

London Borough of Islington  
**Health and Care Scrutiny Committee - Thursday, 17 November 2016**

Minutes of the meeting of the Health and Care Scrutiny Committee held at Committee Room 4, Town Hall, Upper Street, N1 2UD on Thursday, 17 November 2016 at 7.30 pm.

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

**Also Present:**   **Councillor:**            Janet Burgess

**Councillor Martin Klute in the Chair**

**268        INTRODUCTIONS (ITEM NO. 1)**

The Chair introduced Members and officers to the meeting

**269        APOLOGIES FOR ABSENCE (ITEM NO. 2)**

Bob Dowd

**270        DECLARATION OF SUBSTITUTE MEMBERS (ITEM NO. 3)**

None

**271        DECLARATIONS OF INTEREST (ITEM NO. 4)**

None

**272        ORDER OF BUSINESS (ITEM NO. 5)**

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

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

**RESOLVED:**

That the minutes of the meeting of the Committee held on 22 September 2016 be confirmed and the Chair be authorised to sign them

**274        CHAIR'S REPORT (ITEM NO. 7)**

The Chair updated the Committee on the draft Sustainability and Transformation Plan that was on the agenda later that evening for information and that this would be discussed in more detail at the JHOSC the following week so it was not intended to discuss it in detail that evening. Members concurred with this view.

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Members wished it to be noted that they had not been informed that they had previously not been aware of the proposals or the consultation process and that NHS England should be made aware of this.

### **275 PUBLIC QUESTIONS (ITEM NO. 8)**

The Chair outlined the procedure for Public questions and filming and recording at meetings. There were no public questions.

### **276 HEALTH AND WELLBEING BOARD UPDATE - VERBAL (ITEM NO. 9)**

Councillor Janet Burgess, Executive Member for Health and Social Care outlined recent developments at the Health and Wellbeing Board.

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

- Joint working was taking place with L.B.Haringey on the Health and Wellbeing Board and a meeting was proposed with other Boroughs and the Whittington Hospital
- The Whittington has appointed an additional A&E consultant

The Chair thanked Councillor Burgess for her presentation

### **277 SCRUTINY REVIEW - IAPT - WITNESS EVIDENCE (ITEM NO. 10)**

Natalie Arthur, Islington CCG was present and was accompanied by Judy Leibowitz and James Gray, Camden and Islington NHS Foundation Trust, who gave evidence to the Committee.

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

- It was noted that Camden and Islington NHS Foundation Trust delivered services on behalf of the Council and the service is known locally as iCOPE which is a stepped care model
- The number of referrals were stable and expected to reach 9292 by the end of 2016/17
- The target figure for access to treatment of 15% should be met
- Waiting times for treatment were slightly below target and there has been a challenge in reporting of data and that the NHS England figures did not reflect the correct situation
- In relation to accessibility of services and ethnicity many requesting access to services did not state their ethnicity however ethnicity is known for those actually using the service and this is in line with population and census data proportionally
- It was stated that the one of the challenges to the IAPT service is to increase access to treatment to 19% in 2017/18 and 19% in 2018/19 and this will pose a significant challenge within current resources and commissioners will be working with the service provider to identify how to address this. In L.B.Islington there are a number of people with a high level of complex needs and an IAPT plus service is being looked at to address this

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- The IAPT service is well integrated with primary care and this helps to increase access to the service
- Reference was made to the link between physical conditions and mental health
- A Member referred to the difficulty of some BME communities in filling in forms and that alternative methods of advertising and accessing the service should be looked at. It was stated that the most underrepresented group accessing service is in fact the white/other group
- In response to a question it was stated that it was recognised that there were some gaps in certain BME groups accessing the service and the Manor Gardens centre were employed to try to reach those communities currently not accessing the service
- A Member enquired whether the proposal to use skype and other such methods to increase access would work as well as face to face contact. It was stated that some people could not always attend appointments during the day and it would be more convenient to use e mail and skype etc. However it was also recognised that if people need face to face contact this would be provided
- Reference was made to unemployment and that this had an effect on mental health and that there is also a stigma around mental health that stopped people accessing services. It was stated the IAPT service worked closely with employment support services and work is taking place with JCP
- It was stated that there were national campaigns around removing the stigma of mental health and iCOPE were delivering training for parents in schools to raise awareness of mental health
- In response to a question it was stated that it is expected that 31000 residents would be suffering from mental health problems at any one time and 15% of these would be accessing services
- It was stated that the average number of sessions of treatment for patients is 6/9 sessions
- The benefit cap had had an effect on the mental wellbeing of people affected and this was proving difficult
- Elderly people were under represented accessing services but when they were referred there was a good recovery rate

The Chair thanked Judy Leibowitz, James Gray and Natalie Arthur for attending and their presentation

### **278 HEALTHWATCH WORK PROGRAMME (ITEM NO. 11)**

Emma Whitby, Healthwatch was present and outlined the report to the Committee.

