

## **HEALTH AND SOCIAL CARE SCRUTINY COMMISSION**

MINUTES of the Health and Social Care Scrutiny Commission held on Monday 5 February 2024 at 7.00 pm at 160, Tooley Street, SE1 2QH

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**PRESENT:** Councillor Suzanne Abachor (Chair)  
Councillor Sam Dalton  
Councillor Esme Dobson  
Councillor Sandra Rhule

**OTHER MEMBERS  
PRESENT:**

**OFFICER  
SUPPORT:** Anna Berry, Independent Chair of the Southwark Safeguarding  
Adults Board (SSAB)  
Pauline O'Hare, Director of Adult Social Care  
Sarah Feasey, Deputy Head of Law  
Julie Timbrell, Project Manager, scrutiny

**1. APOLOGIES**

Appologies were recived from Councillor Maria Linforth-Hall and Councillor Nick Johnson .

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

**3. DISCLOSURE OF INTERESTS AND DISPENSATIONS**

**4. MINUTES**

The minutes of the meeting on 15 November 2023 were agreed as a correct record.

## **5. HEALTH SCRUTINY AND THE NEW RECONFIGURATION ARRANGEMENTS**

Sarah Feasey, Deputy Head of Law, gave a summary of the new reconfiguration arrangements with reference to a guide produced by the Centre for Governance and Scrutiny (CfGS), circulated with the agenda.

The chair then invited questions.

A member asked why the new Regulations have changed with regard to the former power that health scrutiny had to refer a matter to the Secretary of State for review. The Deputy Head of Law commented that one reason may be to enable ministers to instigate a review. She added that although health scrutiny has less of a role in triggering a review, it still has a role.

## **6. INTERVIEW WITH THE INDEPENDENT CHAIR OF THE SOUTHWARK SAFEGUARDING ADULTS BOARD (SSAB)**

The chair welcomed Anna Berry, Independent Chair of the Southwark Adult Safeguarding Board, and Pauline O'Hare, Director of Adult Social Care.

Independent Chair of the Southwark Adult Safeguarding Board presented the report and the chair then invited members to ask questions. The following points were made.

- In response to a question on the impact of the Covid pandemic on the workforce the Director of Adult Social Care said that all operational workers come into office. There is also a process for requests for flexible work, and this has been in existence from before the pandemic. There are vacancies within adult social care and a rolling programme of recruitment with a micro site. Covid did mean the council lost a cohort of older experienced staff who took early retirement because of underlying health conditions or caring responsibilities.
- A member asked about the Safeguarding stats, trends and meaning. The Independent Chair said that Southwark's are broadly reflective of national position. The board is looking for an enhanced data set from a wider range of partners. The Director of Adult Social Care added that the reduced number on concerns which may well be because of a new complex pathway so she is less concerned about this, they would

however expect more expect more referrals. A member requested a breakdown of categories of abuse and place.

- The Director of Social Care said that they are looking at innovation to the front door to older peoples' services. They have changed how the telephone system works to make it more digitally friendly and more regular phone calls. They are also looking at team locations. A Project Manager has been appointed today looking at bottle necks and good practice in other boroughs.
- Member asked about progress in replicating the Persons In a Position of Trust (PIPOT) work of children's in adult service. The Independent Safeguarding Chair said that for children's services there is a LADO - local authority designation officer. This person pulls together information around allegations. There is an emerging London PIPOT framework. This is a framework to manage allegations and how Safeguarding process intersect with HR disciplinary processes. It will help coordinate different processes, which is helpful. Currently it is a being looked at by a sub group of the board, with a view to adopting. One of the issues is the governance arrangement for holding the data. There are also training requirements. It is a good framework and no objections have been raised and as such the board is addressing the logistics. A couple of examples were given about when it could come into play:
  - a) Someone is accused of abusing their mother and works in care home of with people with Learning Difficulties
  - b) Someone has used social media to contact a client and overstepped a line with someone who is vulnerable
- Members asked if there are there protections against vexatious complaint. The board chair said not specifically but would help generate a proportionate response.
- Members asked how the lived experience can feed into training of social workers. The Director of Adult Social Care said often social workers will have older relations, or family or personal experience of Learning Difficulties and Mental Health. There is also an apprenticeship scheme for care leavers. She added that often people do front line work for experience. The Independent Chair added that there is a sub-group that is focused on learning, and referred to the Cuckoo package that pulls through the lived experience.

