

## MINUTES OF THE MEETING OF THE HEALTH & ADULT SOCIAL CARE SCRUTINY PANEL HELD ON TUESDAY, 6TH DECEMBER, 2022

**MEMBERS:** Councillors James Hockney, Andy Milne, Nicki Adeleke, Kate Anolue, Nia Stevens and Emma Supple

**Officers:** Dudu Sher-Arami (Public Health Director), Doug Wilson (Head of Strategy and Service Development), Jon Newton (Head of Service, Integrated Care OP&PD, Adult Social Services) and Eleanor Brown (Head of Transformation, Complaints and Access to Information, Resources Department), Marie Lowe (Governance and Scrutiny Officer).

**Also Attending:** Councillor Nesil Caliskan (Leader of the Council), Deborah McBeal (Director of Integration, Enfield Borough Directorate, NHS North Central London Integrated Care Board) and Stephen Wells (Head of Enfield Borough Partnership Programme), Natalie Fox (Deputy Chief Executive and Chief Operating Officer, BEH and C&I), Josephine Carroll (Managing Director, BEH, Enfield Mental Health Division) and Parmjit Rai (Managing Director, BEH-CAMHS Division), Nusrath Jaku

### 1. WELCOME & APOLOGIES

The Chair welcomed everyone to the meeting, particularly the representatives from Council's partners from the NHS in relation to the following items on the agenda.

Item 4 - Deborah McBeal, Director of Integration, Enfield Borough Directorate, NHS North Central London Integrated Care Board and Stephen Wells, Head of Enfield Borough Partnership Programme.

Item 5 - Natalie Fox, Deputy Chief Executive and Chief Operating Officer, BEH and C&I, Josephine Carroll, Managing Director, BEH, Enfield Mental Health Division and Parmjit Rai, Managing Director, BEH-CAMHS Division.

Cllr Nesil Caliskan, Leader of the Council, was representing Cllr Alev Cazimoglu, Cabinet Member for Health and Social Care, who had given her apologies as she is unable to be present at the meeting.

Officers – Dudu Sher-Arami, Public Health Director, Doug Wilson, Head of Strategy and Service Development, Jon Newton, Head of Service, Integrated Care OP&PD, Adult Social Services and Eleanor Brown, Head of Transformation, Complaints and Access to Information, Resources Department.

Apologies for absence had been received from Cllr Eylem Yuruk.

### 2. DECLARATIONS OF INTEREST

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

**3. MINUTES OF THE PREVIOUS MEETING**

The minutes of the previous meeting held on 15 September 2022 were **AGREED**.

**4. NORTH CENTRAL LONDON INTEGRATED CARE SYSTEMS AND BOROUGH PARTNERSHIP PROGRAMME UPDATE**

Deborah McBeal, Director of Integration, Enfield Borough Directorate, NHS North Central London Integrated Care Board and Stephen Wells, Head of Enfield Borough Partnership Programme spoke to the presentation which provided an update on the North Central London Integrated Care Systems and Borough Partnership Programme and impact on the London Borough of Enfield.

During the discussion which ensued and, in response to questions from the Members of the Panel, the following points were made and addressed.

The Chair expressed the view that, as he was not aware that this was part of the current governance structure, he would like to see greater involvement of elected representatives on the Integrated Care Board (ICB).

An active partnership working group were working to create a detailed plan to increase the take up of immunisations. This follows the reduction in the take up of all immunisations, but particularly polio and tuberculosis (TB). The polio virus had been recently found in a sewage works plant and was an area of concern. The plan would include an approach to work with various community groups, including schools and voluntary sector organisations, and to deliver a positive message about the benefits of immunisations.

There had been an increase in the number of reported cases of Strep A, a seasonal occurrence, which were higher this season and there were no vaccines available. The focus of the proactive work had been to inform and advise schools and partnership organisations of the preventative measures to take. Individuals with symptoms were excluded from school for 24 hours. The good relationships built up with all schools across the Borough throughout the Covid pandemic had been maintained, this had resulted in a good response from schools to the advice issued.

It was essential that work continued on smoking cessation programmes, as smoking, together with obesity, had a significant impact on health. New ways of reaching out and encouraging individuals to join the cessation programme had been found, for example there was online support through the telephone portal. Residents were made aware of the schemes available to help them to stop smoking. The partnership was working with the Council to bring together the offer in a coordinated manner.

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Members acknowledged there was a huge need and work to be done across the Borough, principally around smoking (including vaping) but also adult social care and care homes. With regards to vaping the Council was responsible for the licensing of premises and the prevalence of fast-food restaurants which were contributory factors to smoking and obesity.

Work was currently underway to identify options and alternative ways of integrated working to reduce pressure on the stretched health services and to provide better outcomes for residents now and in the future.

Members welcomed the information that a further report would be brought to the Panel on the future development of Integrated Teams and the service offer available to residents across the Borough. The NCL was working to improve the long-term conditions with GPs, who were working over and above their contractual arrangements.

**ACTION**

At the invitation of the Chair, Nusrath Jaku, Programme Manager, One-to-One (Enfield) raised concerns regarding patients being able to access GP services, when necessary, in a timely manner. Many patients felt frustration when trying to telephone the surgery at 8.30am to make an appointment for that day in the prescribed manner only to be told when eventually getting through to the receptionist at 9am that there were no appointments left for that day as the doctors were fully booked. On occasion the telephone had not been answered.

The Panel asked that GP representation be invited to attend the meeting when it considered access to primary care.

