



**Resources Department  
Town Hall, Upper Street, London, N1 2UD**

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## **AGENDA FOR THE HEALTH AND CARE SCRUTINY COMMITTEE**

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Members of the Health and Care Scrutiny Committee are summoned to a meeting, which will be held in the Council Chamber, Islington Town Hall, Upper Street N1 2UD on **6 June 2022 at 7.30 pm.**

Enquiries to : Jonathan Moore  
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Despatched : 25 May 2022

The membership will be determined at the Annual Council meeting on 26 May 2022

**Quorum: is 4 Councillors**

**A. Formal Matters** **Page**

1. Introductions
2. Apologies for Absence
3. Declaration of Substitute Members
4. Declarations of Interest

If you have a **Disclosable Pecuniary Interest\*** in an item of business:

- if it is not yet on the council's register, you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent;
- you may **choose** to declare a Disclosable Pecuniary Interest that is already in the register in the interests of openness and transparency.

In both the above cases, you **must** leave the room without participating in discussion of the item.

If you have a **personal** interest in an item of business **and** you intend to speak or vote on the item you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent but you **may** participate in the discussion and vote on the item.

**\*(a)Employment, etc** - Any employment, office, trade, profession or vocation carried on for profit or gain.

**(b)Sponsorship** - Any payment or other financial benefit in respect of your expenses in carrying out duties as a member, or of your election; including from a trade union.

**(c)Contracts** - Any current contract for goods, services or works, between you or your partner (or a body in which one of you has a beneficial interest) and the council.

**(d)Land** - Any beneficial interest in land which is within the council's area.

**(e)Licences**- Any licence to occupy land in the council's area for a month or longer.

**(f)Corporate tenancies** - Any tenancy between the council and a body in which you or your partner have a beneficial interest.

**(g)Securities** - Any beneficial interest in securities of a body which has a place of business or land in the council's area, if the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body or of any one class of its issued share capital.

This applies to **all** members present at the meeting.

5. Minutes of the previous meeting 1 - 6
6. Chair's Report

7. Public Questions

For members of the public to ask questions relating to any subject on the meeting agenda under Procedure Rule 70.5. Alternatively, the Chair may opt to accept questions from the public during the discussion on each agenda item.

<b>B. Items for Decision/Discussion</b>	<b>Page</b>
8. Membership and Terms of Reference	7 - 10
9. Update on Covid-19	(verbal)
10. Health and Wellbeing Board Update	(verbal)
11. Selection of Scrutiny Review Topic 2022/23	11 - 12
12. Work Programme	13 - 14

**C. Urgent non-exempt items (if any)**

Any non-exempt items which the Chair agrees should be considered urgently by reason of special circumstances. The reasons for urgency will be agreed by the Chair and recorded in the minutes.

**D. Exclusion of Press and Public**

To consider whether, in view of the nature of the remaining items on the agenda, it is likely to involve the disclosure of exempt or confidential information within the terms of the Access to Information Procedure Rules in the Constitution and, if so, whether to exclude the press and public during discussion thereof.

**E. Confidential / Exempt Items**

**F. Urgent Exempt Items (if any)**

Any exempt items which the Chair agrees should be considered urgently by reason of special circumstances. The reasons for urgency will be agreed by the Chair and recorded in the minutes.

The next meeting of the Health and Care Scrutiny Committee will be on 7 July 2022

**Please note all committee agendas, reports and minutes are available on the council's website: [www.democracy.islington.gov.uk](http://www.democracy.islington.gov.uk)**

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# Agenda Item 5

London Borough of Islington  
**Health and Care Scrutiny Committee - Thursday, 17 March 2022**

Minutes of the meeting of the Health and Care Scrutiny Committee held at the Town Hall on Thursday, 17 March 2022 at 7.30 pm.

