

Health & Adults Scrutiny Sub-Committee

Agenda

Thursday, 27 July 2023 6.30 p.m. Council Chamber - Town Hall, Whitechapel

Members:

Chair: Councillor Ahmodur Khan

Vice Chair:

Councillor Bodrul Choudhury, Councillor Abdul Mannan, Councillor Ahmodul Kabir, Councillor Amy Lee, Councillor Mohammad Chowdhury and Councillor Amina Ali

Co-opted Members:

Assan Ali ((Resident Co-optee)) and Nicola Lawrence ((Healthwatch Co-optee))

Deputies: Councillor Maisha Begum, Councillor Faroque Ahmed, Councillor Rebaka Sultana, Councillor Harun Miah, Councillor Abdul Malik and Councillor Bellal Uddin

[The quorum for this body is 3 voting Members]

Contact for further enquiries:

Justina Bridgeman, Democratic Services Officer (Committee), justinabridgeman@towerhamlets.gov.uk
020 7364 4854

Town Hall, 160 Whitechapel Road, London, E1 1BJ http://www.towerhamlets.gov.uk/committee



Public Information

Viewing or Participating in Committee Meetings

The meeting will be broadcast live on the Council's website. A link to the website is detailed below. The press and public are encouraged to watch this meeting on line.

Please note: Whilst the meeting is open to the public, the public seating in the meeting room for observers may be limited due to health and safety measures. You are advised to contact the Democratic Services Officer to reserve a place.

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Tower Hamlets Council
Tower Hamlets Town Hall
160 Whitechapel Road
London F1 1B J

A Guide to Overview and Scrutiny Committee

The Local Government Act 2000 established the overview and scrutiny function for every council, with the key roles of:

- Scrutinising decisions before or after they are made or implemented
- Proposing new policies and commenting on draft policies, and
- Ensuring customer satisfaction and value for money.

The aim is to make the decision-making process more transparent, accountable and inclusive, and improve services for people by being responsive to their needs. Overview & Scrutiny membership is required to reflect the proportional political makeup of the council and, as well as council services, there are statutory powers to examine the impact of work undertaken by partnerships and outside bodies, including the Crime and Disorder Reduction Partnership and local health bodies.

In Tower Hamlets, the function is exercised by the Overview & Scrutiny Committee (OSC). The OSC considers issues from across the council and partnership remit. The Committee has 3 Sub-Committees which focus on health, housing and grants.

The committee's quorum is three voting members.

Public Engagement

OSC usually meets once per month (a few days before Cabinet, to allow scrutiny of decisions scheduled to be made there). These meetings are open to the public to attend, and a timetable for meeting dates and deadlines can be found on the Council's website. More detail of how residents can engage with Overview and Scrutiny are available here

Overview and scrutiny (towerhamlets.gov.uk)



London Borough of Tower Hamlets

Health & Adults Scrutiny Sub-Committee

Thursday, 27 July 2023

6.30 p.m.

APOLOGIES FOR ABSENCE

1. DECLARATIONS OF INTERESTS (PAGES 7 - 8)

Members are reminded to consider the categories of interest in the Code of Conduct for Members to determine whether they have an interest in any agenda item and any action they should take. For further details, please see the attached note from the Monitoring Officer.

Members are reminded to declare the nature of the interest and the agenda item it relates to. Please note that ultimately it's the Members' responsibility to declare any interests and to update their register of interest form as required by the Code.

If in doubt as to the nature of your interest, you are advised to seek advice prior to the meeting by contacting the Monitoring Officer or Democratic Services

- 2. APPOINTMENT OF VICE-CHAIR
- 3. TERMS OF REFERENCE FOR HEALTH AND ADULTS SCRUTINY SUB COMMITTEE
- 4. APPOINTMENT OF INEL JHOSC
- 5. MINUTES OF THE PREVIOUS MEETING (PAGES 19 26)

To confirm as a correct record the minutes of the meeting of the Health Scrutiny Panel held on 11 May 2023.

- 6. REPORTS FOR CONSIDERATION
- 6.1 CABINET MEMBER & CORPORATE DIRECTOR OVERVIEW OF PRIORITIES FOR 2023/24

TO FOLLOW

6.2 CS for Cabinet Member and CD Reflections and Priorities (Pages 27 - 28)



Tower Hamlets Council Tower Hamlets Town Hall 160 Whitechapel Road London E1 1BJ

- 6.3 ICB AND HEALTH PARTNERS OVERVIEW OF PRIORITIES FOR 2023/24 (Pages 29 38)
- 7. HASSC DRAFT FORWARD PLAN 2023/24
- 7.1 HEALTHWATCH ANNUAL REPORT For noting only (Pages 45 70)
- 8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS TO BE URGENT

Next Meeting of the Health & Adults Scrutiny Sub-Committee

Tuesday, 17 October 2023 at 6.30 p.m. to be held in Council Chamber - Town Hall, Whitechapel





Agenda Item 1

<u>DECLARATIONS OF INTERESTS AT MEETINGS- NOTE FROM THE</u> MONITORING OFFICER

This note is for guidance only. For further details please consult the Code of Conduct for Members at Part C. Section 31 of the Council's Constitution

(i) Disclosable Pecuniary Interests (DPI)

You have a DPI in any item of business on the agenda where it relates to the categories listed in **Appendix A** to this guidance. Please note that a DPI includes: (i) Your own relevant interests; (ii) Those of your spouse or civil partner; (iii) A person with whom the Member is living as husband/wife/civil partners. Other individuals, e.g. Children, siblings and flatmates do not need to be considered. Failure to disclose or register a DPI (within 28 days) is a criminal offence.

Members with a DPI, (unless granted a dispensation) must not seek to improperly influence the decision, must declare the nature of the interest and leave the meeting room (including the public gallery) during the consideration and decision on the item – unless exercising their right to address the Committee.

DPI Dispensations and Sensitive Interests. In certain circumstances, Members may make a request to the Monitoring Officer for a dispensation or for an interest to be treated as sensitive.

(ii) Non - DPI Interests that the Council has decided should be registered – (Non - DPIs)

You will have 'Non DPI Interest' in any item on the agenda, where it relates to (i) the offer of gifts or hospitality, (with an estimated value of at least £25) (ii) Council Appointments or nominations to bodies (iii) Membership of any body exercising a function of a public nature, a charitable purpose or aimed at influencing public opinion.

Members must declare the nature of the interest, but may stay in the meeting room and participate in the consideration of the matter and vote on it **unless**:

• A reasonable person would think that your interest is so significant that it would be likely to impair your judgement of the public interest. If so, you must withdraw and take no part in the consideration or discussion of the matter.

(iii) Declarations of Interests not included in the Register of Members' Interest.

Occasions may arise where a matter under consideration would, or would be likely to, affect the wellbeing of you, your family, or close associate(s) more than it would anyone else living in the local area but which is not required to be included in the Register of Members' Interests. In such matters, Members must consider the information set out in paragraph (ii) above regarding Non DPI - interests and apply the test, set out in this paragraph.

Guidance on Predetermination and Bias

Member's attention is drawn to the guidance on predetermination and bias, particularly the need to consider the merits of the case with an open mind, as set out in the Planning and Licensing Codes of Conduct, (Part C, Section 34 and 35 of the Constitution). For further advice on the possibility of bias or predetermination, you are advised to seek advice prior to the meeting.

Section 106 of the Local Government Finance Act, 1992 - Declarations which restrict Members in Council Tax arrears, for at least a two months from voting

In such circumstances the member may not vote on any reports and motions with respect to the matter.

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<u>Further Advice</u> contact: Asmat Hussain, Corporate Director, Governance and Monitoring Officer, Tel: 0207 364 4800.

