

Health and Social Care Scrutiny Commission

MINUTES of the OPEN section of the Health and Social Care Scrutiny Commission held on Tuesday 10 November 2020 at 6.30 pm at Zoom

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

**OTHER MEMBERS
PRESENT:**

OFFICER Genette Laws, Director of Commissioning , Southwark Council
SUPPORT: Sam Hepplewhite , Director of Integrated Commissioning
Jin Lin, Acting Director of Public Health
Julie Timbrell, Scrutiny Project Manager

1. APOLOGIES

There were no apologies.

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

There were none.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

Councillor Sunny Lambe disclosed that his daughter works for London Ambulance Service and Councillor Bill Williams disclosed his partner is a director at Great Ormond Street Hospital.

4. UPDATE ON CARE HOMES AND IMPACT OF COVID 19

The item on Care homes focused on two issues:

- How Southwark can work together to protect and treat people in Care Homes with COVID 19,
- Enabling Care Home residents to stay in touch with friends, family and the outside world.

Genette Law, Southwark Councils' Director of Commissioning, presented the briefing on how council social care officers and NHS Southwark are protecting residents from infection and treating Covid 19, and working with homes to enable residents to stay in touch with friends and family.

Genette Laws, Jin Lim, Acting Director of Public Health and Sam Hepplewhite, Director of Integrated Commissioning NHS Southwark, took questions.

The following points were made:

- Visitation to residents to care homes by friends and family is usually for compassionate reasons - either for end of life care or where residents are unable to stay in touch using technology.
- There have been further deaths from Covid in Care Homes over and above the 60 previously advised in July; however the situation is much more under control with only occasional outbreaks in homes, or a single resident testing positive. Care Home cases tend to be asymptomatic cases picked up by routine testing. Information on Covid mortality and survival rates will be supplied.
- Vaccination of care home residents and staff will be a priority, delivered by the commissioned GP services. There will be 'max' vaccination sites, being prepared in advance, and local sites.
- Most care homes have a stable supply of PPE. There is a portal as a backstop - which is working well. The council are also keeping a mutual aid supply as another back up.

RESOLVED

Officers will provide

- A briefing on the vaccine programme

- An update on recent Care Home resident deaths from Covid , and total survival numbers.

Christen San Pedro, Area Director for Care Home provider HC One, provided an update on how Tower Bridge Care Home has dealt with the pandemic.

The Area Manager started by explaining that from day one of the first admission of person who was positive from Guys and St Thomas Trust the Care Home has been provided with excellent daily support via a WhatsApp group from Social Care and NHS colleagues. One unit was impacted by Covid, however this was contained. Loneliness was a problem. Staff are equipped with tablets to help keep residents in touch with the outside world. Tower Bridge has been very stable recently.

The following points were raised in the subsequent discussion:

- Family visits to residents with dementia have been important.
- Tests are now available if a resident is symptomatic and to screen for asymptomatic cases. The home is able to get medical advice on the best treatments plan, given frailty. Some residents will go to hospital, but the home can also provide fluids and antibiotics in the home.
- Staff were initially quite scared. The weekly testing of staff (a pilot) was a relief as this provided reassurance that they were not going to bring the virus home to loved ones. There were some issues with staff cover, however HC One do have a large staff team which Tower Bridge can draw from, including a critical staffing grid . HC One have redeployed people from wellbeing work to on care.
- Agency staff were not used. The Director of Commissioning advised this is best practice to avoid infection risk. The council staff tracker indicated that additional people are being recruited in supporting roles.
- The increased workload has impact on staff most; however there is a flexible force and HC One did look after the staff team to allow enough rest.
- Tower Bridge has an activity programme and a garden to keep people active. There is music, specific one to one sessions, as well as a small group with social distanced activities. The units are contained to reduce the spread of infection. There are tablets to communicate with family and friends. It is also about the relationships with staff, which are good. There are a lot of calls going on in the home.

Ross Diamond CEO Lewisham and Southwark Age UK and the lead agency for the Lay Inspectors was invited to input into the theme of keeping in touch with

friends and family. The CEO endorsed the importance of contact; charity can provide support to family members who need help. There is a whole range of activities that the voluntary sector is keen to get going now online. Activities such as cycling trips for care home residents are in pipeline, being delivered by Blackfriars. The Age UK portal 'my social' is a resource. He updated the commission on the Lay Inspector service by announcing that the new coordinator will be Andy Loxton, a former employee of Southwark.

Rebecca Swift, Entelechy Arts presented on how they have kept residents in Tower Bridge in touch with the outside world and continued the community arts work going throughout the pandemic .The slide show is attached. The following films were shown:

<https://vimeo.com/399232312>

<https://vimeo.com/458965404>

<https://vimeo.com/421139476>

The Commission and chair warmly welcomed the presentation and thanked Rebecca Swift and the other speakers for attending.