**Present:**           **Councillors:**           Jeapes (Chair), Kay (Vice-Chair), Chowdhury, Clarke, Gantly and Hyde

**Also Present:**           **Councillors:**           Turan

## **Councillor Clare Jeapes in the Chair**

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

The Chair introduced Members and officers to the meeting

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

Councillor Graham

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

None

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

None

**347        MINUTES OF THE PREVIOUS MEETING (ITEM NO. 5)**

RESOLVED:

That the minutes of the meeting of the Committee held on 21 February 2022 be confirmed and the Chair be authorised to sign them.

**348        CHAIR'S REPORT (ITEM NO. 6)**

None

**349        PUBLIC QUESTIONS (ITEM NO. 7)**

The Chair outlined the procedure for Public questions

**350        HEALTH AND WELLBEING BOARD UPDATE - IF ANY (ITEM NO. 8)**

None

**351        WHITTINGTON HOSPITAL - PRESENTATION (ITEM NO. 9)**

Jonathan Gardener, Whittington NHS Trust was present and made a presentation to the Committee, copy interleaved

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

## Health and Care Scrutiny Committee - 17 March 2022

- There are significant differences in health outcomes for those who live in the most deprived areas. The top three diagnosed long term conditions in August 2021, excluding mental health are hypertension, asthma and diabetes
- Whittington's strategic objective is to play its role as an anchor institution to prevent ill-health, making every contact count, empower self-management and with the community, become a source of health advice, tackle inequalities
- Population health is an approach that aims to reduce health inequalities across an entire population, promote health and well-being and improve physical and mental health outcomes
- Noted that Islington has a much larger younger population when compared to London and national average. 24% of Islington population live in the most 20% of all deprived neighbourhoods, largely concentrated on the east of the borough
- The COVID pandemic worsened existing health inequalities which are linked with deprivation, ethnicity and age. The highest rate of hospital admissions for COVID were other ethnic groups, followed by people from a black background. There have been more deaths from the east of the borough than centre or west
- Overall life expectancy is increasing for all residents, however people in Islington live the last 20 years of their lives in poor health. There is a significant social gradient in life expectancy and healthy life expectancy for both genders between the least and most deprived areas of the borough
- There are barriers to accessing healthcare in deprived communities
- There are four pillars of population health – wider determinants of health, health behaviours and lifestyles, an integrated health and care system and places and communities we live in and with. There are a range of social, economic and environmental factors which impact people's health
- Whittington is an anchor institution and areas of action include staff recruitment, pay and conditions etc., a procurer of services, local procurement and social value from procurement, best use of land and assets, new development, service delivery, corporate and civic responsibility
- Noted Whittington has developed a strategy and action plan on these issues
- Noted that admissions of children to hospital was high and it was stated that this could be for a number of reasons, and Whittington was involved with Bright Start, and it was intended to use Health visitors to make an impact in this area
- In relation to the impact of poor air quality in the borough it was stated that this might be a contributory factor to the high incidence of COPD in the borough. Whittington had put in place measures to reduce emissions and had reduced these by 35% in the last few years
- Noted that Whittington were developing a continuity of carer midwife team

### RESOLVED:

That the Committee place on record their appreciation for the work undertaken by Whittington NHS Trust and staff for the work they carry out on behalf of residents of the borough, particularly during the pandemic

The Chair thanked Jonathan Gardener for attending

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### **FRANCES O'CALLAGHAN PRESENTATION - NCL TRANSITION (ITEM NO. 10)**

Frances O'Callaghan, NCL was present for discussion of this item, and made a presentation to the Committee, copy interleaved, during which the following main points were made –