APPENDIX A: Definition of a Disclosable Pecuniary Interest

(Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012, Reg 2 and Schedule)

| Subject | Prescribed description |
|----------------------------|---|
| Employment, office, trade, | Any employment, office, trade, profession or vocation |
| profession or vacation | carried on for profit or gain. |
| Sponsorship | Any payment or provision of any other financial benefit (other than from the relevant authority) made or provided within the relevant period in respect of any expenses incurred by the Member in carrying out duties as a member, or towards the election expenses of the Member. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992. |
| Contracts | Any contract which is made between the relevant person (or a body in which the relevant person has a beneficial interest) and the relevant authority— (a) under which goods or services are to be provided or works are to be executed; and (b) which has not been fully discharged. |
| Land | Any beneficial interest in land which is within the area of the relevant authority. |
| Licences | Any licence (alone or jointly with others) to occupy land in the area of the relevant authority for a month or longer. |
| Corporate tenancies | Any tenancy where (to the Member's knowledge)— (a) the landlord is the relevant authority; and (b) the tenant is a body in which the relevant person has a beneficial interest. |
| Securities | Any beneficial interest in securities of a body where— (a) that body (to the Member's knowledge) has a place of business or land in the area of the relevant authority; and (b) either— |
| | (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or |
| | (ii) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the relevant person has a beneficial interest exceeds one hundredth of the total issued share capital of that class. |

Agenda Item 3

Non-Executive Report of the:

Health & Adults Scrutiny Sub-Committee

27th July 2023



Classification:

Unrestricted

Report of: Director of Legal Monitoring Officer.

Health & Adults Scrutiny Sub-Committee, Terms of Reference, Quorum, Membership and Dates of Meetings 2023/24.

| Originating Officer(s) | Justina Bridgeman Committee Services Officer |
|------------------------|--|
| Wards affected | All |

Executive Summary

This report sets out the Terms of Reference, Quorum, Membership and Dates of meetings of the Health & Adults Scrutiny Sub-Committee for the Municipal Year 2023/24 for the information of the Health & Adults Scrutiny Sub-Committee members.

Recommendations:

The Health & Adults Scrutiny Sub-Committee' is recommended to:

- 1. Note the Terms of Reference, Quorum, Membership and Dates of future meetings as set out in Appendices 1, 2 and 3 of this report.
- 2. Determine the preferred time at which the scheduled meetings will start.

1. REASONS FOR THE DECISIONS

1.1 The report is brought annually to assist new and returning Members by informing them of the framework of the Committee set out in the Council's Constitution.

2. ALTERNATIVE OPTIONS

2.1 Not applicable to this report.

3. <u>DETAILS OF THE REPORT</u>

- 3.1 At the Annual General Meeting of the full Council held on 17th May 2023, the Authority approved the review of proportionality, establishment of the Committees and Panels of the Council and appointment of Members.
- 3.2 As per tradition, following the Annual General Meeting of the Council at the start of the Municipal Year, various committees are established and those committees note their Terms of Reference, Dates of meetings, Quorum and

Membership for the forthcoming Municipal Year. These are set out in **Appendix 1 and 2** of the report.

3.3 Meetings are scheduled to take place at 6.30pm **See Appendix 3**.

4. **EQUALITIES IMPLICATIONS**

4.1 When drawing up the schedule of dates, consideration was given to avoiding school holiday dates and known dates of religious holidays and other important dates where at all possible.

5. OTHER STATUTORY IMPLICATIONS

- 5.1 This section of the report is used to highlight further specific statutory implications that are either not covered in the main body of the report or are required to be highlighted to ensure decision makers give them proper consideration. Examples of other implications may be:
 - Best Value Implications,
 - Consultations.
 - Environmental (including air quality),
 - Risk Management,
 - Crime Reduction,
 - Safeguarding.
 - Data Protection / Privacy Impact Assessment.
- 5.2 No other statutory implications have been identified.

6. <u>COMMENTS OF THE CHIEF FINANCE OFFICER</u>

6.1 There are no direct financial implications arising from this report.

7. COMMENTS OF LEGAL SERVICES

7.1 The Council is required to appoint an Overview and Scrutiny Committee under the Local Government Act 2000. Sections 9F to 9FI of that Act set out the functions and composition of such committees. Section 9FA of that Act permits an Overview and Scrutiny Committee to appoint sub-committees to carry out some of its functions.

The matters set out in this report comply with the above legislation and with the Council's Constitution.

Linked Reports, Appendices and Background Documents

Linked Report

None

Appendices

- **Appendix 1** Membership for the Sub-Committee.
- Appendix 2 Terms of Reference of Scrutiny Sub Committee.
- Appendix 3 Dates of Sub-Committee Meetings 2023-24

Local Government Act, 1972 Section 100D (As amended) List of "Background Papers" used in the preparation of this report

List any background documents not already in the public domain including officer contact information.

None.

Officer contact details for documents:

N/A



Terms of Reference of Scrutiny Sub Committee

Health and Adults Scrutiny Sub-Committee

Summary Description: The Health and Adults Scrutiny Sub-Committee has been established to undertake the Council's responsibilities in respect of scrutinising local health services and adult social care, covering services provided by the Council as well as those provided by the Council's partners.

Membership: 7 non-executive councillors – the chair and six councillors, and 2 non-voting Co-Optees, one of which a Healthwatch representative.

| Functions | Delegation of Functions |
|---|-------------------------|
| Reviewing and/or scrutinising decisions made or actions taken in connection with the discharge of the Council's health and adult social care functions. | None |
| 2. Advising the Mayor or Cabinet of key issues/questions arising in relation to health and adult social care reports due to be considered by the Mayor or Cabinet. | None |
| 3. Making reports and/or recommendations to the Council and/or Mayor or Cabinet in connection with the discharge of health and adult social care functions. | None |
| 4. Delivering (3) by organising an annual work programme, drawing on the knowledge and priorities of the Council, registered providers and other stakeholders, that will identify relevant topics or issues that can be properly scrutinised. | None |
| 5. Holding service providers to account, where recent performance fails to meet the recognised standard, by looking at relevant evidence and make recommendations for service improvements. | None |
| 6. Considering health and adult social care matters affecting the area or its inhabitants, including where these matters have been brought to the attention of the sub-committee by tenant and resident associations, or members of the general public. | None |
| 7. The sub-committee will report annually to the Overview and Scrutiny Committee on its work. | None |
| 8. To discharge the Council's Scrutiny functions under the National Health Service Act 2006 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. Including to: | None |

- Review and scrutinise matters relating to the health service within the Council's area and make reports and recommendations in accordance with any regulations made thereunder;
- Respond to consultation exercises undertaken by an NHS body; and
- Question appropriate officers of local NHS bodies in relation to the policies adopted and the provision of services.

Quorum: Three voting Members

Additional Information: Is contained in:

Constitution Part A Section 9 (Overview and Scrutiny)

• Constitution Part B Section 30 (Overview and Scrutiny Procedure Rules)

 Constitution Part D Section 53 (Health and Adults Sub-Committee Procedure Rules)

SCRUTINY SUB COMMITTEE 2023-2024

Health and Adults Scrutiny Sub-Committee

(Seven non-executive members of the Council plus two co-opted members)
Can be drawn from all non-executive members. Lead Scrutiny Member for Health and Adults will chair)

| Aspire Group (4) | Labour Group (3) | Ungrouped (0) | Co-Opted Members (for information – appointed by Overview and Scrutiny Committee) |
|---|---|---------------|---|
| Councillor Ahmodur Rahman Khan | Councillor Amy Lee | | Assan Ali (resident co- |
| Councillor Bodrul Choudhury Councillor Abdul Mannan | Councillor Mohammad Chowdhury Councillor Amina Ali | | optee) |
| Councillor Ahmodul Kabir | | | Nicola Lawrence (Healthwatch) |
| Substitutes | Substitutes | | , |
| Councillor Harun Miah | Councillor Maisha Begum, | | |
| Councillor Abdul Malik Councillor Bellal Uddin | Councillor Faruk Ahmed Councillor Rebaka Sultana | | |
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HEALTH AND ADULTS SCRUTINY SUB-COMMITTEE

MEETING PROCEDURE AND SCHEDULE OF MEETING DATES 2023-2024

1. Chair and Membership

Sub-Committees will be chaired by a Member of the Overview and Scrutiny Committee. For this Sub-Committee it will be the Lead Scrutiny Member for Health, Wellbeing and Social Care for 2023-24. The membership of the Children and Education Scrutiny Sub-Committee has been determined by the Overview and Scrutiny Committee.

