

LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE HEALTH & ADULTS SCRUTINY SUB-COMMITTEE

HELD AT 6.35 P.M. ON TUESDAY, 1 DECEMBER 2020

ONLINE 'VIRTUAL' MEETING - [HTTPS://TOWERHAMLETS.PUBLIC-I.TV/CORE/PORTAL/HOME](https://towerhamlets.public-i.tv/core/portal/home)

Members Present:

Councillor Gabriela Salva Macallan (Chair)
Councillor Mohammed Pappu (Vice-Chair)

Councillor Shad Chowdhury
Councillor Andrew Wood
Councillor Shah Ameen
Councillor Denise Jones

Co-opted Members Present:

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

Other Councillors Present:

Councillor Rachel Blake – (Deputy Mayor and Cabinet Member for Adults, Health and Wellbeing)

Officers Present:

Dr Somen Banerjee – (Director of Public Health)
Claudia Brown – (Divisional Director of Adults Social Care)
Tracy Cannell – Chief Executive
Phil Carr – (Strategy and Policy Manager, HAC)
Kelvin Hankins – Deputy Director of Unplanned Care
Jack Kerr – Strategy & Policy Manager
Ellie Kershaw – (Tackling Poverty Programme Manager, Benefits)
Ibrahim Khan – Public Health Programmes Lead
David Knight – (Democratic Services Officer, Committees, Governance)
Katie O'Driscoll – Principal Social Worker
Denise Radley – (Corporate Director, Health, Adults & Community)
Jackie Sullivan – Chief Executive Officer Royal London & Mile End Hospitals
Joanne Starkie – (Head of Strategy and Policy - Health Adults and Communities)

Warwick Tomsett

– Joint Director, Integrated Commissioning

Jamal Uddin

– Strategy Policy & Performance Officer

Ruth Walters

– Director of Quality Assurance

1.1 WELCOME AND INTRODUCTIONS

The Chair welcomed everybody to the meeting and asked attendees to introduce themselves.

1.2 DECLARATIONS OF INTERESTS

No declarations of interest were received at the meeting.

1.3 MINUTES OF THE LAST MEETING OF THE HEALTH AND ADULTS SCRUTINY SUB-COMMITTEE

The Sub-Committee confirmed as a correct record the minutes of the last meeting of the Health Scrutiny Sub-Committee held on 23rd July, 2020. The Chair authorised to sign.

1.4 APPOINTMENT OF THE VICE-CHAIR

The Sub-Committee agreed to appoint Councillor Mohammed Pappu as the Vice-Chair for this Municipal Year.

1.5 INNER NORTH EAST LONDON JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE (INEL JHOSC) - TOWER HAMLETS VACANCY

Noted that the INEL JHOSC comprises of London Boroughs: Hackney, Newham, Tower Hamlets and City of London Corporation. The committee's remit is to consider London wide and local NHS service developments and changes that impact all the authorities mentioned.

Noted that the INEL JHOSC membership requires three non-executive Councillors from Tower Hamlets to form part of the membership. There is currently one vacancy from Tower Hamlets and the committee is required to nominate a new member.

Accordingly, the Sub-Committee **RESOLVED** that:

- Cllr Gabriela Salva Macallan will continue to **attend** INEL JHOSC meetings in her capacity as the HASC Chair.
- Cllr Shad Chowdhury will **step down** due to personal reasons.
- Cllr Mohammed Pappu (Vice chair of HASC) and Cllr Shah Suhel Ameen be **appointed** as the other representatives on the INEL – JHOSC.

In addition, the Sub-Committee agreed that:

- Inner North East London Joint Health Overview and Scrutiny Committee should be asked to explore the idea of a “Patient Voice” where individuals/organisations offer advice to INELJHOSC.
- It will need to consider how best to make such a recommendation to INELJHOSC.

2. HEALTH AND ADULTS SCRUTINY SUB-COMMITTEE (HASC) WORK PROGRAMME 2020-21

The Sub-Committee received and noted the Work Programme for the 2020-21 Municipal Year the main points arising from the discussion maybe summarised as follows:

The Committee noted that there would be:

- “Deep Dive” State of care homes throughout the epidemic looking at those where there are LBTH residents (Older persons; young people and learning disability and not just in Tower Hamlets, to look at what lessons have been learned/practical steps taken and committee to make recommendations.
- Spotlight Session Adult Learning Disabilities revisiting the March 2020 report to look at those findings and receive an updated report and agree any recommendations, Councillor Kahar Chowdhury to attend.

