

London Borough of Islington  
**Health and Care Scrutiny Committee - Monday, 11 April 2016**

Minutes of the meeting of the Health and Care Scrutiny Committee held at on Monday, 11 April 2016 at 7.30 pm.

**Present:**                **Councillors:**                Klute (Chair), Chowdhury (Vice-Chair), Andrews, Heather, Turan and Ismail

**Also Present:**        **Councillors**                Jenny Kay

**Co-opted Member**        Bob Dowd, Islington Healthwatch

**Councillor Martin Klute in the Chair**

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

The Chair introduced Members and officers to the meeting

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

Councillors Nicholls and O'Halloran

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

Councillor Jenny Kay stated that she was substituting for Councillor O'Halloran

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

None

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

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

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

**RESOLVED:**

That, subject to the deletion of the word Partners and the insertion of the word Hyde, in minute 192 bullet point 5 – the minutes of the meeting of the Committee held on 7 March 2016 be confirmed and the Chair be authorised to sign them

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

The Chair reported that further to the involvement of JOHSC, the Committee and the Keep NHS public campaign, he was pleased to report the awarding of the contract for the 111/Out of Hours service had gone to the North Central and West London Unscheduled Care Collaborative. This will enable a local focus to be maintained for boroughs

**204        PUBLIC QUESTIONS (ITEM NO. 8)**

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

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

Councillor Janet Burgess, Executive Member for Health and Wellbeing, was present for discussion of this matter and outlined the following –

- Work is taking place with the Whittington Hospital on the Estates strategy and it is important that this work is completed quickly to fit in with Government timescales

- The Government has announced proposals for a Sugar Tax and this is welcomed and the Obesity strategy would be considered on 24 June
- The Making it Real work carried out on direct payments and social services funding has been nominated for a national award
- The Deaf service has won an award for the most successful mainstream service and Spectrum service for severe autism has been commended by the National Autistic society
- It was noted that Age UK Islington, who ran the carers service, had opened a centre in Manor Gardens and she had attended the opening

The Chair thanked Councillor Burgess for her update

**206**

**HEALTH IMPLICATIONS OF DAMP PROPERTIES SCRUTINY REVIEW -  
WITNESS EVIDENCE - VERBAL (ITEM NO. 10)**

John Venning, Partners was present and during discussion the following main points were made –

- The housing stock managed by Partners is largely Victorian and Georgian street properties and Partners had responsibility for 2900 properties and 4500 tenants. In addition there were 1800 leaseholders
- The properties were mainly solid wall brick walls and had sash windows and therefore there were inherent problems with carrying out cost effective insulation work
- Partners recognised that dampness is detrimental to health and this has been addressed in a number of ways by a refurbishment programme between 2002-12, advice to tenants and support to vulnerable residents
- The refurbishment programme included ventilation work, damp proof works in basements and some external wall works
- Ongoing repairs are carried out by Partners sub-contractor Rydons who dealt with 23,000 repair requests per year, only 3% of these were damp related
- Of the 778 initial complaints relating to dampness only 205 resulted in an independent survey being commissioned
- . Of the 200 major works jobs only 7 were related to dampness
- There had been no major issues of dampness identified in the previous few months
- Ad hoc work is carried out in relation to condensation problems and Partners provided advice to residents by distributing leaflets on this and energy saving measures. Assistance is also given to vulnerable residents and there is liaison with SHINE
- Secondary glazing works had recently taken place to some properties and boilers had been replaced to be more energy efficient and there is a loft insulation programme
- There is a desire to carry out more insulation to walls, secondary glazing,/double glazing but this work is expensive to do
- In response to a question Partners stated that the main causes of damp problems were rising damp, water ingress, plumbing, drainage and roofing problems. There were condensation issues but the important thing is for there to be specialist knowledge to identify and rectify any problems
- Partners had a repairs obligation to tenants to resolve issues and worked with tenants and stated that if Members had any specific problems he would be willing to look at these
- In response to a question it was stated that whilst Partners had had roofing problems with properties a few years ago this had now been largely addressed

- Partners stated that they recognised the health implications of dampness to residents and that they had an important role in reducing dampness in their properties

The Chair thanked John Venning for attending

**207**

**JOINT STRATEGIC NEEDS ASSESSMENT (ITEM NO. 11)**

Julie Billett, Director of Public Health and Mahnaz Shaukut, Head of Health Intelligence Public Health were present for discussion of this item and laid this round for the Committee.

