

London Borough of Islington
Health and Care Scrutiny Committee - Monday, 16 May 2016

Minutes of the meeting of the Health and Care Scrutiny Committee held at on Monday, 16 May 2016 at 7.30 pm.

Present: **Councillors:** Klute (Chair), Chowdhury (Vice-Chair), Heather, Safi Ngogo, Turan, Ismail, Nicholls and O'Halloran

Also Present: **Councillors** Janet Burgess

Co-opted Member Bob Dowd, Islington Healthwatch

Councillor Martin Klute in the Chair

210 INTRODUCTIONS (ITEM NO. 1)

The Chair welcomed those present to the meeting

211 APOLOGIES FOR ABSENCE (ITEM NO. 2)

None

212 DECLARATION OF SUBSTITUTE MEMBERS (ITEM NO. 3)

None

213 DECLARATIONS OF INTEREST (ITEM NO. 4)

None

214 ORDER OF BUSINESS (ITEM NO. 5)

The Chair stated that the order of business would be as per the agenda

215 CONFIRMATION OF MINUTES OF THE PREVIOUS MEETING (ITEM NO. 6)

RESOLVED:

That the minutes of the meeting of the Committee held on 11 April 2016 be confirmed as a correct record and the Chair be authorised to sign them

216 PUBLIC QUESTIONS (ITEM NO. 7)

The Chair outlined the procedure for Public questions and filming and recording of meetings

217 MEMBERSHIP, TERMS OF REFERENCE ETC. (ITEM NO. 8)

RESOLVED:

That the report be noted

218 CHAIR'S REPORT (ITEM NO. 9)

The Chair stated that the JOHSC were awaiting a report on the Lower Urinary Tract clinic at the Whittington Hospital and that he would keep the Committee updated on developments.

The Chair added that he had learnt that it is intended to disband the shadow Board of Governors at the Whittington Hospital and that he would be contacting the Chair of Governors at the Whittington as to the proposals for alternative arrangements

The Chair informed the Committee that he had visited the Margaret Pyke Centre and that he made the point, which seemed to be accepted, that the same level of service should be re-provided at the new facility

219 **HEALTH AND WELLBEING BOARD UPDATE - VERBAL (ITEM NO. 10)**

Councillor Janet Burgess, Executive Member Health and Wellbeing, was present and the following main points were made –

- The Health and Wellbeing Board were looking at possible devolution and were working with the CCG, Islington Health and the NHS Trusts and working with L.B.Haringey in view of the links with Whittington Hospital
- One of Islington's carers was the winner of the London Regional Heat in November which was very pleasing
- Alistair Burt M.P. made a visit to St.Pancras hospital and said he was extremely impressed with the care provided
- Councillor Burgess stated that she had visited the Learning Disability team in Drayton Park and had learnt that there is a disturbing rise in the number of learning disability residents and in particular there had been a rise in the number of autistic children presenting. This would have a huge impact on children's and adult social services in the future
- Councillor Burgess added that she had had a meeting with the Healthy Schools officers about secondary schools and more work is now being carried out in primary schools to build up resilience

The Chair thanked Councillor Burgess for her update

220 **ISLINGTON CCG ANNUAL REPORT (ITEM NO. 11)**

Dr.Jo Sauvage and Alison Blair, Islington CCG were present for discussion of this item.

During discussion of the report the following main points were made –

- There will be an integrated care record that can allow health and social care to share records however an explicit consent will need to be given by a patient to share certain information. Work is taking place to ensure that key elements of information are available at the point of care
- Services should be provided in the most integrated way possible and it is intended to bring mental health more into primary care and Camden and Islington Mental Health Trust planned to bring services into GP premises. It was stated that at present many mental health service users were being admitted into acute services treatment without accessing other services beforehand
- Mental health is often complex and an offer needed to be developed that would be effective
- In response to a question as to medication for mental health service users it was stated that the offer needed to be developed and work is being carried out to understand the level of interest in other types of therapies
- It was stated that commissioning is taking place at North Central London level, and work is going on around integration, however each individual CCG will have the final approval. There are representatives from the 5 CCG's and providers working together and looking at the case for change and areas where it is thought things can be done differently
- There is a need to develop primary and GP care as a platform to deliver services
- In addition there is a need to look at how this interfaces with urgent and emergency care, the 111/Out of Hours service, in order to ensure the patient experience improves

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- There also needs to be consideration given as to how estates are utilised, improvements to technology and in relation to the workforce and to identify any financial gaps that are likely to arise
- There is also a year on year target to redress the balance with mental health provision as this needs to increase

The Chair thanked Dr.Jo Sauvage and Alison Blair for their presentation

221 **MARGARET PYKE UPDATE - RESULTS OF CONSULTATION - VERBAL (ITEM NO. 12)**

The Chair stated that he had discussed with Simon Edwards at CNWL the relocation of the Margaret Pyke service at the Mortimer Market site. The Chair added that he had expressed the view that this should be a separate entity at the Mortimer Market site. The waiting area in the building will be women only

The Chair added that he understood that bespoke clinical facilities were planned and long term it was important to rebuild trust with the Margaret Pyke Centre staff.