5. COVID 19 INFECTION RATES AND NHS CAPACITY

Jin Lin, Acting Director of Public Health, gave an outline what the Council is doing on in relation to outbreak prevention control, and then answered questions with Sam Hepplewhite, Director of Integrated Commissioning, and Southwark NHS CCG.

The following points were the made:

- The Peckham Covid testing centre is a walk up centre, with booking online preferred. There is some local parking. Burgess Park is designed as drive through. Both are centrally located as the north is very dense and no suitable location could be found, whereas the south is difficult to travel to. Home testing kits are available. Additional sites are being investigated for vaccination
- Figures for infection are going down, and were starting to go down prior to lockdown, possibly because of media messaging about rising numbers and London moving to Tier 2. It is hoped numbers will go down further by Christmas.
- The current PCR testing is for symptomatic cases; Lateral flow tests could be useful for asymptotic testing.

- There are currently 123 people in ITU, with a 1/4 with Covid, in South East London. ITU use has gone up by 11%, with no massive increase in ITU presentation. There are 128 beds available.
- Capacity has been increased, and the Nightingale in reserve. There is also scope to flex the ICU.
- There are no current alterations to provision of elective and cancer care.
- 111 activity is stable.
- A and E presentation is back to normal.
- The local NHS is seeing an increase in mental health presentation. This includes underlying anxiety and unhappy people in primary care and arriving at secondary care in urgent need. There is an increase in people never seen before without treatments plans.

6. UPDATE ON THE PROPOSED MERGER BETWEEN ROYAL BROMPTON & HAREFIELD NHS FOUNDATION TRUST AND GUY'S AND ST THOMAS' NHS FOUNDATION TRUST.

Jackie Parrott (Chief Strategy Officer for GSTT and KCH) and Robert Craig (Director of Development and Partnerships, RBHT) attended the meeting. The chair invited answered questions on the changes outlined in the paper circulated in advance.

- A member said a previous merger of King's Collage Hospital (KCH) and the Princess Royal University Hospital (PRUH) had a knock on financial impact, and asked if there was a similar risk with this merger? The NHS officers said that GSTT and RBHT are two strong organisations in a good financial position choosing to come together , whereas the merger of KCH and PRUH came about after the TSA breakup of a previous Trust, with one struggling hospital being rescued by the other .
- What are the benefits for Southwark? The two organisations are pursuing a merger, which is a strategic realignment. Service changes may flow from this which could realise benefits over the longer term, subject to consultation.
- What will be the impact on staff? There is a TUPE process for staff - and no plans to make redundancy, other than very senior posts. The merged

organisations will need the same number of people. By coming together the respective organisations think that positions that are harder to fill will be easier to recruit to.

- Will cancer provision at Guy's be moved or other services change made? Service changes will not arise out of this merger. There are no plans to change cancer services at Guy's, or other plans for moving services in the immediate term; the new organisation will need to deliver at the sites for some years. There is a need to create more facilities at the Evelina Hospital, if the consultation on potential service changes were to result in this; however this is a separate process to the merger.
- Would you consider selling some of the sites? Certainly the services at Harefield would continue, however we are thoughtful about older estates. Presently there is no room at St Thomas.
- Has an equalities or community impact been done? As there are no services changes this is not required. The merger is a legal transaction and administrative change, rather than a service change. Any service changes down the line would be subject to equality impacts and community consultation; however the NHS would lead on that.

7. HEALTH INEQUALITIES

The letter sent to the cabinet lead summarising the work of that the previous Health & Social Care scrutiny commission undertook on the Mental Health of Children and Young People (CYP), which particularly looked at the cross cutting issue of the disproportionate mental ill health amongst Black And Minority Ethnic (BAME) CYP, was noted.

The report by Baroness Doreen Lawrence on: AN AVOIDABLE CRISIS, The disproportionate impact of Covid-19 on Black, Asian and minority ethnic communities was noted

RESOLVED

A review will be continued addressing the causes of health inequalities amongst BAME CYP. This will include the issue of Domestic Abuse and mental health.

8. WORK PROGRAMME

RESOLVED

- Southwark NHS CCG will be invited to the next meeting to discuss progress of the merger across 6 South East London CCGs to better understand the balance of decision making and the local engagement and decision making processes for Southwark services.
- Keep Our NHS Public will be invited to attend and outline research and key issues on the CCG.
- Interview Cllr Helen Dennis Cabinet Member for Social Support & Homelessness
- Request a report on Vaping and possible dangers from Public Health.