

Decisions of the Health Overview and Scrutiny Committee

28 July 2021

Members Present:-

Cllr Alison Cornelius (Chairman)
Cllr Linda Freedman (Vice Chairman)
Cllr Golnar Bokaei
Cllr Saira Don
Cllr Felix Byers
Cllr Alison Moore
Cllr Anne Hutton
Cllr Geof Cooke

Apologies for Absence

Councillor Lisa Rutter

1. MINUTES (Agenda Item 1):

Corrections to the Minutes of the meeting held on the 19 May 2021:

None.

Matters arising from the Minutes of the meeting held on the 19 May 2021:

Agenda Item 9, Page 5 of the Minutes - Childhood Inoculation and Birth Registration: There was a question regarding how Children's Services obtain data on birth registrations. The Governance Officer read out a response from Debra Davies, Early Years and Primary Standards Lead, as follows: *"We plan our numbers based on GLA data. The delay in birth registrations will not come through to us yet within this data so it is not an issue. By the time we get this, the registrations should be up to date. We also get all of the new birth data. If we noticed a significant decrease in this then we would monitor it and may look at using this for targeted planning."*

Debra advised that any further questions on the topic could be addressed to her directly.

Agenda Item 10, Page 8 of the Minutes – NHS Trust Quality Accounts 2020/21 RFL London NHS Foundation Trust Quality Account: *'A member asked whether Jane Hawdon would kindly send the Committee the plans for dementia care from the new Nurse Consultant, both during the pandemic and in the future'.*

The Chairman advised that these had yet to be received and notified the Committee that this would be followed up and circulated to members.

RESOLVED that the committee approved the Minutes of the meeting held on 19 May as an accurate record.

2. ABSENCE OF MEMBERS (Agenda Item 2):

Councillor Rutter sent apologies and was substituted by Councillor Byers.

3. DECLARATION OF MEMBERS' INTERESTS (Agenda Item 3):

None.

4. REPORT OF THE MONITORING OFFICER (Agenda Item 4):

None.

5. PUBLIC QUESTION TIME (IF ANY) (Agenda Item 5):

None.

6. MEMBERS' ITEMS (IF ANY) (Agenda Item 6):

None.

7. MINUTES OF THE NORTH CENTRAL SECTOR LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (Agenda Item 7):

The Minutes of the last meeting of the North Central Sector London Joint Health Overview and Scrutiny Committee had not yet to be approved.

8. CORONAVIRUS AND VACCINATION UPDATE (Agenda Item 8):

The Chairman invited the following to the Table:

- Dr Tamara Djuretic, Director of Public Health, London Borough of Barnet

Dr Djuretic provided an update on the coronavirus cases and vaccination uptake within Barnet. She advised the Committee that there had been a decrease in the number of infections since 14 July. Although she was unable to provide specific reasons for the decrease in infections, some evidence suggested this was due to behavioural changes. The preceding weeks had included the Euro football tournament, Wimbledon and the mixing of children in school which were all likely to have increased the spread of infection.

Dr Djuretic informed the Committee that there had been an increase in hospital admissions, however these numbers were lower than those from the first peak. There had been a slight increase in cases within Care Homes and the Local Authority was working with the care sector closely to monitor this.

Dr Djuretic advised that the vaccination uptake within Barnet was going really well, with 85-87% of over 30's having been vaccinated. The younger age group had a lower number of uptakes for the vaccination. The Local Authority was continuing to promote the vaccination via various communication methods to encourage as many people as

possible to take the vaccine. The NHS had also situated a vaccine bus at Brent Cross Shopping Centre to make it easier for people to get vaccinated, with 250 people attending.

Phase 3 of the Vaccine Programme was due to commence on 6 September, with a booster vaccination for all those over 80. The planning and preparation for the boosters was complex as it was not yet known which vaccination would be used and therefore quantities could not yet be ordered, however as much planning as possible was taking place.

The Chairman enquired as to whether any of the people who had been admitted to hospital with coronavirus had already been vaccinated. Dr Djuretic advised that around two-thirds of those admitted had not been vaccinated and a third had been. The vaccination was not 100% effective against catching coronavirus, however the symptoms for those that had been vaccinated were usually much milder. Members also asked if the age profile of those being admitted had changed. Dr Djuretic replied that the majority of patients were now under the age of 40 and unvaccinated, but the mortality rate for this age group was still very small.