## Health and Care Scrutiny Committee - 17 March 2022

- NCL is continuing to work towards an integrated care system and work has progressed well in key areas of ICS development
- The establishment of the ICS is subject to the passage of the Health and Care Bill which is currently going through Parliament
- The core purpose of an integrated care system is to improve outcomes in population health and health care, tackle inequalities in outcomes, experience and access, enhance productivity and value for money, help NHS support broader social and economic development. Each ICS will have a responsibility to co-ordinate services and plan health and care in a way that improves population health that reduces inequalities
- Responding to COVID has accelerated and consolidated ways the system works together for residents, such as innovative approaches to patient care, accelerated co-operation, mutual planning and support, smoothing transition between primary and secondary care, sharing of good practice, and clinical and operational collaboration
- NCL are together with system partners designing what the ICS will look like at neighbourhood, place and system level
- Clinical leadership will remain at the centre of the NCL ICS and clinical staff will be used in a more integrated way to deliver the best care
- Community involvement and representation – Health and Wellbeing Boards linked to borough partnerships, patient and resident engagement undertaken in different forms across borough partnerships, VCS organisation play a role in all partnerships
- Next steps – co-producing a population health outcome framework and strategy, construction of the leadership team, engagement meetings, by end of June 2022 agree ambitions for the next few years, short term priorities, and core principles for working together. Establish a board membership for the NHS body and agree approach to partner members
- Noted that it was felt that the new legislation would be more outcome focused and more focused on clinical pathways and that this would be an improvement
- Noted that there were challenges in primary care
- Noted that there will be a statutory duty to collaborate with NHS Trusts and that the Local Authority scrutiny function would be maintained and there is a need for work in partnership with Local Authorities
- Concern was expressed that the funding formula worked against Islington, as deprivation was more difficult to ascertain, as deprivation existed street by street and home by home, not necessarily on a ward level. It was stated that NCL knew the existing formula was not perfect, however it was working to look in more detail at this and when this was available details could be forwarded to the Committee
- Noted that no private representatives would be on the ICB, and that it would meet in public for transparency

### RESOLVED:

That details of work relating to the funding formula for deprivation be forwarded to the Committee once this is available

The Chair thanked Frances O'Callaghan for attending

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### **HEALTH INEQUALITIES SCRUTINY REVIEW - FINAL REPORT (ITEM NO. 12)**

Jonathan O'Sullivan, interim Director of Public Health was present and outlined the report

RESOLVED:

- (a) That the report be approved and referred to the Executive for consideration
- (b) The Committee place on record their appreciation of the work of the former Chair, Councillor Gantly for her work on the Committee

The Chair thanked Jonathan O'Sullivan for attending

**354**      **CENTENE - STATE OF PUBLIC HEALTH AND ADULT SOCIAL CARE**  
**(ITEM NO. 11)**

Professor Sue Richards was present for discussion of this item

Members noted the report of the IPPR that had been circulated

During discussion the following main points were raised –

- Campaigners against NHS privatisation became aware in February 2021 that a small company called A T Medics, which held APMS contracts for 49 primary care centres / GP practices across London had been bought by a UK subsidiary of the US healthcare giant Centene.
- There was widespread opposition to this in the local press and in street demonstrations and a patient at Hanley Road, one of the affected Islington surgeries, stepped forward as the claimant in a judicial review process. That person was Councillor Anjna Khurana. A small support team was established and they made contact with solicitors Leigh Day, who agreed to take the case on a no-win, no-fee basis
- A crowdfunder was set up in support, and it very quickly met its target, raising over £70,000, £60,000 being spent on costs incurred by the PCCC since they won the case. The remaining £10,00 went to the two barristers who presented our case, both working at well below commercial rates
- Judicial Review papers were served on NCL CCG Primary Care Commissioning Committee, which believed that it should agree to a 'change in control' of the 8 NCL contracts. There were various exchanges of papers. At first the right to bring a judicial review was refused, but when the case was reviewed face to face in court the judge allowed it to proceed on all three grounds
- The grounds are summarised as follows
  1. That the PCCC misdirected itself by, amongst other things, considering only the potential legal repercussions from A T Medics / Operose, and not considering potential legal repercussions from members of the public who might object
  2. Inadequate due diligence, by accepting as covering due diligence a report which dealt solely with bankruptcy and which did not examine publicly available accounts showing that Operose was heavily in debt to its parent Centene
  3. That the PCCC failed to note the widespread public interest there would be in this matter and failed to consult the public
- The lost the case on all three grounds. The case was heard on 1 and 2 February 2022

