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MINUTES OF A MEETING OF THE JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE London Borough of Barking & Dagenham 19 October 2023 (4.00 - 6.05 pm)

Present:

COUNCILLORS

London Borough of Havering	Patricia Brown and Christine Smith
London Borough of Redbridge	Bert Jones, Daniel Morgon-Thomas (Substitute for Beverley Brewer)
London Borough of Waltham Forest	Richard Sweden
Epping Forest District	Kaz Rizvi

Councillor

7 CHAIRMAN'S ANNOUNCEMENTS

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

8 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS (IF ANY) - RECEIVE.

Apologies were received from Councillors Julie Wilkes (LB Havering), Beverley Brewer (LB Redbridge), and Sunny Brar (LB Redbridge). Apologies were also received from Ian Buckmaster (Healthwatch Havering).

9 **DISCLOSURE OF INTERESTS**

There were no disclosures of interests.

10 MINUTES OF PREVIOUS MEETING

The minutes of the previous meeting were agreed as a correct record and signed by the Chairman.

11 TACKLING CANCER AT BHRUT

The Committee was presented with a report on Tackling Cancer at Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT).

It was explained to Members that progress had been made within BHRUT with regards to cancer targets. It was noted that there was a correction in

the report to more than 700 referrals per week. The progress within the Cancer Service was evidenced by the number of patients waiting for urgent, 2 week appointments having been reduced from over 900 to 0 in 3 months. Members also noted the community diagnostics centre in Barking Community Hospital was due to be operational in early 2024.

In response to questions from Members, it was explained that the demographic for bowel cancer screening was being increased from 60-76 years to 50-76 years by 2025.

The Committee did not make any recommendations and noted the report.

12 HEALTH UPDATE

The Committee was presented with a health update from various NHS services.

Officers from NHS North East London explained to members that the Health & Wellbeing hub at St. George's had been finished. The Freedom for Staff to Speak Up (FTSU) campaign was explained to Members in the aftermath of the high profile Lucy Letby criminal case with all Trusts ensuring they would stop up the activity surrounding FTSU. It was explained to Members that the financial position was challenged but the deficit was in-line with other London and National Integrated Care Boards (ICBs).

Following on, officers from BHRUT gave updates on various issues such as type 1 performance of Urgent & Emergency Care which was over the national target by 20%. It was described to Members that the trust was no longer the lowest performer for seriously ill patients. The financial position was then explained to Members, who noted a deficit of £15.9million year to date but cutting the deficit would not affect the quality or safety of the services. It was noted that the recent strikes had cost the trust £5.9million. The Trust was however looking to upskill staff with a new digital system with all improvements moving the Trust from the bottom 20% of performers to the middle 60%.

North East London NHS Foundation Trust (NELFT) presented Members with their updates. It was explained to members that NELFT had been charged with corporate manslaughter and was currently in a legal process but the Trust was keeping any impacts under review. It was then explained to the Committee that the national Right Care Right Person programme was due to go live in the following weeks after the meeting.

The Committee made no recommendations and noted the reports from the various services.

13 SYSTEM RECOVERY AND RESILIENCE

The Committee were presented with a report on system recovery and resilience.

Officers explained that the winter planning process had started in the previous March with a system strategic coordination centre delivered by the ICB in December 2023.

The Committee made no recommendations and noted the report.

14 DELIVERY PLAN FOR RECOVERING ACCESS TO PRIMARY CARE

The Committee was presented with a report on the delivery plan for recovering access to primary care.

Members were pleased to note that care patients received a good quality service with an increase in GPs but the experience within primary care settings and the availability of appointments has decreased. Members noted the need to retain and continue to increase the number of GPs.

The Committee made no recommendations and noted the report.

Chairman

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