

Health & Adults Scrutiny Sub-Committee

Agenda

Tuesday, 4 June 2024 6.30 p.m.
Council Chamber - Town Hall, Whitechapel

Members:

Chair: Councillor Bellal Uddin

Vice Chair: To be confirmed

Councillor Iqbal Hossain, Councillor Ahmodul Kabir, Councillor Kabir Hussain, Councillor Amy Lee, Councillor Marc Francis and Councillor Sabina Khan.

Co-opted Members:

Assan Ali ((Resident Co-optee)) and Jessica Chiu ((Healthwatch Co-Optee))

Deputies: Councillor Leelu Ahmed, Councillor Asma Begum and Councillor Mohammad Chowdhury.

[The quorum for this body is 3 voting Members]

Contact for further enquiries:

Justina Bridgeman, Democratic Services Officer (Committee),

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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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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 \(towerhamlets.gov.uk\)](https://towerhamlets.gov.uk)

London Borough of Tower Hamlets

Health & Adults Scrutiny Sub-Committee

Tuesday, 4 June 2024

6.30 p.m.

APOLOGIES FOR ABSENCE

1. Appointment of Vice Chair

2. DECLARATIONS OF INTERESTS

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

Further Advice contact: Linda Walker, Interim Director of Legal and Monitoring Officer,
Tel: 0207 364 4348

3. Health and Adults Terms of Reference, Membership, Quorum & Dates of Meeting for 2024/25 (PAGES 7 - 16)

4. MINUTES OF THE PREVIOUS MEETING(S) (PAGES 17 - 22)

To confirm as a correct record the minutes of the meeting of the Health Scrutiny Panel held on 18 April 2024.

5. REPORTS FOR CONSIDERATION

5.1 Tracking Recommendation: Service Action Plan response to Workforce Shortages across Health and Care Sector.

TO FOLLOW




- 5 .2 **Cabinet Member and Corporate Director Reflections, Achievements for 2023-24 and Priorities for 2024-25.**
- 5 .3 **Tower Hamlet Together Board Partners Reflections for 2023-24 and Priorities for 2024-25. (Pages 23 - 34)**
6. **ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS TO BE URGENT**

Next Meeting of the Health & Adults Scrutiny Sub-Committee

Tuesday, 3 September 2024 at 6.30 p.m. to be held in Council Chamber - Town Hall, Whitechapel



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<p>Non-Executive Report of the:</p> <p>Health and Adults Sub-Committee</p> <p>4th June 2024</p>	 <p>TOWER HAMLETS</p>
<p>Report of: Director of Legal and Monitoring Officer</p>	<p>Classification: Open (Unrestricted)</p>
<p>Health and Adults Scrutiny Sub-Committee Terms of Reference, Quorum, Membership and Dates of Meetings 2024/25</p>	

Originating Officer(s)	Justina Bridgeman, Committee Services Officer
Wards affected	All wards

Executive Summary

This report sets out the Terms of Reference, Quorum, Membership and Dates of Meetings of the Health and Adults Scrutiny Sub-Committee for the Municipal Year 2024-25 for the information of the Health and Adults Scrutiny Sub-Committee members.

Recommendations:

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

1. Note its 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. DETAILS OF THE REPORT

- 3.1 At the Annual General Meeting of the full Council held on 15th May 2024, the Authority approved proportionality, establishment of the Committees and Panels of the Council and appointment of Members. It delegated authority to the Overview and Scrutiny Committee (OSC) to establish its sub-committees.

- 3.2 The Overview and Scrutiny Committee met on the 21 May 2024 and agreed

to set up three sub-committees, including this one, on which occasion they agreed the terms of reference for all three sub-committees.

3.3 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.

3.4 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 statutory implications have been identified.

6. COMMENTS OF THE CHIEF FINANCE OFFICER

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

7. COMMENTS OF LEGAL SERVICES

7.1 The terms of reference cover the point of the functions of the committee and who will be appointed to consider matters relating to health within the council area.

