

**MINUTES OF A MEETING OF THE
PEOPLE OVERVIEW & SCRUTINY SUB COMMITTEE
Council Chamber - Town Hall
21 December 2022 (7.00 - 8.10 pm)**

Present:

COUNCILLORS

Conservative Group Ray Best, Jason Frost (Chairman) and David Taylor

**Havering Residents’
Group** Laurance Garrard, Bryan Vincent and Julie Wilkes

Labour Group Frankie Walker (Vice-Chair)

All decisions were taken with no votes against.

The Chairman reminded Members of the action to be taken in an emergency.

13 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

Apologies were received from Councillors Ray Best, Linda Hawthorn, Jacqueline McArdle and Darren Wise.

Apologies were also received from Ian Rusha, co-opted Member, National Union of Teachers.

Councillors Hawthorn and McArdle were in attendance via videoconference.

14 DISCLOSURE OF INTERESTS

There were no disclosures of interest.

15 MINUTES

The minutes of the meeting held on 21 September 2022 were agreed as a correct record and signed by the Chairman.

16 HEALTH ISSUES UPDATE AND WORKFORCE UPDATES

Targets for staffing in primary care included meeting the London targets for GPs and Practice Nurse numbers by 2025. Career pathways had been established with the aim of attracting more nurses.

The Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT) continued to be in special measures and one way officers were seeking to address this was by reducing reliance on the use of temporary staff. More permanent staff were now employed but the Trust's vacancy rate currently stood at 14%. The highest amount of agency staff were used for roles such as consultants, nurses and midwives.

It was accepted that there was high staff turnover at BHRUT but this was an issue throughout the NHS where there was lot of competition in recruitment. Some 400-500 international nurses had been recruited but the Trust did not want to over-recruit from this sector. There remained recruitment shortages in areas such as medicine and midwifery. Many Trust staff were struggling with the cost of living and this was of course connected to the recent industrial action in the NHS.

Measures to improve recruitment and retention included increasing bank rates for staff working extra shifts, and cost of living measures such as school uniform exchanges and a toy bank. Same day pay had also been introduced. The introduction of the BHR Academy had improved the retention of staff and the Trust wished to develop more career development pathways.

It was emphasised that the Trust had a zero tolerance on poor behaviour of staff and wished to improve its organisational culture. The introduction of an internal Facebook system allowed regular staff communication and efforts were in progress to increase the diversity of senior roles. It was confirmed that Trust staff did receive Outer London weighting in their salaries. There was a high proportion of local staff at BHRUT.

The collaboration with Barts Health had helped to achieve savings, including in the reduction in bank or agency staff spend. The use of joint appointments with Barts could help with the recruitment of consultants. It was also hoped to offer a combined occupational health service with Barts which would help with attracting staff. The Integrated Care Board could assist with attracting occupational health staff themselves.

The BHR Academy had been established to offer solutions to workforce planning and transformation at BHRUT. The Academy had been established in September 2021 and a demonstration of the systems it used could be circulated. The main issue identified by the Academy had been the loss of staff to Inner London Trusts due to the higher salaries on offer. Trust staff were also working more hours to cope with cost of living issues but this could lead to a risk of burnout among staff.

Officers were keen for the BHR Academy to collaborate with Councils and avoid duplication of work with Local Authority Social Care Academies.

The Sub-Committee NOTED the position.

17 **ST GEORGE'S HEALTH AND WELLBEING HUB**

The new St George's Health and Wellbeing Hub would be 4,500 square metres in size over three floors. The hub would house a wide range of services and form a one stop shop for patients. The site would incorporate landscaped gardens including a memory walk as well as space for two mobile scanner units. This would allow around 13,000 additional scans to take place per year.

The business case for the new facility had been approved by local partners and had passed a Government Gateway 3 Review in November 2022. Capital costs were fully funded and revenue costs had been agreed from North East London growth. Demolition of all old buildings was now complete and it was hoped to start piling on site by January 2023. The site was planned to open to the public in spring 2024.

It was hoped to deliver at the hub the first integrated service operating model in England and there would be a varied range of outpatient services available on site. Work was in progress to create a digital solution which would allow all NHS provider systems in the hub to communicate with each other.

The integrated operating model was likely to attract staff and it was wished to develop staff with the BHR Academy. Construction of the site was being led by NELFT and it was hoped the design of the hub would reflect feedback from patients. Patients would be treated at the hub from across Havering but other services at the site would be focussed more on the local area. Social care was also very much involved in the project and there would be many services for young people available at the site.

It was clarified that there would not be any beds on site but the hub would be open 8 am – 8 pm, seven days per week. Blood testing would be moved to the hub from the current site in Elm Park and the phlebotomy service would also be expanded.

Officers confirmed that the Rosewood Clinic would close as the building was at the end of its useful life. This would not be until after the St George's hub opened. All services offered by the Rosewood Clinic would be provided at St George's. Clinic staff would be transferred to the St George's hub.

There was a contingency of £500k on the cost of construction as well as a further £800k as a backstop. Contractors had ordered materials in advance in order to protect against price increases. If successful, it was hoped to roll out the St George's model to other areas. Building work was due to be completed by May 2024 Services would begin moving in towards the end of May but officers were keen to ensure all services were fully on site to allow an integrated service for patients.

18 **SPECIAL EDUCATIONAL NEEDS AND DISABILITIES THERAPY**

Officers confirmed that children with special educational needs and disabilities (SEND) in Havering were increasing in both numbers and levels of acuity. Therapies available included speech and language, physiotherapy and occupational therapy. Clinical officers were responsible for oversight of a child's education, health and care plan from the health point of view. The service did also however have problems with the recruitment and retention of clinical staff.

Multi-agency work was in progress to get a clear understanding of what boroughs wished to do around SEND provision, Special Schools etc. Work was also underway across North East London to address issues via new ways of working.

It was accepted that Education, Health and Care Plans should define the types and levels of therapies given. The model of local delivery did however need to be defined and agreed. It was also hoped to develop a set of goals for the service that partners were happy with.

It was unclear why the number of pupils with special needs in Havering had risen from 2017 to 2020 but officers could provide further details on this.

It was agreed that an update on progress with SEND work in Havering should be added to the work programme for a future meeting of the Sub-Committee.

Chairman