3. TOWER HAMLETS COVID-19 WINTER PLANS 2020-21 (JOINT PRESENTATION)

The Committee received and noted a joint presentation on the increased pressure on the health and social care system due the significant additional challenges given the ongoing COVID-19 pandemic. A summary of the discussions may be summarised as follows:

The Sub-Committee noted that:

- The Tower Hamlets Adult Social Care Winter Plan 2020-21 sets out their preparedness for the upcoming winter period and reflects the requirements set out in the national Adult Social Care Winter Plan. The plan is aligned to the Outbreak Control Plan and to Winter Plans held by health partners.
- It is a requirement for each Local Authority to have in place an Adult Social Care Winter Plan by 31 October as described in the national Adult Social Care Winter Plan.
- This plan was presented to Cabinet on 28 October and together with Tower Hamlets System Winter Plan 2020-21 and is now being presented to Health and Adults Scrutiny sub-committee for information.
- Covid presents specific risks to people experiencing homelessness; people rough sleeping or living in temporary accommodation are in a high-risk group, many with long term conditions, that mean becoming infected with the virus could have severe consequences. However,

some homeless patients had apparently been discharged straight back to the streets; often without their housing or underlying health problems having been addressed.

- It was understood that hospitals, local authority housing teams and voluntary sector organisations had a clear process from admission through to discharge to ensure homeless patients are discharged with somewhere to go and with support in place for their on-going care.
- Whilst NHS hospitals across the capital can treat the acute illnesses and injuries of patients who are homeless, they do not have the resources to give them time to recuperate before safely discharging them back into the community. To address this, since April to help ease the burden on NHS hospitals and provide the care that these patients need the Mildmay is utilising the expertise of its doctors, nurses, and therapists to ease the burden on NHS hospitals by providing rehabilitative healthcare for people who are homeless or rough-sleeping and recuperating from illness or injury.
- This frees up NHS beds and provides respite for this vulnerable cohort, with a far better chance of a safe and full recovery. Once discharged from, the aim is that people will be supported by specialist homelessness provision. In addition, within Tower Hamlets the relevant teams have been working together to purchase additional accommodation and during the first wave of Covid additional accommodation was purchased for the homeless persons so that was part of the availability for people being discharged from the Royal London in addition to the existing hostels pathway. However, it was noted that if there are examples of where there have been discharges onto the streets these should be drawn to the attention of the relevant officers.
- Regarding people leaving hospital who have tested positive for COVID-19 and are transferring to a care home (and elsewhere) the priority is to ensure that everyone receives the right care, in the right place, at the right time, and the prevention of infection. Also, to ensure that the wellbeing of residents and their relationships with friends and family is considered and supported.
- The Integrated Hub came into being in April 2020 with the aim of facilitating rapid discharge for adult patients declared medically fit to return to their place of residence or a new care placement. This involved establishing immediate health and social care support.
- In terms of mental health support North East London NHS Foundation Trust (NELFT) have re-provisioned their acute services so that they can treat people with Covid effectively through ensuring they can be discharged swiftly through to the right place; with any ongoing care they need. However, if there have been any difficulties with this service then officers are happy to look at that separately.
- NELFT have re-provisioned their services predominantly by looking at online and telephone-based support to patients and carers. Accordingly, officers would welcome any feedback about how that is going, and if carers have experienced difficulties or indeed if people have found it problematic to get their mental health support. In

addition, NELFT is extremely interested in looking at that because as with all the providers they are keen to keep adapting their services so that they can continue to offer them in the in the most sensible way during the during the pandemic.

- The coronavirus has had a severe impact on the Boroughs poorest and most vulnerable especially those who are without access to the internet and therefore at risk of being left behind as services move online unless there are offline alternatives.
- They would be provided with details on the flu vaccines in relation to the Borough (**Subsequent to the meeting the following was provided**):

- a) The number / % of residents in the borough who qualify for a flu vaccine who have received it?

Note: the data provided by CCG was up to 13/12/2020, covering those registered with a Tower Hamlets GP, excluding eligible school-aged children as it is administered by Vaccination UK based on the following eligible cohorts:

- Patients aged 65 as of 31st March 2021
- Patients aged 6m to 64y at clinical risk (excluding healthy pregnant, carers, and healthy 2-3y olds)
- All children aged 2 or 3 as of 31st August 2020
- All pregnant women
- Carers

Total eligible population 77,598

Total vaccinated 38,920

Total uptake 50.2%

- b) What age children are eligible for the flu vaccine?

Children from 6 months up to 18 years of age at clinical risk

All children aged 2 or 3 as of 31st August 2020

School-aged children (all children in primary school and all Year 7 secondary school-aged children)

- c) What is the data on the number/percentage of those eligible who have received it?