Linked Reports, Appendices and Background Documents

Linked Report

- None

Appendices

- Appendix 1 – Terms of Reference of Scrutiny Sub Committee.
- Appendix 2 – Membership for the Scrutiny Sub Committee.
- Appendix 3 – Dates of Scrutiny Sub Committee Meetings 2024/25

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

- None.

Officer contact details for documents:

N/A

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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, six councillors, and 2 non-voting Co-Optees, one of which a Healthwatch representative.

Functions	Delegation of Functions
1. 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

<ul style="list-style-type: 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. 	
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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 54 (Health and Adults Sub-Committee Procedure Rules)

SCRUTINY SUB COMMITTEE 2024-2025

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)

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Aspire Group (4)	Labour Group (3)	Ungrouped (0)	Co-Opted Members (for information – appointed by Overview and Scrutiny Committee)
Councillor Bellal Uddin - Chair Councillor Iqbal Hossain Councillor Ahmodul Kabir Councillor Kabir Hussain Substitutes to be confirmed	Councillor Amy Lee Councillor Marc Francis Councillor Sabina Khan Substitutes Councillor Asma Begum Councillor Leelu Ahmed Councillor Mohammed Chowdhury		Assan Ali (Resident co-optee) Jessica Chiu (Healthwatch)

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HEALTH AND ADULTS SCRUTINY
SUB-COMMITTEE

MEETING PROCEDURE AND SCHEDULE OF MEETING DATES
2024-2025

1. Chair and Membership

- 1.1 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 2024-25. 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 2024/25:

- 04 June 2024
- 03 September 2024
- 05 November 2024
- 03 February 2025
- 08 April 2025

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 6.40 P.M. ON THURSDAY, 18 APRIL 2024

COMMITTEE ROOM - TOWER HAMLETS TOWN HALL, 160 WHITECHAPEL ROAD, LONDON E1 1BJ

Members Present in Person:

Councillor Ahmodur Khan -(Chair)

Councillor Abdul Mannan

Councillor Amy Lee

Councillor Mohammad Chowdhury

Members In Attendance Virtually:

Councillor Ahmodul Kabir

Councillor Amina Ali

Co-optees Present in Person:

Nicola.Lawrence -(Healthwatch Co-optee)

Apologies:

Assan Ali -(Resident Co-optee)

Officers Present in Person:

Warwick Tomsett -(Joint Director, Integrated Commissioning)

Filuck Miah -(Strategy and Policy Officer, Strategy, Improvement and Transformation Service)

Justina Bridgeman -(Democratic Services Officer (Committees))

1. DECLARATIONS OF 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 20 February 2024 were approved and signed by the Chair as a correct record of proceedings.

Chairs Update

- Noted that Nicola Lawrence, Heathwatch representative, will step down from the sub-committee and this was her last meeting. Nicola was thanked for her valuable contribution and expertise. Jessica Chiu is replacing and will be formally introduced at the first meeting for municipal year 2024/25.
- The Chair expressed concern over the removal of the Mental Health Achievements and Priorities item from the agenda. Officers were informed that agenda items are requested solely by the sub-committee and all items require prior approval from the Chair before removing.

3. ACTION LOG

The actions were received and noted.

4. REPORTS FOR CONSIDERATION

4.1 Action Plan Response Update on Workforce Shortages Across the Health and Care sector

The item could not be discussed as Francesca Okosi was taken ill and a substitute was not available. Members requested a written response to questions be sent to ICB representatives for discussion at the first meeting of the municipal year. The Chair and sub-committee members agreed to progress to the next item.

RESOLVED that;

1. A written response to the Members' questions on work force shortages will be presented to ICB representatives for discussion at the first meeting of the municipal year 2024/25.