It was stated that CNWL were rationalising the service to give themselves more chance of winning the tender for the re-commissioning of services.

The Director of Public Health stated that the re-commissioning of sexual health services would include more on line testing availability as well as clinic based services. The tender would be put out in June and the focus would be on improved outcomes and delivery within budget and it is clear that the Commissioners will wish to see the retention of women's only services.

A representative of the Margaret Pyke campaign stated that they were keen to ensure that what is special about Margaret Pyke is retained. The Margaret Pyke staff group had compiled a list of key service requirements and there needed to be regular updates to ensure that these are met. The Chair stated that the Committee would continue to monitor progress.

The representative of the Margaret Pyke campaign stated that the campaign group and staff wished to thank the Health and Care Scrutiny Committee for engaging with CNWL on their behalf.

222 **SCRUTINY REVIEW - HEALTH IMPLICATIONS OF DAMP PROPERTIES - WITNESS EVIDENCE - VERBAL (ITEM NO. 13)**

Steve Philipps, Private Sector Landlord was present for discussion of this item and during discussion the following main points were made –

- Damp is a major issue and 1 in 3 houses suffer from dampness problems
- There are different causes of dampness in properties and this could be failure of a DPC, condensation, construction or ventilation problems
- It is advisable to identify the causes of dampness at an early stage in order that it does not affect health, and there is often a lack of communication between landlord and tenant until the situation becomes bad
- Condensation and mould issues are often caused by lifestyle issues of the tenants, some of whom were on very low incomes and therefore could not afford heating to be operating or not using extractor fans, putting washing on radiators to dry etc.
- In response to a statement that many tenants were afraid to report problems it was stated that this depended on the tenant and landlord, however he personally preferred that any problems should be reported as soon as possible

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which could even be done by e mail. At present out of over 300/400 properties in Islington there were only 3/4 issues with dampness at present

- In response to a question it was stated that most tenants only reported problems when health problems occurred and it is clinically proven that there is a link between condensation/mould problems with the health of some young children
- Steve Phillips informed the committee that he made sure his properties had sufficient heating which is economic to operate and advised tenants on drying of clothes, using heating etc. There is verbal advice and also a tenants handbook that is given to new tenants
- Reference was made to the fact that in Council housing stock surveyors had for many years blamed lifestyle issues when it has now been identified that in many of these flats that there are inherent design and construction problems
- It was stated that external insulation was a good way of reducing dampness, however this was expensive on older properties. Dampness can be more costly to landlords if it is not remedied immediately and that there should be a focus on other possible causes before stating that dampness is down to a lifestyle issue

The Chair thanked Steve Phillips for attending

223 CONSULTATION ON GOVERNMENT PHARMACY PROPOSALS (ITEM NO. 14)

A copy of the report was laid round.

Julie Billett, Director of Public Health was present for discussion of this item and outlined the report. A representative of the London Pharmaceutical Committee was also present.

During consideration of the report the following main points were made –

- The access fund was aimed mainly for rural areas
- The proposals did not address the health interventions of pharmacies and if these were forced to close more pressure would be placed on GP's and this needed to be emphasised more in the response to the consultation
- Pharmacies were often a place of contact for elderly people and there is also the social value of employment of local residents in pharmacies
- With regard to paragraph 4(b) reference should be made to disabled residents and the need for pharmacy assistants to have appropriate levels of expertise

RESOLVED:

That subject to the above the consultation response be noted

224 111/OUT OF HOURS SERVICE - CHAIR'S UPDATE - VERBAL (ITEM NO. 15)

The Chair stated that he had provided an update to the Committee at the previous meeting and there had been no further developments

225 WORK PROGRAMME 2016/17 (ITEM NO. 16)

RESOLVED:

That the report be noted and consideration be given to the 2016/17 scrutiny topic being – Access and Effectiveness of IAP and possible alternative approaches

MEETING CLOSED AT 9.45 p.m.

Chair