A Member raised concerns around refugees being unable to receive the vaccine. Dr Djuretic said that dedicated vaccination sessions had been arranged at Brent Cross Holiday Inn for asylum seekers, as well as at some Refugee Centres. She also advised that everyone within the UK had a right to the vaccination, even if they were not registered with a GP. Members suggested this should be more widely promoted, as there were groups of people that often felt anxious about coming forward, which might prevent them from taking up the offer of a vaccine.

Dr Djuretic said that there was no evidence that coronavirus had disproportionately affected any ethnic minority groups in Barnet. However, the pandemic had highlighted disproportionality in general regarding the health of some minority groups and there would be more focus moving forward on tackling this.

RESOLVED that the Committee noted the verbal update.

9. BARNET HEALTHWATCH UPDATE (Agenda Item 9):

A representative from Barnet Healthwatch was not able to attend this meeting.

10. ALTERNATIVE PROVIDER MEDICAL SERVICES (APMS) CRICKLEWOOD UPDATE (Agenda Item 10):

The Chairman invited the following to the meeting:

- Vanessa Piper, Assistant Director of Primary Care, North Central London, Primary Care and Commissioning Contracting Team.
- Colette Wood, Director of Integration, North Central London Clinical Commissioning Group (NCL CCG).
- Ian Sabini, Managing Consult, Gbpartnerships.

The Chairman read out a statement that had been provided regarding the Alternative Provider Medical Service (APMS) and the commissioning arrangements for the continuity of service provision for patients registered with the Practice. The procurement process had now been completed, with Pnceat Medical Ltd being the successful bidder.

The Chairman enquired as to who would be funding the remodelling of the commercial building at 10 Oaklands Road, Cricklewood, NW2 6DH. Vanessa Piper informed the Committee that discussions were being held in relation to the capital costs, however the current proposal was for the cost of the alterations to be paid for by the landlord. The premises mobilisation was due to be completed before the end of the year in order to enable the Practice to operate from the new site.

Members asked several questions regarding the shareholders of the company, including who the other shareholders were, how many services they currently run and how long they had been running these services? Ms Piper advised that Mr Sree Agarwal was the Chief Operating Officer and held the main Contract for the services. Pnceat Medical Ltd currently operate GP Practices in Northwest and Southwest London. She was unable to provide answers to the other questions but agreed to get back to the Chairman. She advised that other aspects of the contract would all be thoroughly checked and scrutinised through the procurement process. She explained that robust performance and quality management had to be in place and that all those interested in the procurement had had to complete a broad range of questions as part of the process. Ms Piper also explained that the CCG would monitor the delivery of the contract using KPI's every quarter and a quality performance review would be conducted annually.

Members asked for reassurance that the arrangements would be robust and quality services would be provided long-term. Members stressed that patients had been through a turbulent time and required good quality services, especially in an area where there is a particular public health need. The demographic of the GP Practice would be different to other areas, with a wide range of health challenges and Members wanted reassurance that these could be delivered. Officers advised that the demographic and needs of the patients had been clearly indicated within the tender documentation and that all bidders for the contract had been required to demonstrate they could meet the required standard of health provision.

Colette Wood assured the Committee that they understood the concerns of Members and that a thorough due diligence process would be followed. Ms Wood said the GP Federation would ensure all governance processes were correctly adhered to and that the Contract would be robust and clear, including a break clause every five years.

Members asked what type of questions were asked during the procurement process. Officers advised that they did not have this to hand but agreed to circulate the range of questions to the Committee. However, they assured the Committee that the questions were very stringent and addressed all the concerns that had been raised during this meeting.

Ms Piper advised that the North Central London Clinical Commissioning Group (NCL CCG) would aim to write to patients and shareholders in September 2021, once dates

for the change of provider and relocation of the GP Practice to the new site were confirmed.