4.2 Maternity Services in Tower Hamlets

The Sub-Committee continued the discussion from the meeting on 20 February, which began with residents describing their experiences of maternity services provided in the borough. Tom Logan, Divisional Director of Operations, Women's Health, began the presentation explaining that BARTS

Health, in conjunction with Whipps Cross and Newham, provides maternity care for around 5000 women and babies annually. This takes place primarily in the labour ward, although the Lotus Birth Centre which is midwife Led care and home births are also available.

The Royal London also provides care for women with chronic diseases through the Maternal Medicine Network, for support during and after their pregnancies as well as specialist foetal medicine care and a diabetes clinic.

Sabrina Mubiru, Patient Experience Midwife, then provided information on the methods Royal London uses to improve the patient experience and reduce inequalities in healthcare. This includes enhancing the online booking system to now translate in 100 different languages, for ease of access to maternity care. Further work with improving referrals is ongoing to ensure the recommended timeline of nine weeks and six days is adhered to. Ms Mubiru stated that community partnership work with 'Sister Circle', 'Maternity Mates' and the Maternity Neonatal Voice Partnerships helps in enhancing service users' experience. Additional phones are now accessible in the labour ward, and translators to ensure communication with patients is as easy as possible.

Monthly community engagement sessions are also available to hold antenatal education and peer to peer group sessions and alleviate any concerns and forward any referrals that are required. A Birth Reflection Clinic, run by Midwives is also available for women to explore difficult experiences post birth. MS Mubiru informed sub-committee members of the high-risk antenatal classes conducted by midwives for women of black and Asian and mixed ethnic origin, and the Health Inequalities task force, held monthly to discuss health inequalities within the sector.

Shereen Nimmo, Group Director of Midwifery, BARTS Health NHS Trust, then detailed the funding received to support two projects for the Somali community, an engagement officer who works specifically for Somali residents and the women's inclusive team, who hold drop in services and visit residents at home to better understand their needs and assist in all aspects of women's care. Bengali health advocates are also on hand to assist mothers

Tristan Kerr, Director of Nursing and Governance, then informed sub-committee members of the 38 new midwives who have started since 2024, with a further six in training. One midwife, Stella Simon-Brown was awarded a National Silver Award for her 20 year contribution to midwifery by the Chief Midwifery Officer for England.

Dawn Cooper-Newman, Head of NEL LMNS Programmes, NHS, provided details on the 3 year delivery plan and the survey conducted by Healthwatch to build upon the equality and equities framework.

Sub-committee members were updated on the ongoing methods to improve patient outcomes and effectively manage patient flow at triage. The BSOTS, or Birmingham Symptom Specific Obstetric Triage System, has now being implemented, to enable rapid assessment for pregnant women, and aims to

triage patients within approximately 15 minutes from their arrival to the unit. Recruitment on BSOTS specific midwives is currently on going. Mental health care is also a priority and work with the 'My Body Back' clinic assists in safeguarding, with the collaboration of an obstetrician and midwife.

Sub-Committee members then heard from Momina Begum, who attended the previous meeting to discuss her lived experience. Although pleased with the improvements noted, particularly regarding the equality with language issues mentioned, and urged health professionals to continue the positive work. Ms Begum has worked with the Lime House Project for over 20 years and explained that many women have faced poor health care service. Ms Begum acknowledged the changes will take time to be fully embedded and thanked the team for the presentation.