**ACTION**

The Director of Integration, Enfield Borough Directorate, NHS North Central London Integrated Care Board recognised the difficulties experienced by patients in securing an appointment with a GP and assured the Panel that GPs were working harder than ever and that patients had alternative routes to access health care, such as urgent care centres, dialling 111. Vaccine nurses were now located within GP surgeries. The NHS were working hard with GPs and Primary Care to address the pressure faced by the NHS at this current time, where demand was greater than capacity.

A core aim of the partnership was to address health inequalities. The Public Health Director chaired the sub-group of the Inequalities Development Group, which had a wider membership, including the voluntary sector stakeholders. There were a number of factors which affected the delivery of services to residents. The recruitment and retention of staff and staff shortages had been a catalyst of the identification of new ways of working and expansion of job roles, such as pharmacists, who could now administer injections and prescribe some types of medication in order to take the pressure off GPs.

Work continued regarding the hard-to-reach communities. There was an active programme in Enfield to address food insecurities. The Council was working with the Enfield Food Alliance, a collaborative forum which involved

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40 organisations. A further report for consultation would be presented to the Panel for approval, which would detail the strategic approach for the draft delivery food action plan involving the strategic groups. **ACTION**

Officers were working with the voluntary sector organisations to ensure that information was disseminated in an appropriate way to the communities in Enfield. Communication Champions were also working with Enfield Voluntary Action Faith Forum to ensure information was available and accessible by residents with English as a second language. **ACTION**

**AGREED** that:

1. The update on the North Central London Integrated Care Systems and Borough Partnership Programme and impact on the London Borough of Enfield be noted;
2. There should be greater involvement of elected representatives from the participant Local Authorities on the Integrated Care Board (ICB); and
3. GP representation be invited to attend the meeting when it considered access to primary care. **ACTION**

### 5. ENFIELD MENTAL HEALTH COMMUNITY TRANSFORMATION

Natalie Fox - Deputy Chief Executive and Chief Operating Officer, BEH and C&I, Josephine Carroll - Managing Director, BEH- Enfield Mental Health Division and Parmjit Rai - Managing Director, BEH-CAMHS Division presented the details the mental health transformations and reforms affecting the London Borough of Enfield.

Members noted and welcomed that there had been significant Government investment in mental health provision, which would enable training in and delivery of mental health services. Members supported the funding of the mental health services as the mental health of one person could destroy families.

Members also noted that there was an overlap in the provision of drug and alcohol services with mental health services. Unless funding was available specifically for the provision of mental health services there would be an unnecessary increase in patients attending other areas of the NHS, such as the Accident and Emergency Departments, which in turn impacted on other emergency services such as the Police.

At the invitation of the Chair, Nusrath Jaku, Programme Manager, One-to-One (Enfield) asked that the self-referral pathways for adults with autism through GPs be made clearer and that information for peer support groups working with adults waiting for a diagnosis and employers be made readily available. Voluntary organisations were working with employers to improve their

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understanding of the needs and support for employees with autism to prevent loss of employment, which in turn may lead to mental health issues.

The Programme Manager also asked that young adults with autism be encouraged to speak out, through engagement with the voluntary sector and other organisations and that their voices be heard and listened to.

The Public Health Director reported that Enfield Borough had a very low suicide rate, however during economic crises and associated pressures suicides tended to increase. The Panel Members endorsed the approach collaborative working to prevent suicides, for early intervention and to provide mental health services to patients and asked that a report detailing information regarding the number of suicides and contributory factors in the Borough be provided at a future meeting of the Panel. **ACTION**

The Deputy Chief Executive and Chief Operating Officer reported that the pathways of the adult and children were being brought together and the NHS were setting up resources so that residents did not have to wait and were supported.

The Scrutiny Panel requested that the Council's Communications Team arrange a communications update on the mental health self-referral pathways scheme including GPs and how to access the Crisis Houses and the Crisis Café. **ACTION**

At the request of Members, clarification of the acronyms contained in the presentation from the NHS would be circulated to the Scrutiny Panel and that in future presentations would be accompanied with a glossary of terms.

**AGREED** that:

1. The presentation of the Community Transformation programme to deliver mental and physical health support to more people in the community be noted; and
2. The Council's Communications Team arrange a communications update on the mental health self-referral pathways scheme including GPs and how to access the Crisis Houses and the Crisis Café.

### **6. ENFIELD COUNCIL ADULT SOCIAL CARE STATUTORY COMPLAINTS ANNUAL REPORT 2021-22**

Eleanor Brown, Head of Transformation, Complaints and Access to Information, introduced the report which set out the key findings from the Adult Social Care Statutory Complaints Annual Report 2021-22 and focused on the nature of complaints and learning they provided to improve services for residents in the future.

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The Head of Transformation, Complaints and Access to Information together with Jon Newton, Head of Service, Integrated Care OP&PD, Adult Social Services responded to questions from Members.

There were a number of reasons that, of the 17 complaints, referred by complainants to the LGSOC (Local Government and Social Care Ombudsman), 10 cases had been dismissed. The LGSCO could choose not to investigate a complaint for a variety of reasons, such as out of time or there was no case to answer.

The Chair and Members of the Panel, together with the Leader commended the staff in the Adult Social Care Department for their work and noted that during 2021/22, Enfield Council received 48 Adult Social Care complaints, representing 1% of the total number of contacts during that year.

**AGREED** that the findings and improvement actions included in the Enfield Council Adult Social Care Statutory Complaints Annual Report 2021-22 be **NOTED**.

### **7. WORK PROGRAMME 2022/23**

**AGREED** that the work programme for 2022/23 be **NOTED**.

### **8. DATE OF NEXT MEETING**

**NOTED** that the dates of the next scheduled meetings of the Panel were 19 January 2023 and 8 March 2023 at the Civic Centre.

The meeting ended at 9.40 pm.