LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE HEALTH & ADULTS SCRUTINY SUB-COMMITTEE

HELD AT 6.30 P.M. ON MONDAY, 2 SEPTEMBER 2019

MP701 - TOWN HALL MULBERRY PLACE

Members Present:
Councillor Kahar Chowdhury (Chair)

Councillor Marc Francis (Vice-Chair)
Councillor Gabriela Salva Macallan
Councillor Denise Jones
Councillor Andrew Wood

Co-opted Members Present:

David Burbidge	Healthwatch Tower Hamlets Representative
Sue Kenten	Health & Adults Scrutiny Sub-Committee Co-optee

Other Councillors Present:
None

Apologies:

Councillor Shad Chowdhury

Others Present:

Florence Johnson	Diabetes UK

Officers Present:

Somen Banerjee	Director of Public Health
Ibrahim Khan	Diabetes Programme Lead
Chris Lovitt	Associate Director Public Health
Rushena Miah	Committee Officer- Democratic Services
Lisa Pottinger	Head of Sport & Physical Activity
Denise Radley	Corporate Director Health Adults Community
Katy Scammell	Associate Director Public Health
Ashton West	Strategy & Policy Officer HAC

1. DECLARATIONS OF DISCLOSABLE PECUNIARY INTERESTS
There were no declarations of pecuniary interests.

2. MINUTES OF THE PREVIOUS MEETING
The Committee reviewed the minutes and actions of the previous meeting held on 8 July 2019.

The following actions remained OPEN with the following comments:

HASSC 08.07.19 Item 2	*Officers to provide the Committee the Framework for the Charging Waver Panel, details of the support provided to help people avoid debt and county court judgements.* **2 Sep update:** The committee clarified that they requested the numbers of people involved and more information on the support provided prior to CCJs.
HASSC 08.07.19 Item 2	*Officers to provide the Committee with the number of people claiming Attendance Allowance and Personal Independence Payments.* **2 Sep update**: Actual numbers of people getting attendance allowance prior to and after charging requested.
HASSC 08.07.19 Item 2	*Officers to provide the Committee with the survey results from REAL.*
HASSC 08.07.19 Item 2	*Officers to provide the Committee with the financial data showing the amount being raised from charging and the amount being spent to administer charging since the inception of the charging policy.* **2 Sep update:** The Committee requested a further breakdown of figures to show where the costs of charging are coming from and the number of people paying what amounts.
HASSC 08.07.19 Item 2	*For Members to inform Officers which additional measures they wish to scrutinise.* **2 Sep update**: The Committee requested that the Lead Member attend the next meeting to discuss charging-related issues with scrutiny members.

RESOLVED:

1. The minutes of the meeting held on 8 July 2019 we approved as an accurate record and signed by the Chair.
2. For officers to follow up on open actions.

3. REPORTS FOR CONSIDERATION:

4. ADDRESSING CHILDHOOD OBESITY IN TOWER HAMLETS

The Committee received the report of Katy Scammell (Associate Director of Public Health), on addressing childhood obesity in Tower Hamlets.

Discussion following the presentation:

- Councillor Wood made an observation that physical activity was not encouraged enough in the Borough and that the borough lacked 'quality' play spaces. Officers said that there was an ongoing programme targeted at refurbishing public play spaces. Councillor Wood said he was aware of the programme but it looked to be replacing old equipment rather than reimagining the spaces.
- Members acknowledged that it was important for the council to intervene to improve young people's weight management early on as research had shown untreated childhood obesity could result in lasting irreversible damage in adulthood.
- Officers confirmed that there was not a specific programme targeted to children with special educational needs but this was something that was raised during engagement activities and some support would be included in the 2020 Action Plan.
- Public Health was funding a Healthy Families programme and a Holiday Hunger Programme.
- Members asked for clarification on why children were having six meals a day. Officers explained that community insight research had found that children were often consuming their regular meals during the day, then fast food after school, then a high calorie 'snack' at their after school faith lesson or club and then a final meal at home. They also said research needed to be conducted to find out why children felt so hungry after school.
- It was noted that Tower Hamlets was relatively late in tackling the proliferation of fast food outlets which had resulted in young people forming a habit of buying fried chicken after school. Members asked whether the council would consider financial incentives to help catering business make a switch to healthier ingredients.
- Officers said Public Health funded a healthy food scheme that worked with caterers to produce healthier food. One recommendation from the evaluation of the programme was to target the scheme at fast food outlets. Officers said they were not aware of research from other local authorities that showed financial incentives were effective but they had learned from the scheme that business could save money by changing way they prepared food and by reducing portion sizes.
- It was suggested that the uptake of fast food amongst school children could be linked to the amount of pocket money they received. A Member said that if on average a child received around £10 pocket money a week, their options were limited to fast food.
- It was noted that there was a school meals working group and discussions from the meeting would be taken back to that group.
- Officers explained that the programmes were not ready to be mapped to certain wards as they were still in the early development phase.
- It was noted that the logic models would form the basis of the action plan. Members were invited to get in touch with officers if they had further input into the action plan being developed.
- Members requested that the action plan be presented to the committee once complete.

RESOLVED:

1. To note the report.

ACTION:

1. For the Childhood Obesity Action Plan to be presented to the Committee once complete.

5. DEVELOPMENT OF A PHYSICAL ACTIVITY AND SPORT STRATEGY

The Committee received the briefing note of Lisa Pottinger (Head of Sport & Physical Activity), on the development of the Physical Activity and Sports Strategy.