- There was a discussion on definition of abuse and that this includes neglect.

## **RESOLVED**

Members requested a breakdown of both the “concerns” and the “enquiries” in terms of:

- Who are the people being investigated around safeguarding issues – care homes / home care agencies / family members
- What types of abuse – financial / physical / emotional / neglect e.t.c

## **7. HOURGLASS**

The chair invited Kyra Gonzales, Community Response Officer and Independent Domestic Violence Advisor (IDVA) to provide a presentation.

Members were then invited to ask questions and the following points were made:

- The Community Response Officer said that often cases involve a diagnosis of dementia. Hourglass share information across professional disciplines and encourage looking at family relationships dynamics.
- A member asked if there are ever professional differences on if a matter is a safeguarding issue or a quality of care issue. The Community Response Officer said that there is often a fine line between quality of care and safeguarding. Sometimes people do not meet a threshold and there is not always a consensus on this.
- The differences can arise from differences in triage as well as insufficient understanding around Domestic Abuse and family members – including a lack of understanding of the nature of family abuse dynamics. However, she added, that professionals are keen to train and also to take a multi-agency approach.
- Members asked if the statistics accurately reflect where people live and experience abuse, given the much higher levels of abuse recorded in the home. The Community Response Officer said that referrals are often from friends

and family rather than individuals. It is therefore possible that there are less people to do this in care homes and hospitals. More support in institutions would help increase referrals.

- Community Response Officer was asked if there are situations where you encounter situations of abuse and insufficient action. She confirmed there were and gave an example of where a women whose carer was her son with mental health problems, however she was not considered vulnerable enough for intervention.
- A member asked what can be done to reduce abuse in care homes. The Community Response Officer recommended increasing training and increasing opportunities for open communication and professional curiosity. More multi agency working can facilitate this as care homes often feel closed off from the community.

## **8. SLAM DEMENTIA NURSE INTERVIEW**

The scrutiny project manager reported that an interview had been held and the notes would come to a future meeting.

## **9. SCRUTINY REVIEW: ACCESS TO LOOS - HEADLINE REPORT**

The chair invited the scrutiny Project Manager, Julie Timbrell, to present the headline report summarising the evidence received to date for the Access to Loos scrutiny review and the emerging recommendations.

Members made the following proposals for amendment:

- A member reported that Lewisham Council provide a hard copy map of toilets in the borough and requested that a recommendation include provision of a paper map; even if this is just council provision.
- Members recalled discussions on having one person leading at both cabinet and an officer level, with a discussion on this possibly being Cllr Evelyn Akoto (Public Health) or Cllr James McAsh (Environment) . It was noted that Public Health is often the most the apt brief and Cllr Evelyn Akoto and has taken a lead already, however both could work.
- There was a discussion about including more concrete examples of where anti-social behaviour had been mitigated

and good practice, and a suggestion that that Age UK London be contacted to provide this.

- A member referred to recent consultation around the change of use of the former GLA City Hall building. The number one concern raised during the consultation is the continued provision of toilets. The former City Hall houses a Changing Place toilet. There have been previous problems with anti-social behaviour and the venue has already taken steps to mitigate this , with further steps planed.
- Members referred to the toilet serving East Street market as a good example, as there is an attendant.
- A member requested poor provision of toilets is highlighted as an environmental health issue and how it negatively impacts on the health and wellbeing of the community. Members noted that homeless people are defecating and urinating in the streets and parks because there are no public toilets, and that parents are holding children over drains in the street because of poor provision.

## **RESOLVED**

The final report will reflect the above comments.

## **10. WORK PROGRAMME**

The work programme was noted.