

London Borough of Islington
Health and Care Scrutiny Committee - Thursday, 15 November 2018

Minutes of the meeting of the Health and Care Scrutiny Committee held at on Thursday, 15 November 2018 at 7.30 pm.

Present: **Councillors:** Klute, Chowdhury, Clarke, Hyde and Khurana

1 ELECTION OF CHAIR (ITEM NO.)

In the absence of the Chair and Vice Chair it was proposed by Councillor Hyde and seconded by Councillor Khurana and –

RESOLVED:

That Councillor Klute be elected as Chair of the Committee for the remainder of the meeting

2 INTRODUCTIONS (ITEM NO. 1)

The Chair introduced Members and officers to the meeting

3 APOLOGIES FOR ABSENCE (ITEM NO. 2)

Councillors Gantly (Chair), Turan, Woodbyrne and Jana Witt – Healthwatch and Councillor Chowdhury for lateness

4 DECLARATION OF SUBSTITUTE MEMBERS (ITEM NO. 3)

None

5 DECLARATIONS OF INTEREST (ITEM NO. 4)

None

6 ORDER OF BUSINESS (ITEM NO. 5)

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

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

RESOLVED:

That, subject on page 5 bullet point 7 to the deletion of the words - 'for social prescribing' and the insertion of the words 'patient activation service' - the minutes of the meeting of the Committee held on 11 October 2018 be confirmed and the Chair be authorised to sign them

8 CHAIR'S REPORT (ITEM NO. 7)

None

9 PUBLIC QUESTIONS (ITEM NO. 8)

The Chair outlined the fire evacuation procedures and the procedures for questions and filming of meetings

10 HEALTH AND WELLBEING BOARD UPDATE (ITEM NO. 9)

None

11 **ALCOHOL AND DRUG ABUSE -UPDATE (ITEM NO. 10)**

Emma Stubbs, Senior Commissioning Manager, Public Health, was present at the meeting and made a presentation to the Committee. (Copy interleaved) Service user and Peter Kane and Dr.Liz McGrath were also present representing Camden and Islington NHS Trust, the service provider.

During the presentation the following main points were made –

- New estimates of the number of crack and/or opiate users (OCU's) and alcohol in Local Authorities were published in 2017. These prevalence estimates give an indication of the number of people in a local area that are in need of specialist treatment, and the rate of unmet needs gives the proportion of those not currently in treatment
- Cohort and estimated number – OCU's 2168, Islington Unmet need 55.5% and national unmet need 51.7%. Opiate cohort and estimated number 1749, Islington unmet need 45%, and national unmet need 43%. Crack cohort and estimated number 1642, Islington unmet need 58%, national unmet need 62%. Alcohol cohort and estimated number 3674, Islington unmet need 76%, and national unmet need 78%
- The Home Office estimated that in 2010/11 that the cost of illicit drug use in the UK is £10.7 billion per year. This figure includes 8% health service use, 10% enforcement, 28% deaths linked to eight illicit substances, and 54% drug related crime
- Research has shown that for every £1 invested in drug treatment there is £2.50 benefit to society and of those people engaged in treatment in 2015/16 if they had not been in treatment it would have cost the NHS an additional £1billion
- It is estimated that structured treatment prevented crimes in 2010/11, with an estimated saving to society worth £1billion in today's prices, and further money was saved from former drug users sustaining their recovery
- Impacts of substance abuse – Family history of addiction, socio-economic deprivation, homelessness, unemployment, poor working conditions and job insecurity, mental are more likely to use illegal drugs, poor mental health is linked to drug misuse and vice versa, and there are strong links between health inequalities and drug use, but the picture is complex
- Better Lives update – the Better Lives new adult Islington drug and alcohol service started on 1 April 2018
- Camden and Islington NHS Foundation Trust are the lead provider working in partnership with WDP and Blenheim
- There were significant logistical challenges in the first 6 months of operation, and Camden and Islington have invested significant amounts of money into refurbishing buildings, in order to give service users, their families and staff comfortable and welcoming environments in which to transform their lives
- As buildings have been refurbished, the services usually provided from these sites have had to be relocated elsewhere. This has caused some anxiety to service users, but through regular meetings, and by involving service users in planning, service users are now more aware of the reasons for the changes and are more comfortable with the plans
- All eligible staff have been transferred over to the new providers, and the remaining key vacant posts, such as the Borough Service Manager, have been successfully appointed to. Better Lives held a successful team building day to welcome all staff to the new service, and to clearly set out a vision for the new service

