

MINUTES OF THE MEETING OF THE HEALTH & ADULT SOCIAL CARE SCRUTINY PANEL HELD ON THURSDAY, 18TH NOVEMBER, 2021

MEMBERS: Councillors Kate Anolue, Birsen Demirel, Chris Dey, Alessandro Georgiou, Christine Hamilton (Deputy Mayor) and Derek Levy

Officers: Bindi Nagra (Director of Health & Adult Social Care), Suzanne Connolly (Governance Officer)

Also Attending: Deborah McBeal (Director of Integration NCL CCG), Laura Andrews (Senior Engagement Manager NCL CCG), Peter Rhodes (Assistance Director of Operations for North West & South West London)

1. WELCOME & APOLOGIES

Cllr Derek Levy (Chair) welcomed all attendees to the meeting.

Apologies for lateness were received from Cllr Birsen Demirel.

The agenda was taken in the order of The London Ambulance Service, Reconfiguration of the NHS and the Impact on Local Services, Pressures in General Practice and Who Owns General Practice.

2. DECLARATIONS OF INTEREST

There were no declarations of interest registered in relation to any items on the agenda.

3. MINUTES OF THE PREVIOUS MEETING

The minutes of the Health & Adult Social Care Scrutiny Panel held on the 16 September 2021 were agreed.

4. PRESSURES IN GENERAL PRACTICE & WHO OWNS GENERAL PRACTICE

Cllr Derek Levy introduced the item which was to discuss potential lines of enquiry for the next panel meeting in January. This would be the first item on the agenda.

1. Cllr Christine Hamilton advised that the Joint Health & Adult Social Care Scrutiny Panel had asked this panel to look at the issues with how GP contracts were awarded and managed, following the JHOSC item on AT Medics.

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2. It was noted that contracts should be scrutinised.
3. **ACTION:** The panel will discuss making a request to the CCG to provide a report on how GP contracts are managed in NCL.
4. **ACTION:** North Central London NHS CCG contracts team to be invited to the meeting to update on how GP contracts are managed.
5. Cllr Christine Hamilton shared a positive experience of a visit to a new GP Health Centre where a small group of GPs had come together to “make a difference”. Three Medicus practices: Curzon Avenue, Dean House and Green Street, have moved to the new building. The catchment area remains the same as it was for the practices’ former locations. Bringing the practices together into a new building in the Alma Road estate will also help local GPs to provide services to the additional population that will move into the area as part of the Alma Road regeneration project, which is estimated to be about 4,000 new residents.

5. RECONFIGURATION OF THE NHS & THE IMPACT ON LOCAL SERVICES

Deborah McBeal provided an update to the panel, highlighting the following key points:

1. This was the start of a journey towards building an Integrated Care Systems (ICSs) across NCL, with a borough based integrated care partnership by April 2022.
2. The benefits for residents were that all stakeholders would be brought together to work collaboratively having a collective responsibility for outcomes. An individual would be looked at holistically.

In response, members of the panel commented as follows:

1. Cllr Derek Levy raised concerns that April was not far away and would everything be ready and in place. Deborah advised it would be a transition period and the main change was that the CCG would no longer exist. Joint meetings, groups and partnerships were already in place.
2. Cllr Alessandro Georgiou asked if the changes would allow the local authority to be more involved. Deborah McBeal believed they would and hoped for a positive relationship.
3. Bindi felt the changes would bring improvement as the responsibility of the nation’s health would now be shared.
4. Cllr Christine Hamilton was not clear how the changes were going to be delivered and was concerned about Enfield in particular. Members were advised to look at the governance charts in the slide deck. **ACTION:** It was suggested that a basic chart be produced demonstrating responsibilities, decision making and future plans.
5. Deborah McBeal stated that with the new system, which includes the five boroughs, no money could be taken away, but instead new funding goes where it is needed. Public Health have an input, and all must agree how the money is deployed. All services were under intense pressure and gaps in the workforce were acknowledged.
6. Cllr Kate Anolue highlighted issues around the CCG and the pressure on staff on the “shop floor” who are also working through organisational change. She was concerned about the recruitment to top jobs with high salaries, as well as staff that

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did not have the Covid-19 vaccination and have the potential to lose their jobs in 2022.