Further to questions from the sub-committee,

- Clarified that around 1% of women in the borough opt for home births, which is in line with national outcomes. The Home Birth team deals specifically with this type of birth and mothers are given details of the procedure and proximity to the nearest hospital. If any issues occur, the midwife works alongside the London Ambulance Service and an alert card script is read to enable either a category one or two transfer call, depending on issue.
- Explained that following the CQC maternity services inspection in 2022, fortnightly meetings are now undertaken, assurance process has been implemented with a maternity safety support program. The Neo Committee has been established to examine any escalations, and more equipment, increased staffing numbers, and robust policies are now ongoing. Another priority is ensuring patient voices are heard throughout the department, including in the governance process. Barts NHS Trust is now working alongside University of East London in recruiting nurses and midwives.
- Clarified that all births have been suspended at the Barkentine Practice in the Isle of Dogs, due to safety concerns. The situation was exacerbated by a national shortage of midwives at that time. Currently the centre deals with antenatal care, appointments, breastfeeding support and post Natal checkups by midwives and support workers.
- Acknowledged that as newly qualified midwives require more experience, internationally educated midwives have been recruited. The NHS Cadets programme is available for local young residents, not in education to discuss a career in the sector. The T Level students of 16 to 18 year olds can also gain experience in the postnatal ward. A report on the future population growth, health and statistics regarding anticipated maternal health in conjunction with acute provider collaboration and North East London colleagues will be published in May.

- Confirmed that there is one Somali Engagement Officer delivers antenatal care and education to the community, to improving patient experience and has received positive feedback. Consideration has been given to offering further support to residents of an Eastern European background.
- Explained that during routine antenatal consultations midwives discuss FGM with patients in a sensitive manner and make it clear that details will not be escalated to social services. Sister Circle advocates are also on hand to give support. Midwives receive mandatory training annually to understand FGM and cultural aspects around it.
- Clarified that complaints are dealt with at local resolution meetings in the first instance, where patients can discuss concerns with clinicians. The complaint is closely monitored until it is resolved. There is an open governance process, so junior staff can receive feedback Production boards are held monthly to analyse trends in complaints and key performance indicators.
- Noted that a 3 year consolidated improvement plan has been set up with various work streams following a community engagement event to fully understand patient's needs. Maternity assessments are made via the Care Quality Commission (CQC) and collaboration with the Maternity Safety Support Programme (MSSP). Details on statistics for each borough are available on the Integrated Care Board (ICB) website.
- Explained that professional midwifery Advocates (PMA) who complete additional training can provide support to other midwives who have endured challenging circumstances as a professional midwifery advocate.
- Confirmed that a dedicated perinatal mental health midwife is available in Barts Health for women who are experiencing mental health issues. A perinatal health team collaborate with clinics and multidisciplinary teams including psychiatrists across the borough. Funding has been confirmed to keep the specialist midwife post one more year.

RESOLVED that;

1. A written response to the work experience waiting times for Central Foundation Girls School to be returned to the sub-committee for review.
2. The presentation be noted.

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

Filuck Miah, Senior Strategy and Policy Officer, informed the sub-committee that the Chair as agreed initial recommendations set out in the Health Scrutiny report, which will be presented at the first meeting of the municipal year. Mr Miah then gave an overview of the recommendations:

Recommendation 1:

The Council should actively prioritise initiatives aimed at enhancing visible representation of people with disabilities within the leisure Workforce and fitness programs.

Recommendation 2:

A more comprehensive approach for collection of data driven evidence on disability access and usage.

Recommendation 3:

Developing robust disability campaigns, co designed by disability groups to promote physical activities and sports for disabled residents.

Recommendation 4:

Work with disability groups to establish a Sports and Exercise Disability Forum.

Recommendation 5:

The Council's Leisure Centre service should collaborate with Primary Care, health partners and the voluntary community sector, to support and increase access and referral points for people with disabilities and long term health conditions.

Recommendation 6:

Transitioning arrangements for specialized fitness and gym to mainstream leisure facilities.


Following the overview, members requested officers to be aware of that collection of data from disabled residents requires self-referral, which may not be forthcoming. Members also requested consideration of the proportionality within the Disability Forum and include a wide range of residents and sports.

The Chair then congratulated all members, co-optees, officers, and external guest for their participation for the last meeting of the municipal year and expressed gratitude for the meetings of the Health and Adults Scrutiny Sub-Committees.

The meeting ended at 7.57 p.m.