2. Frequency of meetings

- 2.1 The Health and Adults Scrutiny Sub-Committee will meet 5 times this year. The following dates are available in the Corporate Diary for 2023/24:
 - 13 July 2023
 - 17 October 2023
 - 12 December 2023
 - 20 February 2024
 - 18 April 2024

Meetings are scheduled to take place at 6.30pm. The Sub-Committee may arrange other meetings as and when necessary to consider any urgent issues as well as arranging meetings for detailed scrutiny reviews and challenge sessions.

Support to the Sub-Committee

- 4.1 The Divisional Director for Strategy, Policy and Performance, will be the senior officer lead and champion the work of the Sub-Committee.
- 4.2 The servicing of meetings will be undertaken by the Council's Democratic Services Team which will include:
 - (a) Agenda preparation and dispatch
 - (b) Taking minutes and recording of actions/decisions

(c) Dissemination of minutes and decisions

The Corporate Strategy and Communities Policy Team will provide policy support to the Sub-Committee which will include:

- (d) Research and analysis
- (e) Work programme development
- (f) Support with undertaking reviews and challenge sessions
- (g) Drafting review reports and challenge sessions

5. Proceedings

- 5.1 The Health and Adults Sub-Committee will generally meet in public and conduct its proceedings in accordance with the rules and procedure contained in the Council's Constitution such as the:
 - (a) Council Procedure Rules;
 - (b) Access to Information Procedure Rules, and
 - (c) The Overview and Scrutiny Procedure Rules.

LONDON BOROUGH OF TOWER HAMLETS MINUTES OF THE HEALTH & ADULTS SCRUTINY SUB COMMITTEE HELD AT 6.36P.M. ON THURSDAY MAY 11 2023 COUNCIL CHAMBER, TOWN HALL, 160 WHITECHAPEL, LONDON E1 1BJ

Members Present in Person:

Councillor Ahmodur Khan -(Chair)

Councillor Kamrul Hussain

Councillor Amy Lee

Councillor Maisha Begum

Councillor Gulam Kibria Choudhury -(Cabinet Member for Health, Wellbeing

and Social Care)

Members Present Remotely:

Councillor Mohammad Choudhury

Councillor Ahmodul Kabir

Officers Present in Person:

Dr Somen Banerjee -(Director Public Health)

Warwick Tomsett -(Acting Corporate Director, Health Adults and

Community)

Filuck Miah -(Senior Strategy & Policy Officer)

Katie O'Driscoll -(Director Adult Social Care)

Katy Scammell -(Associate Director Public Health)

Tom Alexander -(Project Director Leisure Capital Programme &

Procurement)

Denise De-Goze -(Schools and Families Team Manager)

Officers Present Remotely:

Lisa Pottinger -(Head of Sports and Physical Activity)

Apologies:

Councillor Adbul Malik

1 DECLARATIONS OF DISCLOSABLE PECUNIARY INTERESTS

There were no declarations of disclosable pecuniary interest.

2 MINUTES OF THE PREVIOUS MEETING(S)

The minutes of the Sub-committee meeting held on 13 February 2023 were approved as a correct record of proceedings.

3. CHAIRS UPDATE

The Chair;

- Informed the Sub-committee members that the latest Covid update was circulated for review.
- **Requested** the Action log which included outstanding items be circulated to the sub-committee members outside of the meeting.
- Introduced the sub-committee members to Nicola Lawrence and Assan Ali who will be appointed Healthwatch representative co-optee and resident co-optee respectively, once officially confirmed at the Overview and Scrutiny Committee meeting scheduled for 16 May 2023, which was postponed on 24 April 2023.

4. REPORTS FOR CONSIDERATION

4.1 Tackling Obesity

Somen Banerjee, Director of Public Health, Katy Scammell, Associate Director of Public Health and Denise De-Goze, Schools and Families Team Manager, gave an overview of the current strategy and corporate comms on tackling obesity and what measures can be taken. This included child excess weight patterns over time, health outcomes, the causes of unhealthy weight and the priorities included for the healthy child action plan.

Further to questions from the Sub-Committee, Somen Banerjee, Katy Scammell and Denise De-Goze;

 Clarified that the Healthy Families scheme is available to all child guardians and alternative courses are held in children's centres, schools, and community centres. Foster carers can also attend a Ministry of Food

(MOF) healthy cooking course held twice a year. [Clerk's Note – course details available here: Healthy families programme (towerhamlets.gov.uk)]

- Explained that the GP Care Group commissioned BY Public Health to deliver the 0-19 service, a directory for primary care and other professionals to support healthy weight.
- Noted that through the Public Health Commission they are also training those working in the community to support a healthy weight.
- **Conceded** that the borough will most likely achieve healthy weight levels if there is good air quality that encourages active travel.
- Clarified that challenges in tackling obesity include; the number of
 unhealthy foods available, the lack of alternative options, green and play
 spaces and overcrowded homes in some parts of the borough. The Local
 Plan's strategy will help create an environment that is more supportive of
 being a healthy weight.
- Explained that data from the National Child Measurement Programme 2015 to 2021 showed that year 6 aged boys of South Asian ethnicity have the highest rates of obesity. Continual work with parents and schools takes place to identify unhealthy weight levels and there are plans to train Youth Workers as well as offer training to those working with children in care.
- Indicated that consideration will be given to work alongside Influencers to promote child health. A proposal to introduce a healthy advertising policy will be submitted to Cabinet and work is also taking place to support fastfood owners to provide healthier options to their customers..
- Confirmed that a Play Manager post has been created to take forward work to increase play opportunities for Tower Hamlets children. Although Mile End Play Pavilion Park is a dedicated space, officers will discuss specific areas that do require play spaces with Sub-Committee members outside of this meeting.
 [Clerk's Note park details available here Playgrounds and Inclusive Play (towerhamlets.gov.uk)]
- Clarified that ongoing workstreams will have sustainable long-term effects, such as the 'School Food Improvement Programme', the training schemes and changes to the borough's leisure services to benefit children. The range of initiatives are across the borough and the cost cannot be apportioned to one department.

Following comments from Officers, the sub-committee;

• **Thanked** the Officers for the presentation and all efforts made to date in tackling the issue of child obesity within the borough.

 Requested officers update sub-committee members at a future meeting in the municipal year 2023/24.

4.2 Adult Social Care Inspection Prep

Councillor Gulam Kibria Choudhury, Cabinet Member for Health, Wellbeing and Social Care, introduced Katie O'Driscoll, Director of Adult Social Care who gave an overview of the Adult Social Care (ASC) Preparation for Inspection Report which details the service activity in readiness for regulation by the Care Quality Commission (CQC). This relates to how local authorities will be assessed against how it meets its duties under s1 Care Act 2014. The report outlines the CQC assessment framework, which is divided into four themes; how we work with people, how we support people, safety within the system and leadership.

Further to questions from the Sub-Committee, Katie O'Driscoll and Warwick Tomsett, Acting Corporate Director, Health Adults and Community;

- Clarified that both the permanent workforce and retention rate is good. A
 written brief on the current number of ASC locums will be forwarded to
 sub-committee members for review.
- Explained that as many residents are technically skilled, they may prefer
 to complete online self-assessments and as part of the Care Act want to
 provide other opportunities to adults to access assessments, once the
 system is operational. The completed details will be sent directly to ASC
 for review, so information, advice and eligibility can be considered.
- Confirmed that as part of an annual review process, residents are also asked about the quality of the care provision they receive, to ensure appropriate support is being provided. There are plans for the quality monitoring team in the Integrated Commissioning service who currently visit residents in domiciliary care to also visit residential and nursing care residents.
- Explained that residents are assessed for eligibility as per the Care Act 2014. Those that do not meet the criteria are still supported with advice, information and signposted to appropriate services which meet their needs or provided relevant preventative service. This may include a Reablement intervention, equipment or home adaptations. If an adult is assessed as eligible for care support, this is subject to the charging policy and financial assessments are undertaken. The move to free home care is scheduled to commence in April 2024.