## Health and Care Scrutiny Committee - 17 March 2022

- While the legal judgement went in favour of the PCCC, in the court of public opinion that was definitely not the case and the publicity surrounding the case woke up many residents of North Central London (and elsewhere in London) to the degree of stealth privatisation going on in the NHS, despite the current government's claims not to be promoting it.
  - The CCG has a local mandate awarded in the 2012 Health and Social Care Act, and its members are mainly from the local GP community, but it has acted as though it were an arm of central government, following an agenda of privatisation best expressed by the decision by the Prime Minister to choose a former Centene director as his chief adviser on health. Because of recent changes in the staffing of No 10, she has risen to being the Chief Operating Officer there
  - Meanwhile, the government is pushing through Parliament the Health and Care Bill which is claimed to be primarily about increasing integration between Health and Social Care, but which actually contains virtually nothing about integrating health and social care, and a great deal about reducing local public accountability and increasing the powers of the Secretary of State for Health and Care
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- Islington Councillors can remind CCG that they serve the community and not the NHS hierarchy. There is wide public support for a non-privatised NHS
  - Demand more transparency. The CCG claimed that a mention of the change of control from AT Medics to Operose on page 73 if a 200-page set of meeting papers, without a mention of Centene, the parent company, was good enough to alert the public in North Central London to what was bound to be a controversial change. The five councils should demand better than this. Items should not be taken in secret, on the part 2 agenda, unless wholly necessary.
  - The HOSC and the JHOSC should be aware that NCL has 39 APMS contracts with various companies and demand to know if any other than the the original eight are in the sights of large companies. They should demand immediate notification of a request for a change of control of contracts.
  - The contracts for delivering the GP service at Hanley Road and Mitchison Road were due to finish on 31 July 2021, and they were extended for a year, during which time they promised careful monitoring and a decision about whether to extend again (to Operose / Centene) or whether to reprocure the contracts. HOSC should demand full transparency on this matter.
  - Islington people need effective primary care, but the neglect of staff training policies leaves them, as everywhere else, under pressure because of the poor availability of qualified GPs. The Council probably can do more to help the CCG deal with this problem through means such as planning, availability of special housing for young GPs that keeps in the area, and a compelling strategy against health inequalities which involves and inspires GPs
  - The NCL representative stated that she did not feel it appropriate to comment on the Court case, however this had been discussed at the CCG in December and local Councillors had been involved. The NCL always acted with integrity and made professional judgements, and were committed to provide the best

## Health and Care Scrutiny Committee - 17 March 2022

service for residents that they could. NCL had to abide by the legislation laid down by central Government

- The Chair expressed the view that she was a patient at Mitchison Road and the patients wanted the surgery to remain in NHS control not to go to a private contractor. NCL stated that they recognised the concerns of the Committee
- It was stated that it was felt that communication had improved between NCL and Councillors, however the Government should not allow privatisation by the 'back door', and there needed to be more co-ordinated funding and training to ensure that there were enough trained NHS GP's

RESOLVED:

That Members consider the IPPR report circulated and if there are any comments thereon this can be considered at a future meeting of the Committee

The Chair thanked Professor Richards for attending

### 355 **COVID 19 UPDATE - VERBAL (ITEM NO. 13)**

Jonathan O'Sullivan, interim Director of Public Health was present and made a verbal presentation

During discussion it was noted –

- COVID cases had remained relatively stable since the last report to the Committee, however there had been no increase on the number of people on ventilators in NCL
- A booster campaign for vulnerable groups would be shortly introduced
- The Government had decided not to go ahead with mandatory vaccinations for Care staff etc. and that this would hopefully lead to less staff leaving the service

RESOLVED:

That the Committee wish to place on record their appreciation of the work of the interim Director of Public Health, Jonathan O'Sullivan and the Public Health staff for the excellent work that they had carried out on behalf of residents during the pandemic

The Chair thanked Jonathan O'Sullivan for attending

### 356 **WORK PROGRAMME (ITEM NO. 14)**

RESOLVED:

That the report be noted

MEETING CLOSED AT 9.35 p.m.

