

**MINUTES OF A MEETING OF THE
HEALTH OVERVIEW & SCRUTINY SUB-COMMITTEE
Havering Town Hall
17 July 2019 (7.00 - 8.47 pm)**

Present:

Councillors Nisha Patel (Chairman), Jan Sargent, Ciaran White (Vice-Chair), Darren Wise and Christine Vickery

Apologies for absence were received from Councillor Nic Dodin.

Councillor Paul McGeary was also present.

Also present:

Natasha Dafesh, BHRUT Communications

Lima Khanom, NEL CCGs

Mark Ansell, Director of Public Health

Claire Alp, Senior Public Health Specialist

Lucy Goodfellow, Policy and Performance Business Partner

Sarah See, BHR CCGs

Emily Payne, Head of Primary Care, BHR CCGs

1 ANNOUNCEMENTS

The Chairman gave details of the arrangements in case of fire or other event that may require evacuation of the meeting room or building.

2 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

Apologies were received from Councillor Nic Dodin.

3 DISCLOSURES OF INTEREST

There were no disclosures of interest.

4 MINUTES

The minutes of the meeting of the Sub-Committee held on 19 February 2019 were agreed as a correct record and signed by the Chairman.

5 HAVERING CLINICAL COMMISSIONING GROUP UPDATE

Representatives of Havering Clinical Commissioning Group (CCG) agreed that recruiting and retaining sufficient GPs remained a challenge although this was also an issue nationally. Efforts were being made to attract GPs at the start of their careers as well as support those in mid-career who may be suffering from stress etc. It was accepted that there were also a lot of Havering GPs approaching the end of their careers.

There were currently 42 GP Practices in Havering following the closure of a Practice in Collier Row by the Care Quality Commission. There were not any 'inadequate' rated Practices in Havering although five had been rated as 'requires improvement'. The CCG supported struggling GPs with resilience money and mentoring for GPs and practice managers. Work was also under way with the GP Federation to develop peer support for GPs. There were currently approximately nine singled-handed GPs in Havering.

There were now fewer GPs who worked full-time and the CCG had worked with partners including BHRUT, NELFT and Health Education England to attract newly qualified GPs to Havering. These GPs were funded by the CCG to work on a weekly basis in special interest areas such as mental health or minor surgery. This scheme had retained 17 newly qualified GPs within Havering, Barking & Dagenham and Redbridge although GPs retiring or otherwise leaving the profession remained an issue.

Senior GP nurses had also been funded by the CCGs in each of the local boroughs. It was accepted however that workforce issues remained the CCG's biggest risk area. It was also accepted that more communications should be released around the development of new roles such as a Physician's Assistant.

The Sub-Committee noted the update from Havering Clinical Commissioning Group.

6 HAVERING OBESITY PREVENTION STRATEGY

The prevalence of obesity among reception age children in Havering was worse than the averages for London and England. The position was also similar for levels of adult obesity in Havering.

There were a number of influences on obesity including society, food production and levels of food consumption. The Havering Local Implementation Plan included the Council's approach to its overall transport strategy. This incorporated the Healthy Streets approach and officers wished to ensure that existing journeys were more active. This included the proposals for routes for pedestrians and cyclists along the Beam Parkway in Rainham.

The Council was also involved with the Healthy Early Years London Programme which established a framework for supporting and improving

the health of early years children. Awards had been established for early years providers in Havering in order to encourage the promotion of a healthy lifestyle for children in Havering.

The Breast Feeding Welcome scheme was open to all businesses with at least a 3 star hygiene rating. This was a voluntary scheme that was advertised on a number of platforms including the Havering Show. A map of breast feeding sites was available on the Council website.

Other initiatives included the water refill scheme which had been trialled in Havering during Recycle Week in September 2018. This reduced levels of plastic waste and encouraged the drinking of water rather than fizzy drinks. The Childhood Obesity Trailblazer Programme was focussed on Rainham Village and sought to address barriers to healthy eating and physical activity. This work had found that food takeaways were reluctant to offer alternative choices of food and work in the Trailblazer had focussed on ways to leverage demand for local options for healthy food. A number of positive relationships had been built up with traders in the Rainham area. Whilst funding had not been received for a continuation of the scheme, the Council had learnt a lot and identified other potential partners.