- Confirmed that interpreters or advocates are presents at assessments or review meetings if required to ensure their needs are expressed.
- Conceded that the rate of those eligible for care and support using Direct Payments is low. A review is ongoing to resolve issues and make direct payments more easily accessible. Further details on a workstream, part of the transformation programme can be brought back to the sub-committee for review if required.
- Indicated that further work is required to support residents who are discharged from hospital to improve outcomes in supporting them.
- Clarified that a good partnership exists between a range of council ASC services and NHS in commissioning those services. Full details on these including the quality and performance can be forwarded to the subcommittee for review.

Following comments from Officers, the sub-committee;

- Thanked the officers for the presentation and work undertaken for the CQC inspection and the support given to residents requiring care.
- Requested officers update the sub-committee with the findings and any recommendations of the report at a future meeting in the municipal year 2023/24.

4.3 Scrutiny Review on Workforce Shortages Across the Health and Care Sector

The Chair gave an overview of the report which set out the findings and recommendations from the Scrutiny Review on Workforce Shortages Across the Health and Care Sector in the borough.

Three review sessions where undertaken to examine the staff social care and health shortages. A further session took place which included stakeholders from BARTS, NHS, ICB, Primary Care Commissioners, Adult Social Care and ELFT to name a few.

After consideration the sub-committee APPROVED the nine recommendations

Collaborative Approach

Recommendation 1:
 The Integrated Care Board (ICB) is recommended to collaborate with Tower Hamlets Together (THT) Board to develop robust and dynamic workforce intelligence for the health and care sector.

- Recommendation 2:

The ICB is recommended to collaborate with the THT Board (System) and the local authority's Health and Wellbeing Board (Place), to undertake investment in developing shared communications and ongoing engagement with the borough's residents.

Planning in Design

Recommendation 3:

The ICB and LBTH is recommended to incorporate integration when planning, developing and implementing its health and care workforce strategy such as service, financial and workforce plans.

- Recommendation 4:

The ICB and THT Board to partner with the borough's wider Health and Care employer stakeholders to review and co-design job roles required to support the demand for health and care services.

Recommendation 5:

The ICB and THT Board is recommended to partner up with LBTH's Education and Careers Service, Adult Social Care service, Primary Care commissioning and BARTS NHS to develop experiential learning opportunities for young people in secondary education.

Cost of Living Impact

Recommendation 6:

London Borough of Tower Hamlets (LBTH) is recommended to incentivise key worker accommodation status, council tax reductions and parking provision for health and care professionals.

Recommendation 7:

The ICB is recommended to work with the local Higher Education Institutions and develop grant top up funding streams that can support medicine students in the last two years of their study.

Developing Capacity

Recommendation 8:

The ICB is recommended to collaborate with local FE and HE education institutions with a view to supporting investment for piloting Degree Apprenticeships, and T- level placements to help increase much needed capacity.

- Recommendation 9:

The ICB and LBTH is recommended to draw on international recruitment options to meet the immediate shortfall for health and care demand whilst developing its growth model from local labour for future demand

RESOLVED that

1. The Health and Adult Scrutiny Sub-Committee report recommendations be approved and noted.

5. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS TO BE URGENT

None.

The Chair called the meeting to a close and thanked the sub-committee members and stakeholders, for their attendance and participation for all the meetings during municipal year 2022/23.

The meeting ended at 8.28pm Chair, Councillor Ahmodur Khan Health & Adults Scrutiny Sub-Committee



Agenda Item 6.2

Non-Executive Report of the:

Health and Adult Scrutiny Sub-Committee

27th July 2023

TOWER HAMLETS

Classification: Unrestricted

Report of: Denise Radley, Corporate Director for Health, Adult and Community

Reflections on 2022/23 and Priorities 2023/24

| Originating Officer(s) | Filuck Miah, Corporate Strategy and Communities |
|------------------------|---|
| Wards affected | All wards |

Summary

This cover report outlines the focus for the agenda item on reflections from 2022/23 and priorities for 2023/24 for the Cabinet Member for Health, Wellbeing and Social Care and the Corporate Director for Health, Adults and Community

- Reflection 2022/23
- Priorities 2023/24

Recommendations:

The Health and Adults Scrutiny Sub-Committee is recommended to:

1. Review the presentation on the topic in order to inform discussion for the Health and Adults Scrutiny Sub-Committee meeting.



Agenda Item 6.3

Non-Executive Report of the:

Health and Adult Scrutiny Sub-Committee 27th July 2023

TOWER HAMLETS

Report of: ICB and Towe Hamlets Health Partners

Classification: Unrestricted

Reflections of 2022/23 and Priorities 2023/24

| Originating Officer(s) | Filuck Miah, Corporate Strategy and Communities |
|------------------------|---|
| Wards affected | All wards |

Summary

This cover report accompanies the presentation slide deck: Reflections of 2022/23 and Priorities 2023/24

The content of the slide deck include presentations/ speakers from:

- Primary Care
- Acute Care
- Community Health Services
- Mental Health
- Integrated Care Board

Recommendations:

The Health and Adults Scrutiny Sub-Committee is recommended to:

1. Review the accompanying presentation in order to inform discussion for the Health and Adults Scrutiny Sub-Committee meeting.



Health and Social Care Scrutiny Committee

THT and the Integrated Care Board update 27th July 2023













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The ask

As this will be the first meeting the chair has asked the Integrated Care Board and local health partners to provide an overview on:

- Reflections and achievements
- Priorities for 2023/24
- Ongoing pressures and challenges

Primary Care presented by Roberto Tamsanguan, Clinical Director

| Reflections and achievements | Priorities for 2023/24 |
|---|---|
| *Primary Care Network (PCN) Organisational Development programme PCN delivery of the Spring 2023 Covid-19 booster programme (previously delivered by other organisations) PCN agreement to deliver Spirometry hubs in the community PCN IT interoperability to enable PCNs to deliver services to its practices patients Digital Exclusion Policies in every Practice General practice teams trained to support young people to understand the transition from parental to personal responsibility for accessing health care 'Healthspot' service for young people – GP service provision at 2 youth centres in Tower Hamlets *Tower Hamlets has 7 PCNs. PCNs are groups of 4-6 Practices collaborating together | To further enable PCNs to support a sustainable General Practice and improve access to primary care PCN Capacity & Access Improvement Plans Cloud based telephony in all practices, including queue functions PCN transformation projects: PCN Same Day urgent care service pilot Document Workflow Improvements – reducing practice workload PCN & borough patient call and recall service (to support for example immunisation uptake) Primary/Secondary Care interface – set up a working group to enact solutions to remove/reduce friction Support from Tower Hamlets Council to develop a Communication campaign to its residents on how to access primary care and educate the wider primary care workforce, self care, pharmacy services etc. |
| | |

Ongoing pressures and challenges

- 1. Rapid population growth
- 2. Mobile population leading to high turnover of patients (30%)
- 3. GP and Nurse workforce crisis exacerbated by the cost of living/housing compared to outside of London
- 4. Hospital waiting lists add to existing pressures in primary care
- 5. Telephony and access biggest issues post pandemic
- 6. No single approach to Access
- 7. Revenue implications for Practices in newly built health centres

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Community Health Services presented by Richard Fradgley, Director of Integrated Care and Deputy CEO East London Foundation Trust