7. Cllr Chris Dey stated that joined up working would be welcomed, alongside a personal responsibility for individuals to keep themselves healthy. He extended praise to all NHS services throughout the pandemic.

8. Deborah McBeal advised that she felt the changes could make a really positive difference if stakeholders and our communities and residents worked in partnership as intended by the changes. The main concern was the current pressure on the health and care system and the need for space to work in partnership. Bindi added that all stakeholders must engage and take responsibility.

In conclusion, the panel requested regular updates, including copies of the minutes from the ICS Group. **ACTION** for Deborah McBeal to attend regularly to update. It was noted that members requested that they should be on boards such as these.

6. THE LONDON AMBULANCE SERVICE

Cllr Derek Levy introduced the item stating that it was not necessarily to discuss the report provided within the agenda pack, but more to look at the closure of ambulance stations and the introduction of hubs. It was particularly important to think about the public's perception of this change.

Peter Rhodes, Assistance Director of Operations for North West and South West London, was in attendance to provide a detailed update.

1. Covid-19 had caused a significant impact on the start and finish locations of ambulances.
2. There were currently 3 LAS stations covering the borough. The station in Ponders End was no longer fit for purpose and was used at a standby station. LAS no longer operate from the Bounds Green station.
3. The broader vision (5-10 years) was to consolidate current stations into larger, more fit for purpose stations. A great deal of work would be carried out before any changes happen; a clear strategy was in place. It was unclear when the changes would be implemented but it was not imminent.
4. The borough is long and narrow, and the hospital is not ideally located. Ambulances are usually dispatched from hospitals, including Barnet and North Middlesex. Patients are then taken to the most appropriate hospital which is normally their closest and not based on where the ambulance has come from. This is subject to no long queues in which case they will be taken to another. More serious cases will be sent to hospitals such as the Royal Free and UCLH.

In response, panel members commented as follows:

1. Cllr Christine Hamilton asked how the LAS had been coping and what help was needed. Peter Rhodes responded stating that the Covid-19 waves had been challenging. Since lockdown eased, 999 calls were extremely high at around 350-400 per hour. LAS were meeting the Category 1 target of 7 minutes however Category 2 response times were much longer than the 20-minute target. The answer would be more ambulances however there were no vehicles or staff available.
2. Cllr Kate Anolue queried the impact on staff when patients were delayed and getting increasingly ill while on the ambulance. Peter Rhodes stated that fortunately

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this had not happened often in the area however an experienced clinician was always available. The main reason for delays was ambulances in the wrong places, for example out of area.

3. Cllr Alessandro Georgiou stated that residents had raised concerns that the 111 service caused issues for ambulances due to 111 staff not being medically trained. Peter Rhodes advised that 111 and 999 impact each other and it was often difficult to triage over the phone, however the services work together to find the right pathway. A clinician should review all ambulance dispatch requests before the ambulance is sent.

4. Cllr Alessandro Georgiou asked if staff had been affected by repeated Covid-19 infections. Peter said yes but the vaccination programme had helped. The effects of isolation rules had impacted more as staff were unavailable to work. It had been a very stressful time, particularly the first wave, with some staff being psychologically affected.

5. Cllr Derek Levy asked for Peter's opinion on the proposed LAS changes. Peter responded stating he felt it would enhance it. Deborah McBeal added that reconfigurations could be quite hard, but evidence suggests better outcomes for patients.

6. Cllr Chris Dey asked how road blockages and LTNs affected ambulances. Peter stated it does impact them causing some delays.

7. Deborah McBeal highlighted that the LAS worked hard to treat patients at scene/home to avoid conveyances to hospital.

8. The panel agreed that the perception of LAS was different to the reality.

Peter Rhodes was thanked for his attendance and input.

7. DATE OF NEXT MEETING

The future meeting dates were noted and agreed.

The meeting ended at Time Not Specified.