As regards planning policy, both the London and Local Plans sought to restrict the opening of new fast food outlets, including in the vicinity of schools. Officers also wished to work with existing takeaways etc in order to establish a Healthy Catering Commitment.

Partners in the Obesity Prevention Group worked with schools in order to encourage healthy eating among pupils. The school nursing service also now offered parenting sessions which covered healthy eating. It was accepted however that it was difficult to shift behaviour towards healthy eating.

Plans for the coming year included restricting the advertising of unhealthy food and drink on Council-owned hoardings. Health and wellbeing implications were also being incorporated into the template for key decisions and portions of vegetables would be served with all school meals.

The Henry programme was aimed at families with children aged 0-5 and aimed to develop parenting skills to encourage healthy eating and physical activity. This was a programme that had already worked successfully in the Leeds area.

The Havering obesity strategy and action plan was due to be revised this year and consultation was about to start on the new Health and Wellbeing Strategy. It was suggested that this latter item could be brought for scrutiny to the next meeting of the Sub-Committee. A representative of BHRUT added that the Hospitals' Trust was in full support of the strategy.

The Sub-Committee agreed that an update on the consultation on the new Health and Wellbeing Strategy should be taken if possible at the next meeting of the Sub-Committee.

7 QUARTER 4 2018/19 PERFORMANCE INFORMATION

There had been a very slight improvement in levels of obesity among children aged 4-5 years, compared to the previous year. There had been little change in levels of patient satisfaction with GP out of hours services. It was noted that the out of hours service provided at Queen's and King George Hospitals had received a 'good' rating from the Care Quality Commission. Delayed transfers of care had seen a slight improvement in the final quarter of the year and indications were that this had continued in April and May 2019.

BHRUT and adult social care officers reviewed length of hospital stay issues on a weekly basis and the introduction of a Trusted Assessor role at 20 Havering care homes had helped to lower average length of hospital stay by 2 days. A recent 'perfect week' initiative had seen adult social care staff work with the hospital to remove all blockages to patient discharge, where appropriate.

As regards future indicators for scrutiny, the 2019/20 Corporate Plan was due to be considered by the Overview and Scrutiny Board and would contain a number of areas for possible scrutiny by the Sub-Committee. These included the proportion of physically inactive adults, delayed transfers of care, the air quality action plan and the use of assistive technology.

Members felt it would be useful to look at issues related to physical activity such as leisure centre use and affordability as well as exercise levels. Perhaps the Council's 'Walking to Health' scheme could also be scrutinised. It was agreed that the Council's Health & Wellbeing Manager should be invited to the next meeting of the Sub-Committee to discuss the Council's leisure centres offer and suggest measures to monitor. It was suggested that future performance information reports should include numbers of referrals from GPs to leisure centres.

Other indicators that the Sub-Committee wished to scrutinise included those relating to the CAMHS transformation programme.

8 NOMINATIONS TO JOINT HEALTH OVERVIEW AND SCRUTINY SUB-COMMITTEE

A report asked the Sub-Committee to confirm its nominations to the Outer North East London Joint Health Overview and Scrutiny Committee and to any pan-London Health Scrutiny Committee that may be established during the current municipal year.

The report was agreed unanimously and it was **RESOLVED** that:

1. **In line with political proportionality rules, the Sub-Committee nominate Councillors Nisha Patel, Nic Dodin and Ciaran White as its representatives on the Outer North East London Joint Health Overview and Scrutiny Committee for the 2019-20 municipal year.**
2. **That the Sub-Committee nominate Councillor Nisha Patel as its representative at any meetings of the pan-London Joint Health Overview and Scrutiny Committee during the 2019-20 municipal year.**

9 **WORK PROGRAMME**

In addition to the suggestions outlined elsewhere in the minutes, the Sub-Committee agreed to seek to arrange a daytime visit to Queen's Hospital and a visit to King George Hospital (to both general wards and the A & E department).

It was also suggested the Sub-Committee seek to visit cancer facilities including Sunflowers Suite at Queen's Hospital, the radiotherapy areas and the Cedar Centre at King George Hospital.

It was further suggested that visits be made to view local mental health facilities and this could be discussed by Members in further detail after the meeting.

Chairman