Pofloctions and achievements



| | Reflections and achievements | Priorities for 2023/24 |
|---|--|--|
| | Our early therapeutic interventions winter scheme at Royal London Hospital was hugely successful. Provision of early therapy interventions in the emergency department avoided admission in 126 cases (Jan-Mar 2023) and where | Integrated working with partners, with a particular focus on working more closely with care home managers, Royal London Hospital teams (e.g. pharmacy, therapies and discharge teams) and primary care |
| J | patients were admitted, our intervention reduced peoples' length of stay in hospital from an average of 12-13 bed days | Wellbeing, workforce, recruitment and retention Virtual wards - supporting new models of care |
| | to 6-7 bed days. | and partnership working with Royal London Hospital and |
|) | Progress with recruitment, particularly nurses following | Frailty Practitioners |
| | weekend recruitment days | Continuing to consistently meet the 2 hour rapid response |
| | We were finalists at the HSJ Awards for the work of our | target (maintaining our performance) |
| | Advanced Care Planning Team for people with low-level learning disabilities | Recovery planning, with a particular focus on waiting list management, integrated triage approaches, and QI project on maximising the therapy resource |

Priorities for 2023/24

Ongoing pressures and challenges

- 1. **Workforce** (therapies in particular) presents a significant and on-going challenge. There is a national shortage of Occupational Therapists, for example
- 2. **Demand for our services**, including the increasing complexity of presentations, is greater than our **capacity**. While we are doing what we can to work more efficiently with the resources we have, there is a significant financial pressure

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Mental Health presented by Richard Fradgley, Director of Integrated Care and Deputy CEO East London Foundation Trust

| | Reflections and achievements | Priorities for 2023/24 |
|---------|---|--|
| D200 35 | We are deepening our relationship with social care across adult mental health and learning disabilities. This includes opening learning and development opportunities to each other (e.g. Quality Improvement training), and supporting each other around CQC inspections The move towards an ageless mental health support offer within neighbourhood mental health teams has been very successful (removing the boundary between adults and older adults services), and we are looking to spread this more widely A Quality Improvement (QI) project to improve transitions from children and young people (CYP) services to adult services, including the development of neighbourhood huddles that bring CAMHS and adult services together We are making some progress in implementing the THRIVE approach to CYP mental health and emotional wellbeing. For example, we have been able to articulate the offer for Tower Hamlets Education and Wellbeing Service (THEWS) Tower Hamlets Talking Therapies have been extremely successful at increasing access to more residents with anxiety and depression, with a particular focus on community outreach to increase access for minoritised communities | Improved Staff Experience – ensuring there are a range of developmental opportunities and well being initiatives to boost retention Improving and sustaining mental health inpatient care Reducing inequalities – continue the roll out of cultural awareness training to all staff, provided by the Islamic Centre For children and young people: Integrated Care, Partnerships & Coproduction – in particular, integration with social care, other health services and the VCSE New service developments – including CAMHS Crisis, Eating Disorder Service, Home Treatment Team (ICCS) and Intensive Support Team Improved pathways for children with neurodevelopmental needs e.g. autism |
| | Ongoing pressures and ch | allenges |

- 1. The availability of **adult mental health inpatient beds** is a real and on-going pressure, which is also contributing to longer waits in A&E. This partly driven by higher complexity and acuity of need in the population, and longer lengths of stay in hospital because of **delayed transfers of care**.
- 2. Our **workforce** is tired and has been continually impacted by strike action. We are doing a lot to maximise staff wellbeing but wider system pressures and rising acuity and complexity of need in our population are having an impact on peoples' resilience
- 3. We are hoping to secure a greater commitment across the system for more **integrated working** around CYP, which will enable us to consider the totality of our resources and work strategically in partnership to shift our attention and resources towards upstream interventions in line with THRIVE, away from crisis services

bage 3

Acute Care presented by Neil Ashman, CEO Royal London & Mile End Hospitals and Place Exec Lead.



| Reflections and achievement | ents Priorities for 2023/24 |
|--|---|
| Working collaboratively with partners Providing care closer to home at our Name Providing hospital at home for children Supporting virtual ward for frailty and pathways in the community Supporting improved partnership work partners in Tower Hamlets | discharge process to earlier in the day Meeting the demands for Urgent and Emergency Care and meeting the national performance standards respiratory Delivering equitable care to all of our patients with a focus on reducing our waiting lists |

Ongoing pressures and challenges

- 1. Increased demand for urgent and emergency care
- 2. Increased number of patients with Mental Health needs attending our Emergency Care Department with a longer length of stay
- 3. Working to deliver equitable care to all patients on our waiting lists
- 4. The demand for Primary Care Access from a growing population
- 5. The need for more Community Service provision

Integrated Care Board (ICB) presented by Charlotte Pomery, Chief Participation and Place Officer



| | Reflections and achievements | Priorities for 2023/24 |
|-----------|--|---|
| • Page 37 | First year of operation of the ICS – effective governance, development of Place Partnerships, Collaboratives, the ICB, with more development work still to do The development of the Integrated Care Partnership Strategy, the Joint Forward Plan and the Operating Plan Real focus on working with partners across the system to strengthen co-production and community led working Draft Workforce Strategy to address the ongoing resourcing issues faced across the system | Implementation of ICS Financial Strategy to ensure our resources address our demand and need Continued focus on co-production and the voice of local people in identifying challenges and solutions Implementation of the Workforce Strategy Implementation of the ICP Strategy and addressing our core priorities as well as reshaping our urgent and emergency care response |
| | | |

Ongoing pressures and challenges

- 1. Workforce capacity across the system in both health and social care with particular pinchpoints in some disciplines (for example, Occupational Therapy, Speech and Language Therapy, community nursing including for social care).
- 2. High levels of demand into the health and care system, again across all sectors, reflecting the urgency of a focus on prevention and early intervention.
- 3. Availability of capital funding to secure the long term changes in infrastructure we need to see

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Appendix 2: Health and Adults Scrutiny Sub-Committee Work Programme 2023-24: Chair: Cllr Ahmodur Khan

| | Meeting | Scrutiny Activity | Title | Description | Speakers |
|---------|--|----------------------|--|--|---|
| | Thursday 27 th July 2023 | Appointments and TOR | Vice Chair appointment, TOR and INEL JHOSC Membership representative(s) | Confirm Committee vice chair, agree terms of reference for HASSC and confirm INEL JHOSC Membership representative(s) | Cllr Ahmodur Khan HASSC Chair |
| | | HASSC Work Programme | Draft HASSC Work Programme | To review the HASSC Work Programme for 2023-24 | Cllr Ahmodur Khan HASSC Chair |
| Page 39 | | Spotlight | Cabinet Member and Corporate Director Reflections on 2022-23 and Priorities for 2023- 24 | Cabinet Member and Corporate Director to submit reflections from 2022-23 and Priorities for 2023-24 to HASSC | Cllr Gulam Kibria Choudhury Cabinet Member for Health, Wellbeing and Social Care Denise Radley Corporate Director for Health, Adults and Community |
| | | Spotlight | Integrated Care Board and Health Partners Reflections and Priorities | Provide reflections on 2022-23 Delivery and update on ICB priorities for 2023-24 | Neil Ashman (Acute Care) CEO Royal London & Mile End Hospitals and Place Exec Lead Roberto Tamsanguan Clinical Director (Primary Care) Richard Fradgley |