RESOLVED that the Committee:

- **noted the written report and verbal update on the Alternative Provider Medical Service (APMS) Cricklewood.**
- **would receive the information requested by Members.**

11. SUICIDE PREVENTION STRATEGY 2021-2025 (Agenda Item 11):

The Chairman invited the following to the table:

- Dr Elliott Roy-Highley, Public Health Registrar

Dr Roy-Highley introduced the report which outlined the strategy aimed at reducing the number of Barnet residents lost to suicide each year. During the discussion that followed, Members emphasised the importance of listening services and asked whether there were any local services in Barnet which provided this or whether only national services were promoted. Dr Roy-Highley responded that there were no specific Barnet listening services, however all national services, such as the Samaritans, were promoted as organisations which residents could contact for help.

Members raised the requirement for the Suicide Strategy to be holistic and to ensure that young people were supported from an early age where there are any signs of suicidal feelings or thoughts. Dr Roy-Highley explained that this was the approach that would be taken and that services across the Council would be working together to ensure the Strategy supported all those at risk. The Strategy had been co-produced with the multi-agency Barnet Suicide Prevention Partnership to ensure it met the needs of residents on both a national and local level. The intention was for the Strategy to be insight-led, informed by evidence of what works, as well as practical, achievable and effective. Dr Roy-Highley said the long-term strategic approach would ensure that the Strategy had the greatest impact on suicide prevention.

Members asked questions about how and when they should be making referrals to Mental Health Services if they were concerned about the wellbeing of a resident. Dr Roy-Highley explained that each individual case would be different but encouraged Members to complete the online training course available on the topic, in order to further their understanding of mental health and suicide prevention.

Members noted that mental health and suicide was a complex subject and that often those who needed support the most were reluctant to seek help. Dr Roy-Highley advised that there were many online services available which this demographic of individuals often felt more comfortable using, for example QWELL. Members also asked questions regarding the awareness and training of medical professionals. He explained that training was provided to all Primary Care providers, with those specifically working in the medical professions given training on suicide interventions.

Members asked whether austerity had impacted on the rate of suicide. Dr Roy-Highley advised that the data on suicide was not yet available for 2020 but that the 2019 data

had demonstrated there had been a slight decrease in the number of deaths by suicide in Barnet. However, nationally the picture was different, with no reduction in suicide rates being recorded.

Members asked about the level of support available to families, particularly parents of children at risk of suicide or having attempted suicide. Dr Roy-Highley explained that the resilient schools programme was working directly with children and parents to train them on both awareness of the topic and in helping to reduce the stigma surrounding self-harm and suicidal thoughts. The purpose of the training was to encourage those struggling with suicidal thoughts or self-harm to seek the medical help needed. Members also enquired as to what services were available for those that had attempted suicide. The Crisis Team or A&E was the most appropriate place to seek help immediately following any suicide attempt. Following treatment at one of these settings, Mental Health Services would be provided in the longer term to assist individuals with their recovery.

The Chairman asked whether any recommendations had been incorporated into the Strategy after it had been presented to the Health and Wellbeing Board. Dr Roy-Highley responded that the main recommendation of the Board had been to work very closely with Children and Family Services, with a meeting being set up with the Senior Leadership Team within this Directorate to ensure the Strategy met the needs of young people and families and was also integrated into existing strategies.

Members requested an update on the Suicide Strategy be brought back to the Committee in a year's time. It was agreed that this item would be added to the Committee's Forward Work Programme.

RESOLVED that the Committee:

- **discussed and noted the London Borough of Barnet Suicide Prevention Strategy 2021-2025 and verbal update.**
- **continue to receive an annual update on suicide prevention and progress against the 2021-2023 Action Plan.**
- **receive the 2023-25 Action Plan in 2023.**

12. HEALTH OVERVIEW AND SCRUTINY FORWARD WORK PROGRAMME (Agenda Item 12):

12 October 2021 Meeting:

- Childhood Inoculation.
- Barnet Healthwatch Report and Update.
- Update on Coronavirus, Long Covid and the backlog of Treatments/Operations.

7 December 2021 Meeting:

- Update on the Flu Vaccination and Coronavirus Booster.
- Mid-year Quality Accounts.
- Childhood Inoculation and Birth Registration.

To Be Allocated:

Early 2022 - Children and Young People's Oral Health in Barnet.

Mid 2022 - Suicide Prevention Strategy Update

RESOLVED that the Committee noted the Forward Work Programme.

13. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 13):

None.

The meeting finished at 9.45pm