Chair

Report of: Director of Law and Governance

Meeting of	Date	Ward(s)
Health and Care Scrutiny Committee	6 June 2022	All

Delete as appropriate		Non-exempt
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## Subject: MEMBERSHIP, TERMS OF REFERENCE AND DATES OF MEETINGS OF THE HEALTH AND CARE SCRUTINY COMMITTEE

### 1. Synopsis

To inform members of the terms of reference of the Health and Care Scrutiny Committee

### 2. Recommendations

- 2.1 To note the membership appointed by Annual Council on 26 May 2022, terms of reference and dates of meetings of the Health and Care Scrutiny Committee for the municipal year 2022/23 as set out at Appendix A.

### 3. Background

- 3.1 The terms of reference of the Health and Care Scrutiny Committee (as contained in Part 5 of the Council's Constitution) are set out at Appendix A.
- 3.2 The membership and dates of meetings are also set out at Appendix A for information.

### 4. Implications

#### 4.1 Financial Implications

None.

#### 4.2 Legal Implications

None.

### 4.3 Equalities Impact Assessment

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding. An equalities impact assessment is not relevant in this instance.

### 4.4 Environmental Implications and contribution to net zero carbon:

The environmental impacts have been considered and it was identified that the proposals in this report would have no adverse environmental implications.

Papers are circulated electronically where possible and consideration is given to how many printed copies of the agenda might be required on a meeting by meeting basis with a view to minimising numbers. Any papers not used at the meeting are recycled.

## 5. Conclusion and reasons for recommendations

5.1 The report is submitted to ensure members are fully informed of the remit of the Committee.

**Background Papers:** None.

**Appendices:** Appendix A – Committee Membership, Future Meeting Dates, and Terms of Reference.

### Final Report Clearance

Signed by

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Director of Law and Governance

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Date

Report author      Jonathan Moore, Committee Services Manager  
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**HEALTH AND CARE SCRUTINY COMMITTEE – 2022/23****1. COMMITTEE MEMBERSHIP**

<b>Councillors</b>	<b>Substitute Members</b>
Cllr Jilani Chowdhury (Chair) Cllr Joseph Croft (Vice-Chair) Cllr Martin Klute Cllr Tricia Clarke Cllr Fin Craig Cllr Mick Gilgunn Cllr Claire Zammit Cllr Caroline Russell	Cllr Janet Burgess Cllr Nick Wayne Cllr Dave Poyser Cllr Benali Hamdache

**2. MEETING DATES**

- 6 June 2022
- 7 July 2022
- 4 October 2022
- 15 November 2022
- 13 December 2022
- 31 January 2023
- 9 March 2023
- 24 April 2023

The dates, times and locations of meetings are publicised on the council's website – [democracy.islington.gov.uk](http://democracy.islington.gov.uk)

**3. TERMS OF REFERENCE**

1. To review the planning, provision and operation of health and care services in Islington area, invite reports from local health and care providers and request them to address the committee about their activities and performance
2. To respond to consultations by local health trusts and the Department of Health.
3. To consider whether changes proposed by local health trusts amount to a substantial variation or development.
4. To make reports and/or recommendations to a relevant NHS body or a relevant health service provider.