| | | | | Director of Integrated Care and Deputy CEO, East London Foundation Trust Charlotte Pomery (ICB)Chief Participation and Place Officer Warwick Tomsett Joint Director of Integrated Commissioning |
|--|----------------------|---|---|---|
| Tuesday 17 th October 2023 Day O | Spotlight Spotlight | Hospital waiting Times for Elective Surgery and Accident & Emergency service Diagnostic Services and Cancer Health Screening Programme | to review performance and apply critical friend role on approach and delivery to Hospital waiting times for elective surgery and accident and emergency service To review performance and apply critical friend role on Diagnostic Services and Health Screening Programme | Neil Ashman & Fiona Peskett BARTS NHS Healthwatch and VCS Reps tbc Dr Somen Banerjee Director of Public Health NHS Rep to be confirmed. VCS Rep to be confirmed. |
| Tuesday 12 th December 2023 | Spotlight | ASC CQC Inspection feedback (Subject to the inspection taking place) | Review the findings of ASC Inspection and consider the Council's response. | Cllr Gulam Kibria Choudhury Cabinet Member for Health, Wellbeing and Social Care Katie O'Driscoll Director of Adult Social Care |

| | | Spotlight | Development Housing with Care Strategy | To review and feed into the development of the housing care strategy | Cllr Gulam Kibria Choudhury Cabinet Member for Health, Wellbeing and Social Care |
|-------|---|--|--|---|--|
| | | | | | Warwick Tomsett Joint Director of Integrated Commissioning |
| | | | | | Ben Gladstone Deputy Director Ageing Well |
| | Tuesday 20 th February 2024 | Spotlight | Health Inequalities facing Women - Maternity Services in Tower | HASSC to review and apply critical friend role on the performance delivery of Maternity Services in Tower Hamlets | Warwick Tomsett Joint Director of Integrated Commissioning |
| age 1 | | | Hamlets | | Neil Ashman & Fiona Peskett BARTS NHS (tbc) |
| 1 | 2 | | | | ICB rep tbc |
| 1 | 7 | | | | VCS and resident reps to be confirmed. |
| | | Spotlight | 1. GP - Out of Hours Service. | To review and apply critical friend role on GP – Out of Hours Service | Warwick Tomsett Joint Director of Integrated Commissioning |
| | | 2. Progress to date on improving face to face GP access for residents. | To review the progress that has been made on improving face to face access for residents | Jo-Ann Sheldon Head of Primary Care TH | |
| | | | | Roberto Tamsanguan Clinical Director (Primary Care tbc) | |

| Thursday 18 th April | Tracking | Review action plan | To track the implementation of | Cllr Gulam Kibria Choudhury |
|---------------------------------|--|--|--|--|
| Recommendation | delivery for scrutiny recommendations on Workforce Shortages | recommendations from the scrutiny challenge session | Cabinet Member for Health, Wellbeing and Social Care | |
| | | across Health and Social Care Sector in the | | Katie O'Driscoll Director of Adult Social Care |
| | | borough | | Warwick Tomsett Joint Director of Integrated Commissioning |
| | | | | Francesca Okosi Chief People and Culture Office NHS Northeast London |
| | | | | Susan Nwanze Interim Director of OD and Education, Chief People and Culture Dept, NHS Northeast London |
| | Spotlight | Improving access to health services for disabled residents | To review and apply critical friend role on the improving access to health services for disabled residents | Cllr Gulam Kibria Choudhury Cabinet Member for Health, Wellbeing and Social Care |
| | | | | Denise Radley Corporate Director for Health, Adults and Community |
| | | | | Warwick Tomsett Joint Director of Integrated Commissioning |

| | | | | THT/ICB rep tbc |
|-----------|--------------------------------------|---|---|--|
| | Spotlight | Learning Disability Strategy | To review and feed into the development of the Learning Disability strategy | Cllr Gulam Kibria Choudhury Cabinet Member for Health, Wellbeing and Social Care |
| | | | | Denise Radley Corporate Director for Health, Adults and Community |
| | | | | Katie O'Driscoll Director of Adult Social Care |
| Pa | | | | Warwick Tomsett Joint Director of Integrated Commissioning |
| age | | | | |
| confirmed | Scrutiny Review or challenge session | Improving sports and physical exercise access for disabled People | To review and apply critical friend role on improving sports and exercise provisions for disabled people in the borough | Cllr Ahmodur Khan HASSC Chair |

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Together

we're making health and social care better

healthwatch Tower Hamlets

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"In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better."

Louise Ansari, Healthwatch National Director

Message from Tim Spilsbury

I am delighted to have the opportunity to introduce the inaugural annual report for Healthwatch Tower Hamlets under Your Voice in Health and Social Care (YVHSC) and to reflect on what has been a successful year.



Tim Spilsbury
YVHSC CEO

During this time, Healthwatch Tower Hamlets have continued their statutory responsibility to obtain the views of people about their needs and experience of local health and social care services, make those views known to those involved in the commissioning and scrutiny of care services, provide reports and make recommendations about how those services could or should be improved, and promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.

This year, working with our partners in health and social care, Healthwatch Tower Hamlets launched 18 separate reports of which the Maternity Equity and Equality focused on the experiences of inequality in maternity provision. Our Healthy Neighbourhoods work looked at what services are importnant to the people of Tower Hamlets and wijhat changes they would like to see. The opinions of those we talked to shed light on the difficulties and disparities faced within the community. By engaging with their stories, we provide ourselves with a constructive base from which to improve their quality of care.

This year we gathered patient experience feedback from 2857 reviews to help us raise awareness of issues and improve care. I would like to take this opportunity to thank all the Healthwatch Tower Hamlets staff, committee members, volunteers and work placement students who have continued to work with dedication to ensure a responsive and vital service continues to support the local community.

About us

Healthwatch Tower Hamlets is your local health and social care champion.

We make sure NHS leaders and decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



Our values are:

- Listening to people and making sure their voices are heard.
- Including everyone in the conversation especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- **Partnering** with health and care providers, local Government, and the voluntary sector serving as the public's independent advocate.

Year in review

Reaching out



2,857 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

108 people

came to us for clear advice and information about topics such as GP appointments and access to dental care.

Making a difference to care

We published

18 reports

reports about the improvements people would like to see to health and social care services.



Our most popular report was

Maternity Equity and Equality

Health and care that works for you



We're lucky to have

48

outstanding volunteers who gave up 30 hours to make care better for our community.

We're funded by our local authority. In 2022-23 we received

£149,000

We currently employ

5 staff

who help us carry out our work.

How we've made a difference this year

Spring

Summe



Engaged with maternity service users, to better understand their experiences so NHS leaders could make improvements



Carried out interviews with
Care Home staff on levels of GP
service provision (Direct
Enhanced Services.



We asked NHS leaders to review booking processes for appointments at GP practices due to issues people experience at GP practices in Tower Hamlets



Worked with 8 North East London Healthwatch to build an Insights System that's improving health and care services more quickly with over 90,000 comments from local residents



Worked with the local authority to enable Tower Hamlets residents to provide feedback about their local area to improve their health and wellbeing.



Analysed comments from ethnic minority communities relating to mental health care which was presented to council leaders.



Teaming up with other
Healthwatch in London, we
supported the London
Ambulance Service to gather
patient views for their 2023/24
strategy.



We engaged with people expecting a child or who had a recent birthing experience, to support the development of an NHS maternity equity and equality strategy, aimed at ensuring all babies born and cared for have the best possible start in life.



Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.

Positive changes to local neighbourhoods

Healthy Neighbourhoods are a new way of shaping how communities work. It is based on the concept of '15-minute neighbourhoods' where everyone has easy access to things that support them to live a healthy and fulfilling life.

These services include things like food shops, parks, health services, gyms, schools, places of worship and theatres.

We collected feedback from residents in Tower Hamlets to find out what services are important to them, and how well they currently support local people. We also asked residents to tell us what changes they would like to see within the borough. We spoke with over 350 local residents.

Our report recommendations:

- 1. Increased police presence in areas where crime and anti-social behaviour generally take place.
- 2. A public consultation on general traffic calming measures., and education around potential consequences of speeding.
- 3. A review of the current park maintenance routine, and waste collection and street cleaning services to identify areas for improvement.
- 4. Linking with existing volunteer groups to help with gardening, litter picking, and planting trees and flowers.
- 5. Introduction of fresh food shops that sell 'wonky' vegetables as well as free gym equipment in local parks.
- 6. Review the current offer of adult education courses, to create more affordable courses.
- Introduction of more services and activities for young people, LGBT+ focused spaces, and accessible spaces for disabled people to socialise and take part in leisure activities.