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

- The investigation into accessibility for clients accessing social worker phones was taking place in conjunction with the Council
- In relation to the Sustainability and Transformation Plan Healthwatch were working to ensure that residents views were included and they were working with other Healthwatch groups in the region
- In relation to the Home Care review it was stated that details were on the Healthwatch website
- Reference was made to the gathering of views to inform the commissioning of mental health day services and that a variety of methods were being used to gather views

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Members thanked Emma Whitby for attending

### 279 **HEALTH AND WELLBEING STRATEGY (ITEM NO. 12)**

Councillor Janet Burgess, Executive Member Health and Social Care, was present at the meeting and outlined the report.

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

- The Council and the CCG were working closely together with Healthwatch through the Health and Wellbeing Board on delivery of the strategy
- Reference was made to the high level of obesity and that the Government were proposing to introduce a strategy to address this. A number of parents did not recognise that their children were overweight
- Reference was made to the need for the Council to ensure free access to sports facilities in parks
- It was stated that the CAMHS service was available in schools and some school chose to buy in additional CAHMS services
- Councillor Burgess stated that the Council were looking to develop a CAMHS transformation plan to try to cover unmet needs due to the high level of mental health problems
- In response to a question about submitting comments on the strategy Councillor Burgess stated that the strategy was currently out for consultation and that comments would be welcomed
- The view was expressed that the strategy was quite generalistic and that it should be more specific in terms of interventions and actions proposed in key areas and Councillor Burgess stated that this comment would be taken on board

#### **RESOLVED:**

That the Health and Wellbeing strategy be noted together with the comments above

The Chair thanked Councillor Burgess for her presentation

### 280 **PERFORMANCE STATISTICS (ITEM NO. 13)**

Councillor Janet Burgess, Executive Member Health and Social Care outlined the report and the following main points were made –

- With regard to delayed discharge of care the Council were achieving well in this area and were working well with hospitals in getting patients discharged from hospital as quickly as possible
- With an increasingly elderly population more people were having to go into care and were increasingly more elderly and frail and that it was a challenge finding care homes of good quality for those who need them
- Concern was expressed about the target not being reached on reducing the prevalence of smoking and obesity levels

Members thanked Councillor Burgess for the presentation

### 281 **PRESENTATION EM HEALTH AND SOCIAL CARE (ITEM NO. 14)**

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Councillor Janet Burgess, Executive Member Health and Social Care made a presentation to the Committee and outlined the report.

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

- It was noted that on page 61 of the Local Account for 2015/16 should be withdrawn as the comments attributed to Dr.Jo Sauvage were being rewritten
- Councillor Burgess outlined the key achievements of improving health in Islington and that since 2000 life expectancy has increased in Islington for both men and women however this is still lower than London and England and is the eighth lowest amongst all London Boroughs
- Infant mortality – Islington has the 5<sup>th</sup>.lowest rate of all Local Authorities in England and a significant reduction in teenage pregnancies
- Childhood obesity remains a significant challenge
- There is a transformation programme to commission a substance misuse integrated treatment recovery service and improve outcomes and maximise value for money. There are also transformation programmes for sexual health, adult lifestyle and early years
- In response to a question it was stated that Healthier Futures have completed an independent review of services using a resident enquiry approach and co-produced with residents a model for new services. Councillor Burgess stated that she would forward a copy to Members
- Members were informed that the Government proposals on pharmacies could lead to a third of pharmacies in Islington closing
- In terms of Adult Social Care, it was noted that Social Services spending accounts for one third of the Council's budget
- The Adult Social Care Plan outlines how the Council will support the delivery of the Corporate Plan Towards a Fairer Islington
- Service improvements had been made to the reablement service and this is a department priority for 2016/17
- Areas of focus for the coming year include working with providers to develop a market of care best suited to the needs of the residents, enabling people to stay as well and independently in the community as possible, delivering savings that has a low impact on quality of services as possible, scoping the market to ensure investments support emerging trends and is focused on minimising dependency on long term services, continuing to develop joined – up health, care and support services with NHS Partners, including the CCG, Whittington Hospital and Camden and Islington NHS Trust, ensuring family carers are supported to continue in their caring role, where they choose to do so, as well as improving outcomes for family carers in Islington
- Reference was made to the substance misuse transformation strategy and that it would be useful if the Committee could receive an update in May as to the effectiveness of the proposals and the approach to different types of drug use

### **RESOLVED:**

- (a) That the report be noted and that a report back to the Committee be submitted to the May meeting in respect of the substance misuse policy, as referred to above
- (b) That a copy of the Healthier Futures report, referred to above, be circulated to Members once this is available

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The Chair stated that he had requested that the report be circulated for consideration of Members.

The Chair added that this would be considered in detail at the JHOSC meeting on 25 November.

### **283 WORK PROGRAMME 2016/17 (ITEM NO. 17)**

Councillor Chowdhury suggested that the Committee should consider carrying out a scrutiny review into the Care Service in the future and that he would submit details of his proposals to the Chair and Committee Services for consideration.

#### **RESOLVED:**

That the report be noted

MEETING CLOSED AT 10.15p.m.

Chair