Chair, Councillor Ahmodur Khan

Health & Adults Scrutiny Sub-Committee

<p>Non-Executive Report of the:</p> <p>Health and Adult Scrutiny Sub-Committee</p> <p>4th June 2023</p>	 <p>TOWER HAMLETS</p>
<p>Report of: ICB and Tower Hamlets Health Partners</p>	<p>Classification: Unrestricted</p>
<p>Reflections of 2023/24 and Priorities 2024/25</p>	

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

Summary

This cover report accompanies the presentation slide deck: Reflections of 2023/24 and Priorities 2024/25

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

- Primary Care
- Acute Care
- Mental Health
- Integrated Care Board
- HAC
- Tower Hamlets Together

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.

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Primary Care

presented by Roberto Tamsanguan, Clinical Director

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Reflections and achievements	Priorities for 2024/25
<ul style="list-style-type: none"> • Digital Exclusion Policies now in every Practice and updated annually • General practice teams trained to support young people to understand the transition from parental to personal responsibility for accessing health care • Cloud based telephony in all practices, including queue functions, enabling practices to proactively manage peaks in demand through real time data monitoring, and providing a better patient experience • Pride in Practice – LGBT+ training sessions for every TH practice will ensure Primary Care is more easily accessible for this cohort of residents • Access focused patient experience surveys with a minimum of 2,668 responses across the Borough led by PCN's • The winter 'Acute Respiratory Hub' provided an additional 2,632 Primary Care appointments to TH residents between Jan and March 2024 • Extended Access provision provided 20,117 additional hours of Primary Care provision in 2023/24 • Primary/Secondary Care interface – working group to enact solutions to remove/reduce friction. This continues to be a priority. <p>*Tower Hamlets has 7 Primary Care Networks. PCNs are groups of 4-6 Practices collaborating together</p>	<ul style="list-style-type: none"> • Finalising the model for Same Day Urgent Care – improving access and availability of Primary Care for all residents to improve patient experience and reduce pressures in ED/UTC • Information events for every practice/PCN to further support patients to engage digitally if able to do so • Children and Young People – Continuing work informing CYP of their rights in healthcare via leaflet distribution to all 14 year olds and staff training. • Primary/Secondary Care Interface – continuing to work with RLH senior leadership team • Winter comms planning across system – pharmacy, self care etc to help with system winter pressures • NHS NEL preparing for potential industrial action

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. Same day access to primary care
6. Revenue implications for Practices in newly built health centres

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Acute Care

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



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Reflections and achievements	Priorities for 2024/25
<ul style="list-style-type: none">• Working collaboratively with partners across NEL• The NHS recovery & workforce remains under significant pressure – particularly in urgent care• New models of care in outpatients, in surgical pathways (high-volume low-complexity hubs), and offering ‘hospitals at home’ are evolving• The Children’s ‘H@H’ is now well-set in TH, and our virtual ward for frailty and respiratory pathways in the community is expanding• New diagnostics centre at Mile End	<ul style="list-style-type: none">• Be meticulous about the quality of our services• Improve Patient Flow through our hospital to bring hospital discharge to earlier in the day• Meet the demands for Urgent/Emergency Care against national performance standards across our health offer (from NHS111 to our pharmacies and beyond)• Reduce our waiting lists by shortening the time to takes to see & treat our elective patients• Work with partners to focus on prevention of ill-health, screening and optimum long term condition care
Ongoing pressures and challenges	
<ol style="list-style-type: none">1. Our people – retaining our workforce, developing their skills, recruiting locally and committing to their wellbeing2. Increased demand for urgent and emergency care, particularly for those with Mental Health needs3. Getting people waiting for treatment seen, and meeting their expectations across the NEL system4. Meeting the women of TH’s expectations of excellent maternity care, and hearing their voices to shape our service5. Meeting the needs of all NEL residents for high-quality highly specialised services in a timely fashion	

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Mental Health

Richard Fradgley, Director of Integrated Care and Deputy CEO East London Foundation Trust