What difference will this make?

The report of our findings will be presented to the Local Authority and will go towards formulating a plan to support the development of local neighbourhoods to improve people's health and well-being.

When implemented, these will ensure residents have better access to services without the need to travel, and Tower Hamlets will become a healthier, more equal, and safer borough where everyone is able to meet their needs within their own neighbourhoods.



"More accessible prices for gyms and more shops in the local area that do not sell processed food but instead healthy food."

Female resident in Tower Hamlets

Improving Maternity services in North-East London

Black and ethnic minority women and women living in deprived areas of the country are more likely to experience poor health outcomes when accessing maternity services compared to those from White ethnic backgrounds and women living in affluent areas.

With some of the most diverse and deprived areas in England located in North-East London, the seven local Healthwatch organisations conducted a project into ante- and post-natal services in North-East London to find out how they could be improved.

The study found some differences in how people from different backgrounds experience services, with Black women more likely to have commented on the services negatively.

The feedback also highlighted differences in experiences for those who are digitally excluded, as well as the need to address issues around language and cultural barriers.

Our findings were used to develop the North-East London Local Maternity and Neonatal System Equity and Equality Strategy and Action Plan, which includes the following changes to be implemented locally.

Changes to Maternity Services in NEL

 Work with Maternity Voice Partnership (MVP) Chairs, voluntary organisations and Healthwatch to establish further engagement and coproduction working on areas around patient experience.



- Focus groups for communities from Black, Asian and Mixed Ethnic backgrounds and those from deprived areas, to ensure opportunities for feedback and to be involved in service development, to happen in an environment familiar and accessible to them.
- Scope training for staff regarding fluency vs. comprehension when assessing English proficiency to ensure pregnant women understand what is being shared and asked of them.
- Scope cultural competency training specific to maternity settings.

What difference will this make?

This announcement showed the power of people's feedback – with decision makers listening to women's voices and taking action as a result.

You were able to reach communities we never would have been able to reach on our own, and with that it meant the engagement was genuine, sensitive and considered. Utilising your existing relationships and establishing new contacts meant you collectively engaged with over 1,500 maternity stakeholders across the two projects and provided such in depth analysis far beyond what we were expecting.

Sarah Coulthard, Senior Communications & Campaigns Manager, NHS
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Representing your views

During our first year of delivery, we have spent time building relationships and attending key meetings. We attended over 70 key strategic and operational meetings where we represented the voices of Tower Hamlets residents, encouraged public involvement and shared our intelligence.

Examples of meetings where we have championed local voices, engagement and presented our findings:

- Tower Hamlets Health and Wellbeing Board (HWBB)
- Tower Hamlets Health Scrutiny Sub-Committee (HASSC)
- Tower Hamlets Engagement Leads
- Tower Hamlets Together Board
- Tower Hamlets Promoting Independence Board
- Tower Hamlets Living Well workstream
- Tower Hamlets Winter Comms and Engagement
- Healthwatch North-East London Community Insights Steering Group
- NHS North-East London (ICB/Healthwatch) Group
- North-East London Maternity Equity and Equality Group
- North-East London Care Homes Working Group
- Tower Hamlets Integrated Commissioning
- Tower Hamlets Co-production workshop Task and Finish Group
- North-East London Cost of living workshop
- Tower Hamlets Health, Adults and Community, Department Leadership Team
- North-East London Digital Community Services Engagement Session
- NHS North-East London Integrated Care Partnership (full committee)
- Royal London Hospital Patient Experience Committee
- Royal London Hospital Executive Board



Patient Experience Programme

At Healthwatch Tower Hamlets we operate a comprehensive Patient Experience data collection programme as part of our duty around gathering and representing the views of patients and service users in the borough.

The implementation of the data collection programme will normally yield 4,800 patient experiences per annum all of which will be presented as they are received and considered as valid community opinion.

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Our Patient Experience Programme

Our Patient Experience Programme gathers experiences of health and care services each quarter. This face-to-face engagement with the community is a cornerstone of our work, enabling us to understand the real time challenges local people experience when accessing health and care services.

Through a mixed methods approach to patient engagement, we collected 2,264 experiences from Tower Hamlets residents throughout 2022/2023. We restarted our face-to-face engagement in GPs and hospitals ensuring the safety of all staff and patients remain a priority, while also utilising phone calls and online reviews.

In their feedback, patients highlight areas of good practice alongside recommendations for further improvements of the service. From this we produce quarterly reports outlining key themes and trends of areas of service delivery that are worth celebrating as well as those that can be further developed.

"When seeing doctors, they listen to issues and do follow-ups." **GP Patient** "Getting an appointment is very difficult - a month late. Lots of private appointments but not NHS." **Dental patient** "More customer service training for the receptionist, they should not be asking patients personal questions in front of other patients." GP Patient

"The staff were nice especially midwives were lovely.
Communicated well and treated me properly in labour." Royal London
Hospital patient

"Clean and easy to access from my surgery as it is next door. Answer my phone calls."

Pharmacy service user

"Waiting time is 6 hours even with children. More communication is needed when you're waiting." Royal London Hospital patient

Three ways we have developed our Patient Experience Programme

Throughout our work we gather feedback from local people about their experiences of health and care services. This year we reviewed and improved how we do this.

Launching a new website



It's important for local people to be able to share their experience of services back to Healthwatch and access clear and up to date information and signposting about health and care services.

Healthwatch Tower Hamlets updated its website in 2022/23, reviewing and refreshing content and benefitting from the most up to date knowledge on design and accessibility. Our new website contains health advice and guidance on changes across the system, as well as practical information like how to register with a GP when you have no fixed address. You can find all our news and reports on the website, feedback your experience of care and more!

Refreshing our patient feedback form



Our Patient Experience Programme gathers 1200 experiences of health and care services each quarter. It is a cornerstone of our work enabling us to understand the real time challenges local people experience when accessing health and care services.

During 2022/23 we revamped our feedback form, updating it with questions that really matter to patients and service users. We aligned some questions with the national GP Patient Survey so in future we will be able to do direct comparisons of results. We have also ensured our data can link easily to Healthwatch England's national database, enabling the voice of people from Tower Hamlets to have a stronger profile in their national work.

New Patient Experience Report



Our quarterly Patient Experience Report provides a vital overview of the themes and trends in access and care experienced at GP surgeries, our local Hospital and other health and care services.

Our report has been redesigned this year, making it more accessible and easier to use. What was once a 50+ page document with charts and detailed narrative has now been broken down into snapshot data and key overview information. Trends from quarter to quarter are clearly highlighted and service specific recommendations will help our staff and committee members champion the changes needed across the system, in the many meetings they attend!



Hearing from all communities

Over the past year we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently, to gather their feedback and make sure their voice is heard and services meet their needs.

This year we have reached different communities by:

- Attending community/voluntary group meetings with visual impaired service users, a Somali women's group and an LGBT group to understand their experiences of health and care services in the borough and what improvements could be made to help them feel less isolated as individual communities.
- Sharing feedback and insights from service users with NHS North-East London ICB to help them improve their services.
- Engaged with residents about their local neighbourhoods and what improvements they would like to see which would improve their health and wellbeing.

LGBT+

Our Healthier Neighbourhoods Study included an 'inclusivity' focus enabling us to hear from seldom heard groups.

Lesbian, Gay, Bi-Sexual and Transgender (LGBT+) respondents highlighted the need for more inclusivity and the integration of different communities within Tower Hamlets. Some comments related to suggestions on more LGBT+ spaces, events, and services. One respondent commented on a lack of visibility of the LGBT+ community in the local newspaper.

Residents told us that making the borough more inclusive would increase their feeling of safety and make accessing different services easier due to not being afraid.