- Ms Pottinger summarised the local picture and steps to be taken in the next six months. She emphasised that the new plan would work alongside existing strategies and plans such as the addressing childhood obesity action plan.
- Engagement activity had taken place with the Mayor, Lead Member, voluntary sector organisations, online and via community workshops.
- She said officers were in the process of finalising the first draft of the strategy. Key drivers behind the strategy included driving health change, shaping places and the environment and developing youth interest in sport.
- A draft of the Strategy was due to be completed in October and there would be an accompanying Action Plan alongside the strategy.

Members made the following comments:

- Cllr Andrew Wood said that the strategy did not look like a strategy document in that it did not have an executable plan with outcomes and deliverable objectives. He suggested council officers should look at the strategy documents of other London Boroughs for a comparison. Ms Pottinger explained that colleagues from Waltham Forest and Westminster Councils had consulted on the document but she would note the comment.
- A Member asked whether the strategy would emphasise the use of sport and activity in community cohesion. Officers confirmed that this would be incorporated into the strategy.
- It was confirmed that the borough employed a sports development officer whose role included providing sports provision for disabled residents.
- Members said that the GLL contract needed to be reviewed because users were reporting difficulties in accessing the system or booking swim classes.
- Members welcomed the opportunity for the strategy to come back to the Committee for comment before its formal publication. However in order to effectively scrutinise, Members requested a benchmarking exercise take place between Tower Hamlets and other neighbouring boroughs to find out levels of inactivity and how much is spent on sport

and physical activity. Officers agreed to investigate and offered that the CIPFA on sports spend could be shared.

- Members queried whether private leisure centres could be used by school groups during the daytime at reduced rates because schools had reported that their budgets were stretched in this area. Officers acknowledged that it was a challenge for schools to access facilities but schools had already been provided with school rates for provision. Officers said the new strategy could explore this but Council Members would have to provide a steer on whether they wanted provision to be completely commercial or completely subsidised which may impact council revenue.
- It was noted that there should be more water sport activities in the strategy given the location and existing facilities in the borough.
- It was noted the council paid a levy towards Lee Valley Park. Members advised that the borough was therefore entitled to use Lee Valley facilities and this should be negotiated for and included in the strategy.

RESOLVED:

1. To note the development of the Physical Activity and Sports Strategy.

ACTION:

1. Officers to provide comparative data from other London councils on physical inactivity rates and spend on physical activity and sport.
2. For the Physical Activity and Sports Strategy to come back to the Committee for review prior to its publication.

6. TYPE 2 DIABETES - UPDATE FROM CHALLENGE SESSION

The Committee received the report and presentation of Chris Lovitt (associate director public health) and Ibrahim Khan (Programme Lead) regarding an update to the type 2 diabetes challenge session.

In response to Member questions Officers provided the following:

- The recommendation for a one year follow-up for patients with gestational diabetes or who are pre-diabetic was not met but officers were hoping to introduce this in the next 6 months – 1 year.
- With regard to engagement with the Bangladeshi community in particular, officers reported that there was already an early detection and communication plan in place to address this. The Community Champions team were also responsible for providing different community groups with advice and information. Their work would help improve early detection rates.
- In response to the recommendation to get more women only leisure provision, officers explained that the Physical Activity and Sports Strategy would address this.
- A Member commented that there was confusion over terms such as ‘pre-diabetic’ or ‘insulin resistant’ in the community and that there needed to be better dietary advice on how to manage the condition. Officers explained that there were community targeted healthy cooking

classes delivered by public health that were available to those who were diabetic, though these were only available post diagnosis. Officers noted the need to have a similar scheme pre-diagnosis.

- There was a discussion around the procurement of the tier 2 weight management programme and contracting status. Officers explained that public health would look to first address the outcomes and then decide an approach. There would be an update on the framework and approach in January 2020. The Committee requested to receive a briefing on this and officers agreed to the request.

RESOLVED:

1. To note the work underway on type 2 diabetes.

ACTION:

1. For officers to provide an update on the procurement of the tier 2 weight management procurement framework.
2. Officers to show where the recommendations from the Challenge Session are being covered in the Diabetes work programme.
3. For officers to provide an update on progress of the Diabetes Action Plan before the next meeting.

7. HEALTH AND WELLBEING STRATEGY 2020

The Committee received the report of Somen Banerjee (Director of Public Health) on the Health and Wellbeing Strategy 2020.

In response to Member questions officers provided the following:

- That the 'I' statements were co-produced with the community with the aim of identifying emergent themes.
- A Member asked whether the strategy had taken into account the high density of the borough as a result of new taller tower blocks. Officers said the strategy was targeted at a local level and would be responsive to local needs. It was noted that Healthwatch had significantly contributed towards the development of the strategy.
- Members queried why public health felt the strategy required a fundamental change of approach and whether previous targets had fallen off the agenda or would be incorporated into the new strategy.
  Officers explained that the health and care landscape had changed significantly since 2016/17 for example the Tower Hamlets Together partnership did not exist, co-production was at an early phase and intelligence systems were disjointed. The new strategy would be a more cohesive and co-produced strategy. It was noted that several of the former public health programmes would continue under the new strategy.
- Members requested that the Strategy be brought back to the Committee when complete.

RESOLVED:

1. To note the development of the Health and Wellbeing Strategy 2020.

ACTION:

1. For the Health and Wellbeing Strategy to be brought back to the committee when complete.

8. ANY OTHER BUSINESS

There was no other business.

The meeting ended at 8.55 p.m.
Chair, Councillor Kahar Chowdhury
Health & Adults Scrutiny Sub-Committee