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- There has been positive feedback from partners about the proactive and flexible engagement of staff from Better Lives which includes: working alongside community safety colleagues in the Stroud Green area, attendance at a range of community events over the summer, including most recently StreetFests in Finsbury Park, the provision of services at the Floating Hub, as part of the GLA funded No Second Night Out pilot, working with Children's Services around the Keel Project (supporting families affected by DVA, mental health and substance misuse)
- New areas of work – Better Lives are launching a pilot project based in GP practices to work with people who are being prescribed benzodiazepines and opioids, and who may be showing signs of dependence. The project will support people with a medication review, and work with those who would like to reduce their reliance on medication
- In terms of borough performance, there has been a significant increase in the number of new service users entering treatment, compared to the same period last year: there has been an increase in the number of opiate users accessing treatment, and a 78% increase in the number accessing treatment for alcohol. New to treatment in Q1 2017/18 there were 78 opiate and 79 alcohol users, and in Quarter 1 2018/19, there were 111 opiate users and 141 alcohol users new to treatment, a significant increase
- Further positive signs include – Zero clients re-presenting to the service in Q1, following the completion of treatment, indicative of successful maintenance of recovery. An increase of people in treatment referred via criminal justice routes (Police, Courts, Probation, CRC), 20.8%, compared with 18% last year – this was an area of the pathway where it has been wanted to see improved engagement and referral for some time. There has been more Naloxene provided to at risk/vulnerable residents in Q1 and Q2 this year, than the same period of last year (78 kits compared with 36 last year)
- What is working well in relation to the family service – Referrals – during the first quarter of service delivery 2018/19 there has been a 167% increase in the number of referrals to the Better Lives Family service, (15 in Q1 2017/18, compared with 40 in the same quarter 2018/19. Also with regard to direct work with families, during the first quarter of service delivery 2018/19, 59 Islington families were being supported. During the same quarter 2017/18, 39 Islington families were provided with a service
- Performance looked to be similar for quarter 2
- In future the service would be looking to go into the community and family homes and for there to be safe areas for residents suffering from DV
- In relation to the transfer of buildings it was noted that the service had various ways of communicating with users, such as leaflets, adverts in bus shelters and word of mouth, which was often the most effective means of communication and there had been no drop off in engagement
- There had been more residents coming into treatment after referral since the service started
- Members welcomed the improvement in the service since the new contract had started and service users felt the service was working more effectively
- It was noted that work is also taking place with community safety colleagues and partners
- It was stated that the service was developed with service users and the service would continue to evolve to meet local needs
- A service user stated the most important improvement had been the contact with the key worker of clients
- In terms of families, as it had been shown that intergenerational family clients were presenting, there would be more of a focus on prevention strategies and there is work going on with Children's Services in this area

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The Chair thanked Emma Stubbs, Dr.Liz McGrath, Peter Kane and the service user for attending

12

ANNUAL SAFEGUARDING REPORT (ITEM NO. 11)

Elaine Oxley, Housing and Adult Social Services, was present at the meeting, together with James Reilly, Independent Chair of the Adults Safeguarding Board.

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

- The Board is composed of a diverse group of partner providers in the health, care, justice, housing, voluntary and emergency services, all of whom engage with adults in need
- Work has taken place with the Board's sub groups to progress the well-being and safety of the adults at risk whom they serve. It had been particularly pleasing to work with the new service user group to explore the issue of social isolation and how to tackle it as it compounds the safeguarding risks confronting vulnerable adults
- A successful event was held with voluntary sector and provider commissioned services to launch a safeguarding policy toolkit to strengthen their governance arrangements
- Four training events were held to highlight issues regarding domestic violence, as this issue has gained national prominence over the past year. A more dynamic relationship has been forged with Pentonville Prison to better understand and support the safeguarding issues and efforts in the Prison
- Having substantially completed the actions relating to the past 3 year strategy, concluding in March 2018, the Board completed a very successful consultation with Islington residents and professionals to inform its new 3 year strategy, which it agreed for the period April 2018 to March 2021
- Through on-going training and more general awareness raising people are being encouraged to raise their safeguarding concerns, and indeed the number of referrals remains high, and is increasing. Health and Care Commissioners continually regularly monitor the safeguarding practices of the range of care providers they contract with. Where incidents of concern are raised they are investigated and follow up actions monitored
- New legislation on social care for older people is in the pipeline, and is expected later in 2018
- Key achievements included, together with the Board's service user and carer sub-group, a well-attended social isolation and safeguarding event. The service user and sub-group continues to explore the relationship between the social isolation and safeguarding risks
- It was noted that the Safeguarding Board met 4 times per year, and acts as an assurance and improvement Board, rather than a performance Board
- There is good engagement with service users and last year consideration was given to social isolation and financial exploitation
- Reference was made to paragraph 3.7 of the report, and that the Board's sub-group considered two new referrals as to whether they met the criteria for a Safeguarding Adults Review under section 44 of the Care Act 2014. One of these cases did not meet the threshold and the other was progressed to conclusion
- Members noted that where the Council was responsible for Adult Social Care it could have influence on the care provided and there were more concerns where self-funded care is purchased, particularly where mental frailty is concerned
- The Board worked closely with Healthwatch, who reported concerns and it was also stated that there are regular meetings with the CQC