5. To recommend to the Council that a referral be made to the secretary of state under regulation 23(9) of the Local Authority (Public Health, Health and Wellbeing and Health Scrutiny) Regulations 2013.
6. To make reports and/or recommendations to the Council and/or the Executive on matters which affect the health and wellbeing of inhabitants of the area.
7. To carry out the functions of an overview and scrutiny committee in respect of matters relating to the Public Health Directorate or to Adult Social Services.
8. To undertake a scrutiny review, of its own choosing and any further reviews as directed by the Policy and Performance Scrutiny Committee and, consulting all relevant sections of the community, to make recommendations to the Executive thereon.
9. To carry out any review referred to it by the Policy and Performance Scrutiny Committee following consideration of a Councillor Call for Action referral.

## **HEALTH AND CARE SCRUTINY COMMITTEE**

### **SELECTION OF SCRUTINY TOPIC 2022/23**

The Committee is invited to select its scrutiny topic for 2022/23.

The Council's Constitution allows the Committee undertake a review of its own choosing. In addition, the Committee may carry out a further review subject to the agreement of the Policy and Performance Scrutiny Committee.

In recent years the Committee has carried out the following reviews:

- Health Inequalities and the Covid-19 Pandemic – 2021-22
- Adult Paid Carers – 2019-20 and 2020-21
- GP Surgeries – 2018-19
- Air Quality – 2017-18

#### **RECOMMENDED:**

That the Committee selects a review topic for 2022/23

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## HEALTH AND CARE SCRUTINY COMMITTEE

### DRAFT WORK PROGRAMME 2022/23

**Meeting date: 6 June 2022**

**Agenda despatch date: 25 May 2022**

1. Membership and Terms of Reference
2. COVID 19 update
3. Health and Wellbeing Board Update (verbal)
4. Scrutiny Review – selection of topic
5. Work Programme 2022/23

**Meeting date: 7 July 2022**

**Agenda despatch date: 29 June 2022**

1. Scrutiny Review – Approval of Scrutiny Initiation Document / Initial Presentation
2. Health and Wellbeing Board Update (verbal)
3. COVID 19 update
4. Whittington Hospital Performance update
5. Quarter 4 Performance reports – Health & Adult Social Care
6. Scrutiny Review of Adult Paid Carers – 12 month report back
7. Work Programme 2022/23

**Meeting date: 29 September 2022**

**Agenda despatch date: 21 September 2022**

1. Health and Wellbeing Board update (verbal)
2. COVID 19 update
3. Scrutiny Review – Witness Evidence
4. Camden and Islington Mental Health Trust Performance update
5. London Ambulance Service Performance update
6. Work Programme 2022/23

**Meeting date: 15 November 2022**

**Agenda despatch date: 7 November 2022**

1. Executive Member for Health and Care - Annual Report
2. Scrutiny Review – witness evidence
3. COVID 19 update
4. Health and Wellbeing Board Update (verbal)
5. Quarter 1 Performance reports – Health & Adult Social Care
6. Healthwatch Annual Report/Work Programme
7. Local Account
8. Work Programme 2022/23

**Meeting date: 13 December 2022**

**Agenda despatch date: 5 December 2022**

1. Scrutiny Review – witness evidence
2. Health and Wellbeing Board update (verbal)
3. COVID 19 update
4. Islington Safeguarding Board Annual Report
5. Work Programme 2022/23

**Meeting date: 31 January 2023**

**Agenda despatch date: 23 January 2023**

1. Scrutiny Review - witness evidence
2. Health and Wellbeing Board update (verbal)
3. Moorfields Eye Hospital Performance report
4. UCLH Performance update
5. Quarter 2 Performance reports – Health & Adult Social Care
6. COVID 19 update
7. Work Programme 2022/23

**Meeting date: 9 March 2023**

**Agenda despatch date: 1 March 2023**

1. COVID 19 update
2. Health and Wellbeing Board update
3. Scrutiny Review – draft recommendations

**Meeting date: 24 April 2023**

**Agenda despatch date: 16 April 2023**

1. COVID 19 update
2. Health and Wellbeing Board update
3. Scrutiny Review Final Report