

**MINUTES OF A MEETING OF THE  
HEALTH OVERVIEW & SCRUTINY SUB-COMMITTEE  
Havering Town Hall  
22 September 2021 (7.00 - 8.36 pm)**

**Present:**

Councillors Nisha Patel (Chairman), Ciaran White (Vice-Chair) and David Durant

**11 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS**

Apologies for absence were received from Councillors Philippa Crowder and Nic Dodin.

**12 DISCLOSURE OF INTERESTS**

There were no disclosures of interest.

**13 MINUTES**

The Chairman advised Councillor Durant that issues related to the numbers of cycles used by PCR Covid-19 tests were not within the remit of the Sub-Committee.

The minutes of the meeting of the Sub-Committee held on 14 July 2021 were agreed as a correct record and signed by the Chairman.

**14 2021/22 PERFORMANCE INFORMATION**

Following discussion, the Sub-Committee agreed that indicators on BHRUT Constitutional Standards (four-hour emergency access performance etc) and numbers of referrals to the Primary Mental Health Team for either brief intervention or school counselling should be taken forward as indicators for scrutiny for the remainder of the municipal year.

Officers also agreed to investigate what indicators of BHRUT capacity and how this had been affected by social distancing requirements were available for scrutiny.

## 15 **ACCESS TO GP SERVICES**

It was confirmed that no GP Practices in Havering had closed during the pandemic. Face to face appointments were available but in lower numbers than before the pandemic. GP appointment capacity in Havering had risen 23% compared to 2019 but demand for GP services remained very high. Around 50% of GP appointments in Havering were now face to face with the remainder by phone.

Officers reported that there had been reports in recent days of patients abusing Practice staff and the Clinical Commissioning Group (CCG) adopted a zero tolerance approach to such incidents. E-consultations were also increasing in popularity. Some GP appointments were also booked via NHS 111 where the call handler thought this was appropriate.

It was confirmed that all Practices had Patient Participation Groups and the CCG had kept in touch with these groups during the pandemic period. It was also planned to create a new structure for patient engagement and close working was being carried out with Healthwatch Havering.

As regards GP recruitment, work was in progress to try to attract GP registrars to Havering. Work was also being undertaken with BHRUT, NELFT and Health Education England to attract GPs to pursue their specialities in Havering.

It was also necessary to manage people's expectations about wanting to see their GP. Treatment could often be effectively given by GP nurses or other professionals such as pharmacists, thus freeing GP time to deal with more serious cases.

The Director of Public Health clarified that the number of deaths from Covid-19 had reduced greatly due to the vaccination programme. Only around 1.5% of such deaths were of people who had been double jabbed. It was wished to ensure the maximum number of people had received both vaccinations and the booster programme would be starting in the next week. Whilst the average age of Covid-related deaths was around 82 years, life expectancy would normally be 6-8 years beyond this. A Member felt that the reporting of death rates etc was unnecessarily alarmist.

The Sub-Committee noted the report.

## 16 **HEATHWACH HAVERING - REVIEW OF PATIENTS' ACCESS TO HAVERING GP PRACTICES**

A director of Healthwatch Havering thanked the NHS officers present at the meeting for their responses on the issue of GP access.

Healthwatch recognised the efforts undertaken by GP surgeries during the pandemic and also felt that a lot of people did not understand the health

system. Healthwatch research had found that there was a lack of information on many GP websites and felt such websites could have been used more during the pandemic.

Other findings had been that it took a long time to get through to GPs and that appointments could only be booked a long time ahead. There also continued to be a lack of face to face appointments.

Healthwatch had surveyed all Havering GP practices as well as undertaking an online patient survey and case studies. One third of Havering GP practices had answered calls within 5 minutes. A substantial minority had however needed 2 or more calls to get through with 1 practice only answering a third call after 1 hour and 35 minutes.

The attitudes of most GP receptionists were described as business like or friendly. Many staff did however display a lack of knowledge about the Patient Participation Group at their Practice. Only 8 of the 45 GP Practices in Havering were able to give contact details of the Chair of the Patient Participation Group which Healthwatch considered to be a very poor number.

18 of the 45 Practices had face to face consultations available after a pre-triage by phone. Four Practices on the other hand were not offering any face to face consultations. The issue of digital exclusion was also important as Healthwatch felt that not all patients were able to use IT sufficiently to assist the doctor to address their needs.

Healthwatch were not in a position to comment on whether any alarmism over Covid-19 had led to the under-delivery of other types of healthcare. No case studies in the report were related to Covid-19.

The Healthwatch director agreed that GP phone systems needed an overhaul and that the GP profession needed to look at alternatives to making appointments by phone. CCG officers responded that they were not aware of any Havering GP practices not offering any face to face appointments at all. It was necessary to manage patient expectations on how best to contact a GP and some GP appointments could wait 3-4 weeks if the condition was not serious.

It was agreed that the impact on A & E if people could not get to see their GP could be added as an agenda item at the next meeting of the Sub-Committee.

## **17 HEALTHWATCH - VOICES OF DISABLED RESIDENTS AND COVID-19**

Healthwatch Havering had been commissioned by the North East London CCGs to undertake research on the impact of Covid-19 on disabled people.

Disabled people were, in some cases, more likely to be digitally excluded and Healthwatch had found that two thirds of disabled people reported a negative experience of health or social care. Figures were similar for hospitals and GPs although more positive experiences overall were reported with district nurses.

The most negative experiences were reported by people under 18 years of age and those with a hearing impairment. Healthwatch would be doing further research on the experiences of these groups and would produce a further report in Spring 2022.

The data within the report did not encompass the issue of mask wearing.

## **18 HEALTHWATCH HAVERING ANNUAL REPORT 2020-21**

Healthwatch volunteers had remained involved with the organisation throughout the pandemic period with weekly Zoom meetings being held with volunteers. The Healthwatch Friends network was launched in October 2019 which was used to forward Covid information etc.

A concern highlighted by the report was that there were now no dental practices in Havering taking new NHS patients. This had been raised with NHS England and Healthwatch England. The main concerns reported to NHS England were around dentistry and GP services. The Government was aware of issues around dental services and it was possible that dentistry could come back under the control of local CCGs.

Healthwatch Havering had an income of £118k, mainly from a Council grant, and expenditure for the year almost exactly matched this figure. Priorities for the coming year were to develop Patient Participation Groups, work with nursing and care homes and to support community and voluntary initiatives.

Healthwatch was happy to receive new volunteers but was unable to offer employment experience. Healthwatch was aware of support given by both the Sub-Committee and the CCG and was keen for the Sub-Committee to pursue issues raised by Healthwatch.

## **19 DATE OF NEXT MEETING**

The next meeting of the Sub-Committee would be held on Thursday 11 November at 7.00 pm.

---

---

**Chairman**

This page is intentionally left blank