Reflections and achievements

- **Strong partnerships** - working across our system with our Partnership Board to oversee action. To meet, discuss and learn together.
- **Deepening our relationship with social care** across adult mental health and learning disabilities. This includes opening learning and development opportunities to each other and supporting each other around CQC inspections.
- **111 crisis line roll out** – supporting people to access care where and when they need it.
- 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)
- **Tower Hamlets Talking Therapies** continue to be extremely successful at increasing access to more residents with anxiety and depression, with a particular focus on improving outcomes for minoritised communities and all Service Users
- **Strengthening the partnerships and integrated working across Children and Young people services:-**
- The **Joint Neuro-variance Diagnostics Group** is developing a shared approach to sustainable, timely and high-quality diagnostic services for neuro-variance - including Social Communication, Developmental Language Delay, Autism, ADHD and Learning Disability.
- **Tower Hamlets Education Welfare Service (THEWS)** is providing evidence-based interventions which include 1:1 work; group-work; workshops for staff, students and parents (various topics); Whole School Approach.
- **CAMHS are embedded within Tower Hamlets Children's Services,**
- Crisis, Home Treatment and Eating Disorder Services rolled out.

Priorities for 2024/25

- **Improved Staff Experience** – ensuring there are a range of developmental opportunities and well-being initiatives to boost retention and support wellbeing
- **Continuing community transformation –piloting new models of open access, 24/7 neighborhood mental health care** – we hope to be successful in responding to a national funding opportunity but will pilot aspects of the model irrespective of funding.
- **Improving the experience of care** by moving towards prevention and embedding continuity in services by working closely with Tower Hamlets community partners as a system around the person..
- **Improving and sustaining mental health inpatient care**
- **Reducing inequalities** – continued roll out of cultural awareness training to all staff, provided by the Islamic Centre; a focused workstream on primary care health checks with voluntary sector partners.
- Delivery of our mental health **prevention and promotion** plan through our Public Health Team – improving mental health awareness, resilience and challenging stigma
- **Refreshing our joint strategies** for adult mental health, autism and learning disability and launching our learning disability partnership
- **For children and young people** - We will be working together to **deliver Accelerate**, the Tower Hamlets Children and Families Partnership Strategy 2024-2029 priority 3: support for mental health and wellbeing, through the Children and Young People's Mental Health Group
- **Implementation of the 'Thrive' framework** as the cornerstone of our partnership approach to mental health services for young people. We will work as system partners to expand and invest in early intervention and prevention, and work towards integrated referral pathways.
- **Improve mental health support** for children and young people with SEND and with learning disabilities, those we look after, children in trouble with the law or children who are bereaved.
- **Improve well-being for all our children and young people** by introducing the evidence-based 'five ways to wellbeing' into play, youth, leisure and culture services.
- Ensure more children, families and professionals are aware of how to support mental health

Ongoing pressures and challenges

Inpatient mental health services have seen a sustained pressure in recent times, impacting on urgent care pathways across Tower Hamlets and resulting in increased A&E waits compared to 2022. Driven by growing numbers of new presentations, increased complexities and longer inpatient stays. Homelessness and NRPF are significant factors which also make it difficult to discharge and offer after care support.

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Health, Wellbeing & Social Care

Mr Gulam Kibria Choudhury,
Lead Member Health, Wellbeing and Social Care

Denise Radley
Corporate Director Health, Adults & Community



Reflections and achievements

- Our work with people – We received over 1400 adult safeguarding referrals into the service which we responded to and completed over 350 safeguarding enquiries. We received over 14,500 contacts into Adult Social Care and completed over 2000 assessments for people who had presenting needs for care and support. We currently support 3250 number of service users with long term care and support in the Borough.
- Mosaic – ASC core client record system simplified reducing time spent working through system pathway and reducing delays, providing benefits to both staff and residents.
- ASC Web pages improvements – We updated our resident facing web pages to ensure that we provide the most up to date information and advice to residents.
- CQC Readiness activity – Successful peer review by London ADASS in January 2024 across two of the four inspection themes – feedback included recognition of the passion and commitment of our workforce a stand-out feature.
- New Adult Social Care JSNA completed – with a detailed look at need and inequities across the ASC landscape.
- 86% of people report that they have a positive experience of our home care services
- We supported 1200 people to quit smoking – over 500 people from Black, Asian & Multi Ethnic backgrounds

