



CITY OF WESTMINSTER

MINUTES

Vulnerable Adults, Health and Communities Policy and Scrutiny Committee

MINUTES OF PROCEEDINGS

Minutes of a meeting of the **Vulnerable Adults, Health and Communities Policy and Scrutiny Committee** held on **Thursday 17th October, 2024**, Rooms 18.01 - 18.03 - 18th Floor, 64 Victoria Street, London, SW1E 6QP.

Members Present: Councillors Dean, Fisher, Galley, Hook, McAllister (Chair), Short and Taouzzale

Also Present: Councillors Butler Thalassis (Cabinet Member for Adult Social Care, Public Health and Voluntary Sector) and Sanquest (Cabinet Member for Communities), Gareth Wall (Bi-Borough Director of Integrated Commissioning), Seth Mills (Bi-Borough Director of Learning Disabilities and Provider Services), Serena Simon (Director of Communities), Paul Perkins (Community Hubs Programme Lead) and Linda Hunting (Policy and Scrutiny Advisor)

External Guests: Joe Nguyen (Borough Director, Westminster, NW London Integrated Care Board), Dr. Jan Maniera (Borough Medical Director, Westminster, NWL Integrated Care Board & South Westminster PCN Clinical Director), Dr. Rishi Chopra (GP Partner, Paddington Green Health Centre, Clinical Director, Regent Health Primary Care Network, Chair - Healthcare Central London Ltd) and Cleo Chalk (Healthwatch Service Manager)

1 MEMBERSHIP

- 1.1 The Committee noted that Councillor Paul Fisher was substituting for Councillor Robert Eagleton.

2 DECLARATIONS OF INTEREST

- 2.1 The Committee noted there were no declarations of interest.

3 MINUTES

- 3.1 The Committee approved the minutes of its meeting held on 16 July 2024.

RESOLVED:

3.2 That the minutes of the meeting held on 16 July 2024 be signed by the Chair as a correct record of proceedings.

4 WORK PROGRAMME

4.1 The Committee noted the work programme for the 2024-25 municipal year and received an overview of the forthcoming plans.

4.2 The Committee noted the date of the mid-year work programming meeting, 22 October 2024 to discuss the work of the Committee for the remainder of the year.

4.3 The Committee discussed its tracker and importance of deadlines.

4.4 It was noted by the Committee that they were waiting for responses from the NWL ICB from the 16 July meeting that related to the Community Pharmacy Provision item and a report was also to be published by Healthwatch.

4.5 The Committee raised questions about the Reablement Programme and Aids and Adaptations briefings that were circulated outside of Committee and noted there were topics they were interested in further.

5 DEVELOPMENT OF PRIMARY CARE ACCESS AND INTEGRATED NEIGHBOURHOOD TEAMS IN CENTRAL LONDON

5.1 The Chair welcomed Joe Nguyen (Borough Director, Westminster, NW London Integrated Care Board) and Dr. Jan Maniera (Borough Medical Director, Westminster, NWL Integrated Care Board & South Westminster PCN Clinical Director) to introduce the report on the development of Primary Care access in Westminster. The Borough Director, Westminster, Borough Medical Director Westminster, Dr. Rishi Chopra (GP Partner, Paddington Green Health Centre, Clinical Director, Regent Health Primary Care Network, and Chair, Healthcare Central London Ltd) and Cleo Chalk (Healthwatch Service Manager) responded to questions on the following topics:

- The efficiency of the new proposals in relation to patient access
- Ensuring that residents can access care they require digitally
- Proactive preventative treatment, including the use of digital access as a preventative tool.
- The patient numbers shown in the report and balancing the number of patients at each practice and the number of doctors available in each practice.
- How Enhanced Access and Additional Access will operate and the risk of practices not following the proposed models, such as only using the PATCH's model for patient access.
- The enforcement power that Healthcare Central London (HCL) has regarding practices following the proposed models of access.
- How it will be ensured that the models will be easy for residents to understand.
- Reaching hard to reach parts of the community

- How patient privacy will be dealt with and who will be able to access patient information on the NHS dashboard.
- Information governance and the internal processes in place for patient safety, to include potential hacks and cyber security issues and potential breaches of privacy.
- Adult Social Care (ASC) data and how that information is used and accessed in relation to other services.
- Digital Access, how intuitive PATCHS is for patients to use, and the ratio that is expected for patients to use PATCHS compared to other forms of access.
- Cases seen in A&E due to either patient choice or a patient not being able to gain access to a GP, how 111 calls operate in practices, and what is being done to mitigate these issues and the inherent consequential strain on hospitals.
- How residents and patients with Learning Disabilities are accommodated in the new models and the training for the staff that work with Learning Disabled people and GP practices.
- Capturing the pathway data of patients that spend long waiting times in A&E because of not obtaining access to a GP, how same day emergency access care appointments work, and how GP's contact patients and refer to A&E when needed.
- Language barriers to access and how the practices engage with patients and offer support where English isn't a patients first language.
- How the Silent Sounds translation service works and the availability of transcripts for patients following a consultation using a translation service.
- Transport for patients where mobility is an issue, and they are sent to locations that are further away from their registered practice for care.
- Why the consultations and engagement numbers to date have been low, what is being done to improve the numbers, and the next steps for engaging with residents and patients.
- Using the Social Prescriber and NWL ICB's engagement with the Council and the Voluntary Sector going forward to ensure that all services and support for residents, particularly the vulnerable, are joined up and promoted.
- Models of access in other areas and how examples of good practice have been referenced in the planning, including what initiatives are at a national level.
- How regularly patient contact details are monitored in each practice.