41% of LGBT+ residents told us they do not feel safe in their local area compared to 23% of Heterosexual people."



Bangladeshi community

Through our Healthier Neighbourhoods Study we sought to engage with different ethnic groups that live in the borough.

We found that the Bangladeshi community was particularly hesitant to take part in our survey due to a belief that it will not result in any changes.. Despite the lower than hoped for response rate, we found that:

- People of Bangladeshi ethnicity would like to see an improvement in services and activities for children and young people
- The community rated having a bus station as the most important service to have near their home.
- The community rated having a place of worship near home as important but less than 2 out of 3 people told us that they had one within 15 minutes from home.



""We are fortunate to have a few local tube stations and bus stops within walking distance. However, this is not the case for all of Tower Hamlets." Female, 25-34, Bangladeshi

Female, 25-34, Bangladeshi ethnic group



Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

This year we've helped people by:

- Providing up to date information people can trust
- Helping people access the services they need
- Helping people access NHS dentistry
- Supporting people to look after their health during the cost of living crisis

Help with accessing mental health services

Healthwatch Tower Hamlets were contacted for advice and information on mental health support.

The impact of delayed access to mental health support resulted in a local resident contacting us as a last resort.



"I raised the alarm and asked for help but felt like I was being dismissed until Healthwatch Tower Hamlets gave me some advice"

Tower Hamlets resident

Healthwatch Tower Hamlets advice and information has meant people who need information on mental health services know their options and have clear information.

In addition to providing vital advice and information to residents, Healthwatch Tower Hamlets shared information with the local Adult Safeguarding Team and presented a report on Ethnic Minority Communities Access to Mental Health services to the local Health and Adult Sub Scrutiny Committee.

Helping residents in the cost-of-living crisis

Healthwatch Tower Hamlets worked with the local authority and local community/voluntary organisations on the boroughs Winter Communications and Engagement Plan Project. Across the partnership they helped residents with information to support them during the winter cost of living crisis, as well as proving information in a wide range of community languages.

Healthwatch Tower Hamlets received a call from a resident who had been absent from work due to health issues and contacted us about local food banks. This resident was experiencing financial difficulties due to the rising cost of living, as the statutory sick pay, they received was insufficient to cover their monthly expenses.

Healthwatch Tower Hamlets provided them with information about nearby food banks and advised them to check if they were eligible for any additional welfare benefits.

Consequently, the resident was able to access the Tower Hamlets resident support scheme and receive further assistance.



Volunteers and Work Placements

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

We also provide a number of paid work placement opportunities to those of working age and those with learning disabilities, supporting people to learn new skills and develop their experience.

Work Placements

Work Placements at Healthwatch Tower Hamlets

During our first year of serving the borough and shining a light on health and social care issues, Healthwatch Tower Hamlets also had the pleasure of offering four local resident's paid work placement opportunities.

Two of the placements were offered to local people with learning disabilities and two for people who had been out of work for a long period.

The placements gave the candidates an invaluable opportunity to take part in a range of Healthwatch activities including creating promotional materials for the website and social media channels, attending community events, engaging with local people to find out about their experiences of using local health and social care services, and attending meetings with local authority and NHS leaders.

Healthwatch Tower Hamlets believe these work placements are great way to support local people in the community who may have struggled to gain opportunities in the past or were not given a fair chance due to difficulties they may encounter.

We believe the placements provide a good platform for local people that will increase their confidence, gain experience of working in an office environment, to be creative and learn new skills at their own pace.

"As a small busy service it can be challenging and resource intensive to accommodate work placements and provide them with individualised support. The team has really come together to offer a varied and personalised work plan for each of our work placements and it has been a pleasure to watch them grow and gain confidence over their two-week period with us. We look forward to supporting them further in their employment journey"

Matthew Adrien, Service Director, Healthwatch Tower Hamlets



Amina

"I first came across Healthwatch a few months ago through friends who had used the services. And when an opportunity to complete a placement arose, I was very happy and looking forward to start."

"My time here at Healthwatch has really solidified my passion for wanting to work in the local community to improve health and social care."



Shreya

"I was recommended the Healthwatch work placement programme by my work coach at the job centre. It was an appealing opportunity for getting into the admin side of the healthcare field.

"I was able to improve my confidence in communication and my knowledge of health and social care issues. It was fascinating to see what measures are taken so that the issues can be addressed".



Ebba

"Working at Healthwatch Tower Hamlets was amazing. I absolutely enjoyed being in an office space doing all types of fun tasks. It was brilliant, I can't wait to do more!

I have interacted with my co-workers in a professional manner as well as getting some feedback with the stuff from the posters I have done. The best thing about the placement was that I could be creative with a lot of posters and flyers"



Do you feel inspired?

We are always on the lookout for new volunteers and work placements, so please get in touch today.



www.healthwatchtowerhamlets.co.uk



Q 00800 145 5343



info@healthwatchtowerhamlets.co.uk

Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Our income and expenditure (unaudited)

| Income | | Expenditure | |
|--------------------------------|----------|---------------------------|----------|
| Income from Local Authority | £149,000 | Expenditure on pay | £119,000 |
| Additional income | £10,000 | Non-pay expenditure | £16,000 |
| | | Office and management fee | £24,000 |
| Total income | £159,000 | Total expenditure | £159,000 |

Additional income is broken down by:

- £5,000 funding received from London Ambulance Service
- £5,000 funding received from NHS North East London

Next steps

In the ten years since Healthwatch was launched, we've demonstrated the power of public feedback in helping the health and care system understand what is working, spot issues and think about how things can be better in the future.

Services are currently facing unprecedented challenges and tackling the backlog needs to be a key priority for the NHS to ensure everyone gets the care they need. Over the next year we will continue our role in collecting feedback from everyone in our local community and giving them a voice to help shape improvements to services.

We will also continue our work to tackling inequalities that exist and work to reduce the barriers you face when accessing care, regardless whether that is because of where you live, income or race.

Top three priorities for 2023-24

- 1. Cancer Screening
- 2. Mental Health (digital health, older people and access to mental health services)
- 3. Oral Health for residents within Care Homes.



Statutory statements

Healthwatch Tower Hamlets, Pill Box, 115 Coventry Road Unit 104, London

The contract holder is Your Voice in Health and Social Care, 45 St. Marys Road, Ealing, W5 5RG

Healthwatch Tower Hamlets uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

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The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Local Advisory Committee consists of 6 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Committee ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Throughout 2022/23 the Board met 4 times and made decisions on matters such as approving any recommendations to be shared with local authority/NHS leaders on our maternity reports and setting future priority arears for our Enter and View visits.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of using services. During 2022/23 we have been available by phone, email, provided a webform on our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website take copies to engagement events, publish a monthly newsletter, social media posts, and share it via link or email with relevant stakeholders.

Responses to recommendations

There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

Taking people's experiences to decision makers

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us.

In our local authority area for example we take information to the Health and Adults Sub Scrutiny Committee, Tower Hamlets Together Board and Tower Hamlets Promoting Independence Board .

We also take insight and experiences to decision makers at North-East London(NEL) integrated Care System. For example, we meet with our 8 other Healthwatch at the NEL level and discuss local issues, current projects and insights with the NEL ICS engagement team and feed our reports into the NEL community insight system.

.We also share our data with Healthwatch England to help address health and care issues at a national level.

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Enter and view

No Enter and Views were carried out in 2022/23.

2022-2023 Outcomes

| Project/ activity | Changes made to services |
|---|---|
| Care Homes Direct Enhanced Service (DES) project | Partners used the feedback locally to bring key partners together for a wider discussion on the Direct Enhanced Service in Tower Hamlets. |
| London Ambulance Service | Improving patient education to reduce the number of unnecessary calls to 999 services and directing people to call 111 instead. |

healthwetch

Healthwatch Tower Hamlets Unit 104, The Pill Box, 115 Coventry Road, Bethnal Green, E2 6GG

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