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Priorities for 2024/25

- CQC Inspection Readiness – we will seek to streamline this activity into business as usual with an overarching Transformation and Improvement plan and appropriate governance.
- Improvements: We will be working to improve our reablement and hospital discharge offer to residents. Now we have an in house Direct Payment service, we will seek to improve our Direct Payment offer.
- Free Community Care – we will be updating our charging policy to implement from Community Care from April 2025.
- Finalising our ‘Housing with Care Strategy’ and planning for the development of more supported accommodation
- Implement an enhanced Technology Enabled Care offer
- Begin implementation of the new Combatting Drugs Partnership strategy including new premises to support culturally appropriate provision

Ongoing pressures and challenges

1. Increased demand & complexity pressures in Adult Social Care resulting in ongoing budget pressure alongside a need to find savings across the Council
2. Preparing for the new inspection of Adult Social Care by the Care Quality Commission
3. No progress on Adult Social Care reform or funding nationally
4. Entrenched health inequalities & the impact of cost-of-living crisis
5. Changes in the NHS and the impact locally



Tower Hamlets Together

Who are we?

THT is a partnership of health and care organisations that are responsible for the planning and delivery of health and care services. The partnership includes:

- London Borough of Tower Hamlets
- NHS North East London Integrated Care Board
- Tower Hamlets GP Care Group
- East London NHS Foundation Trust
- Barts Health NHS Trust
- Tower Hamlets Council for Voluntary Service
- Healthwatch Tower Hamlets

THT is all about health and social care organisations working more closely to improve the health and lives of people living in Tower Hamlets. This means a more coordinated approach to providing services, reducing duplication and improving the overall experience and outcomes for the people who need them.

What are our driving values?

THT VALUES

- We are compassionate
- We collaborate
- We are inclusive
- We are accountable



What are we trying to achieve?

OUR VISION

- Tower Hamlets residents, whatever their backgrounds and needs, are supported to self-care, thrive and achieve their health and life goals
- Health and social care services in Tower Hamlets are accessible, high quality, good value and designed around people's needs, across physical and mental health and throughout primary, secondary and social care
- Service users, carers and residents and children are active and equal partners in health and care, equipped to work collaboratively with THT partners to plan, deliver and strengthen local services
- All residents - no matter their ethnicity, religion, gender, age, sexuality, disability or health needs - experience equitable access to and experience of services, and are supported to achieve positive health outcomes

OUR MISSION

Support all children and adults to live happy and healthy lives in Tower Hamlets, through providing integrated services that are accessible to all and actively tackle health inequalities, particularly those caused by systemic racism.

OBJECTIVES

1. Building the resilience and wellbeing of our communities
2. Maintaining people's independence in the community
3. Reducing the time people need to be in hospitals/care homes

RESIDENT OUTCOMES

- I feel like services work together to provide me with good care.
- I am able to support myself and my family financially.
- I am supported to make healthy choices.
- Regardless of who I am, I am able to access care services for my physical and mental health.
- I have a good level of happiness and wellbeing.

PRIORITIES FOR ACTION

1. Improving access to primary and urgent care.
2. Building resilience and self-care to prevent and manage long term conditions
3. Implementing a localities and neighbourhoods model
4. Facilitating a smooth and rapid process for hospital discharge into community care services
5. Being an anti-racist and equity driven health care system
6. Ensuring that babies, children and young people get the best start in life
7. Providing integrated mental health services and interventions



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