUPPORT & HOMELESSNESS

Cllr Helen Dennis, Cabinet Member for Social Support & Homelessness, was interviewed on her portfolio.

The following themes were covered:

- Care homes infection control,
- Expedited discharged from hospital,
- Communication from the Community Hub,
- Evictions and plans when the ban gets lifted,
- The budget and impact on:
 - Day centres provision
 - Care package review
 - More towards self contained housing from hostel
- Sanctuary Movement,
- Advice centres,
- No recourse to public funds.

8. WORK PROGRAMME

RESOLVED

Partnership Southwark /Southwark NHC CCG will be asked to update on local commissioning arrangements, decision making, engagement and democracy plus the wider context of Integrated Care Systems and the merger of the 6 CCGs at the March meeting.