During consideration of the report the following main issues were raised –

- In respect of NEET's the higher than average London figure may be associated with social deprivation although there are relatively small numbers involved
- There are high levels of mental health problems in the borough and work is taking place with the health service about mental health risks and the vulnerability of this group
- Members expressed the view that there should be consideration given to air quality and its effects on asthma and that this should form part of the next JSNA
- Reference was made to the fact that the JSNA should include where the current GP practices are in the borough and the areas where these are likely to be needed in the future based on projected population growth
- Councillor Heather stated that he would like to receive information on a ward basis in relation to the evidence and it was stated that this could be provided to him
- In response to a question it was stated that the JSNA is signed off by the Health and Wellbeing Board and informed commissioning plans
- A Member expressed the view that BME groups tended to suffer disproportionate levels of mental health problems, however it was stated that the levels were broadly reflective of the demographics of the community
- There is early intervention work on mental health and there is training and support for mental health champions. In terms of older people there is good access to services but there is a need for more equity auditing and this could be looked at
- Reference was made to the fact that a large number of the prison population suffered from mental health problems and that this may not have been the case if early intervention had taken place
- It was stated that mental health is a complex issue and can be caused by many factors and there is a need to promote good mental health and should not just focus on responding to crisis situations. There should also be a focus on providing other treatments not just merely drug prescription for good mental health outcomes
- It was stated that early intervention work is important and that Public Health had good relationships with other departments in this regard and this need is recognised across Directorates
- Reference was made to the link between children with SEN and the NEET cohort and that this should be looked at together with ethnicity
- In addition it was stated that in relation to children with disabilities their parents/carers were often unable to go back to work and were therefore more likely to live in poverty and that the JSNA should have an action plan in this regard

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- Concern was also expressed that the income maximisation team had been reduced which limited families ability to maximise their income

### **RESOLVED:**

That the issues raised above be considered when the future JSNA is being prepared and the information be requested above by Councillor Heather be circulated to him

The Chair thanked Julie Billett and Mahnuz Shaukut for attending

208

### **DEPARTMENT OF HEALTH CONSULTATION - COMMUNITY PHARMACY IN 2016/17 AND BEYOND (ITEM NO. 12)**

The Director of Public Health, Julie Billett, was present together with a representative of the London Pharmaceutical Committee (LPC).

Julie Billett outlined the report.

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

- There is a need for more work to be undertaken in order to respond to the consultation process
- There is to be reduction in funding for community pharmacy
- There are 45 community pharmacies in the borough and the current demand is being met
- The proposals may mean the loss of some pharmacies in the borough, however it is felt that these are a valuable resource that should be maintained and were a source of local employment
- It was stated that work is being carried out to work with community pharmacists and the LPC in order to prepare a response to the consultation. Members were of the view that they would wish to contribute to this and the draft response should be considered at the next meeting of the Committee
- Members expressed the view that pharmacies could assist in alleviating the pressure put on GP's and that the Government proposals appeared to be counter productive
- It was noted that the consultation process finished on 24 May and that the response to the consultation could be considered by the Committee at its meeting on 16 May
- The LPC representative stated that he represented pharmacies in Camden and Islington and added that whilst the funding had been announced for community pharmacies for 201/17 no indication had been given as to future funding
- It was felt that there is a strong possibility that there may be an increase in the prescription threshold and a reduced establishment payment over the next few years which will mean the closure of some community pharmacies and therefore investment plans may be put on hold
- Camden and Islington had the lowest prescription rate in London apart from Westminster and this may be to the difference in the daytime and nighttime populations
- The LPC representative stated that pharmacies both small and large scale providers were united in opposition to the proposals and were actively lobbying to prevent them
- The view was expressed that community pharmacists also provided somewhere where vulnerable and the elderly could visit and obtain advice and to reduce taking of medicines unnecessarily
- The Committee expressed the view that they supported the LPC and would wish to add comments to the consultation process and the draft response should be submitted to the Committee on 16 May for consideration

**RESOLVED:**

That the draft consultation to the Department of Health Community Pharmacy proposals be submitted to the next meeting of the Committee for consideration

**209      WORK PROGRAMME 2016/17 (ITEM NO. 13)**  
**RESOLVED:**

That the report be noted

MEETING CLOSED AT 9.40p.m.

Chair