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- Reference was made to the recent death of a carer by a care user, and it was stated that an immediate review was instituted, however it had been ascertained that the carer had died of natural causes
- After consulting widely, the Islington Safeguarding Board has developed a new 3 year strategy, and annual plan and this has been aligned with those of the Safeguarding Adults Boards in the North Central London cluster, Enfield, Haringey, Camden and Barnet
- The Homelessness Reduction Action Plan came into force to address increasing street homelessness. Homelessness and Safeguarding are inter-related on many levels. Homelessness can be a case of self-neglect, which in certain circumstances under the Care Act, may now require a safeguarding response and homelessness can put adults with care and support needs at greater risk of abuse, neglect and exploitation
- A Member enquired as to action being taken in relation to modern day slavery, and it was stated that the Board were trying to extend their reach out into the community to look into instances of trafficking and modern day slavery
- It was noted that family carers can now be offered professional support
- In response to a question it was stated that work is taking place with Care UK and there is a better relationship with management to sustain the improvements

The Chair thanked James Reilly and Elaine Oxley for attending

13 **SCRUTINY TOPIC - GP SURGERIES - WITNESS EVIDENCE - VERBAL (ITEM NO. 12)**

Rebecca Kingsnorth, Islington CCG, was present at the meeting and was accompanied by Michael Clowes and Dr. John McGrath, representatives of the Islington GP Federation.

During consideration of evidence the following main points were made –

- Each of the 32 GP practices are facing challenges of growing demand, a struggling workforce, evolving care needs and ageing premises
- The 32 GP practices are small businesses under contract to the NHS, but with significant variances – these include staff loyalty, resilience, efficiency, modernity, continuity, capability, scale, quality, patients, ambition, ethos, culture and care
- Islington GP Federation is a private limited company owned by all Islington GP's and was formed in January 2017
- The Islington GP Federation operates exclusively under NHS contracts, and related contracts such as Health Education England
- The Islington GP Federation will employ approx. 200 staff this month
- Islington GP Federation was set up to ensure Islington registered patients have free and equitable service, access to good, safe, value for money primary care, and to maintain financial viability of the federation, in order to achieve its primary goal
- Islington GP Federation builds GP scale capability and culture, enables GP resilience in Islington, and delivers new models of care
- At borough level there is integrated access e.g. i Hubs, GP retention schemes, variability reduction e.g. diabetes, finance, IG, QI, analytics resource and access to all patient records for direct care
- There are locality CHINS – locality-based preventative MDT's, multi-agency partnerships, technology-driven risk stratification, health and care social prescribing, and strong governance and leadership

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- All initiatives are founded on a bottom up design, QI methodologies, and good enough technology
- GP networks and neighbourhoods – there are 8 Network ambassadors, 8 practice based pharmacists, shared estate and workforce, 8 GP mentors, 8 MOT chronic groups, and patient and public participation
- GP practices require IG support, back office support, technology and tools, practice rescue and turnaround, clinical and administrative training, and GP retention initiatives
- Islington GP Federation presents a unified voice, promotes trust, a willingness to try, dependability, support and hope
- The Islington GP Federation was the NHS70 Parliamentary Award winner for Healthier Communities for showing a really proactive approach to assessing the health needs of the area they serve, including some of the hardest to reach communities, and working together with partners to put in place targeted programmes, which make a real difference to peoples' health and well-being
- It was noted that there is a national shortage of flu vaccine and that the Islington GP Federation had made a successful bid for Home Based vaccinations, and this will enable Whittington Health and District Nurses to do other checks, such as blood pressure checks at the same time
- It was noted that the Islington GP Federation felt that Islington is well placed to meet future challenges, and the iHUB and walk in centre offers improved the service to residents
- It was noted that the Federation was a limited company but funded through contracts, the principal ones being ENT, Gynaecology, and i HUBS
- The GP Federation seeks to co-ordinate the funding and best use of resources to support local GP's and to establish and to provide models of care, including preventative care, with partners
- The GP Federation stated that the risk is that it tries to do too many things and they were looking for sustainability, In addition, comparative data was being looked at in relation to appointments and how they are recorded and GP practices can bid for funding on an evidence based basis

The Chair thanked Mike Clowes, Dr. John McGrath, Imogen Bloor and Rebecca Kingsnorth for attending the meeting

14 **WORK PROGRAMME 2018/19 (ITEM NO. 13)**

RESOLVED:

That the report be noted

MEETING CLOSED AT 10.05 P.M.

Chair