ACTION:

- 5.2 To investigate providing transcripts for patients that required an interpreter during an appointment.

INFORMATION REQUESTS:

- 5.3 To provide the data for those patients that were not seen by a GP in a practice and treated at an A&E.
- 5.4 To provide further information to the Committee about the patient surveys.

RECOMMENDATIONS:

- 5.5 That the NWL / ICB will consider further work to be carried out to ensure that Learning Disabled residents and patients are accommodated and supported within the new Primary Care Access models.
- 5.6 That NWL ICB will consider reaching out to the Council about linking to services for residents and to aid the role of the Social Prescriber for Westminster to ensure a more joined up approach to services.
- 5.7 That the NWL / ICB continues to prioritise different ways to successfully engage with hard-to-reach patient and resident groups to help inform the design of the access models to Primary Care in each community.
- 5.8 That the NWL / ICB continues to prioritise and expand GP access for patients and residents.
- 5.9 That NWL / ICB considers transport options and access for patients between practices across Westminster.

6 COMMUNITY HUBS - DIRECTION OF TRAVEL

- 6.1 The Chair welcomed Councillor Cara Sanquest (Cabinet Member for Communities) to introduce the report on Community Hubs - Direction of Travel. The Cabinet Member, Serena Simon (Director of Communities) and Paul Perkins (Community Hubs Programme Lead) responded to questions on the following topics:
 - The parts of the community that the Community Hubs are designed to support and how to convey what is available for residents.
 - Widening communities and social networks for residents.
 - Broadening community contacts and partner provisions through voluntary sector groups, alongside the Council services.
 - Whether support around mental health needs will be a focus for the hubs.
 - The localised need in the surrounding areas of the hubs, how services are informed by this, and which services have been the most accessed.
 - The £10 million capital allocation of funding and how much has been allocated for the delivery of the programme and the four hubs outlined, such as staff time.
 - Financial implications and how the further expenditure is justified and may be used in terms of the ongoing budget.
 - The ongoing cost implications to run the hubs and how this will be allocated for each hub.
 - The amounts for the rollout of Ernest Harriss House and the Bayswater Children's Centre currently in development and the break clauses that will be set considering funding potentially not being available in the future.
 - The daily costs per site of running the two mini hubs over the summer and whether these sites are a cost-effective way of reaching residents.
 - The evaluation processes and the learning from the two mini hubs and how this will be used to determine further plans, including the use of funds.

- Duplication of services to those that already exist, including what is designed specifically for those with families, the difference between these and the community hubs, and how potential duplication is being considered in the rollout of the hub programme.
- How success of the programme will be monitored, what will be used as a measure, including, access to the hubs, resident feedback, and how other services across the Council are accessed in order to justify additional spend.
- Improving the target groups access to services to close the gap to equality, where those gaps exist and what is being done, and whether those residents are being able to access the support they need via the hubs.
- A breakdown of the available services and how these have been accessed to date by residents.
- How the impact of the contribution of health services is measured on the local areas of the hubs.
- Potential future locations for Community Hubs, whether any sites can be repurposed, and whether Community Hubs should be located near Family Hubs in the future.
- Working with the Social Prescriber and GP's in Westminster and the ongoing importance of this to the rollout of the programme.
- How the funding for the programme will be monitored, audited, and the accountability of the funds throughout the rollout.

INFORMATION REQUESTS:

- 6.2 The proportion of the £10 million capital allocation that will be used for the delivery of each hub.
- 6.3 The daily running costs per site and day for the two pilot mini hubs at Charing Cross and Victoria Library over the summer.
- 6.4 A breakdown of the services that residents have accessed to date in the pilot mini hubs at Charing Cross and Victoria Library.

RECOMMENDATIONS:

- 6.5 That the Council will continue to explore the financial investments made in each community for the hub programme against need as an ongoing process and to avoid any duplication of services for residents.
- 6.6 That the Council will be rigorous in monitoring, auditing, and the accountability of the financial expenditure for the development and expansion of the Community Hubs programme.

The Meeting ended at 9.05

CHAIR: _____

DATE _____