- All children aged 2 or 3 as of 31st August 2020
- Eligible: 8,114
- Vaccinated: 3,031
- Uptake: 37.4%
- School-aged children (all children in primary school and all Year 7 secondary school-aged children)
- Whilst the figures of eligible children for each school year is not available the uptakes reported are:

Reception: 38.2%
Year 1: 37.1%
Year 2: 37.9%
Year 3: 38.9%
Year 4: 36.1%
Year 5: 35.3%
Year 6: 31%
Year 7: 24%

- d) The number/percentage of the council workforce who have had the flu vaccine?

As of 30 November, 12% of the council workforce have been recorded as taken the flu vaccination.

This equals 697 staff members based on workforce figures of 5806 as of Jul 2020.

The Councils target for this year was to vaccinate 60% of the workforce, which is a total of 3513 (based on workforce figures above).

The data does capture those who had their vaccination at their GP/Local Pharmacy providing staff record this on HR Self Service (HRSS).

HRSS is the main data source hence the Councils comms asking all staff irrespective of their vaccination route to update HRSS – this is to enable future benchmarking of take up. The number of staff that have got vaccinated via the workplace scheme as of November 2020 are 363 with 334 being vaccinated via their GP/Local Pharmacies.

- The NHS will offer the COVID-19 vaccine to people most at risk from coronavirus. In London, the vaccine will be offered in some hospitals and pharmacies and local vaccination centres.
- The order in which people will be offered the vaccine is based on advice from the Joint Committee on Vaccination and Immunisation (JCVI).it will be given to:
 - people aged 80 and over.
 - people who live or work in care homes; and
 - health and social care workers at high risk.
- The vaccine will be offered more widely as soon as possible.

The Chair Moved and it was: -

RESOLVED to:

1. Note the Adults Social Care Winter Plan 2020-21 and Tower Hamlets System Winter Plan 2020-21.

4. COVID-19 CARE ACT EASEMENTS - PRESENTATION

The Sub-Committee received a presentation in respect of the Care Act easements guidance that:

- Outlined how Tower Hamlets can use the new Care Act easements, created under the Coronavirus Act 2020, to ensure the best possible care for people in our society during the COVID-19 pandemic; and
- Provided further details on the purpose of the Care Act easements and when to use it; and
- Details on steps that Tower Hamlets is taking to ensure there is no need to put in place Care Act easements in the Borough.

The main points of the discussion maybe summarised below:

The Sub-Committee noted that

- It is an absolute priority for LBTH to make sure that those that need support and those that contact the Council received that support in a timely way.
- LBTH work on a risk-based response mechanism and now officers are developing an approach so that the Council have consistency and monitor waiting lists.
- Any issues arising from this process should be drawn to the attention of the relevant officers
- There have been issues regarding apparent delays in assessments by the Occupational Therapy (OT) Team and the impact that this has had on everyday activities; quality of life and the independence of those affected. In response it was noted that based on current trends, demand for the Service has outpaced the supply of occupational therapists nationally. The Team have accordingly undertaken a recruitment campaign and have been successful in recruiting a number occupational therapists that should help to address the waiting for equipment or adaptations.
- The Team are also having conversations with adult social care and care providers to understand their perspective of the service.
- The Service ensures that they respect and protect their client's human rights when providing their services and have provided some learning and development session for their workforce on assessing against human rights violations. This has been done in partnership with the

Councils legal team and with guidance published on the Councils Adult Social Care internal intranet pages where staff can find a list of resources to access alongside the guidance around human rights violations. Therefore, should LBTH find itself in a circumstance where officers need to undertake an assessment under Care Act easements they would have that information at hand and be able to understand how many people had been assessed as having had a human rights violation.

- The following rights being the most relevant when you receive health or care services (i) article 8 - the right to respect for private and family life; (ii) article 3 - the right not to be tortured or treated in an inhuman or degrading way; and (iii) article 2 - the right to life.
- The Service needs to understand from a case law perspective where the boundary is in terms of whether breaches are evident and obviously they would work very closely with the legal team in those situations where it was more of a challenge to agree a formal decision. However, what the Service has done is make sure that they have equipped their workforce as much information as possible to be able to respond appropriately and provide them with the relevant reference tools.
- Those undertaking Care Act statutory assessments would be qualified professionals who are trained in such work.
- The Service are working to ensure there is no need to put in place Care Act easements in the Borough.

The Chair Moved and it was: -

RESOLVED to note the presentation.

5. TOWER HAMLETS RESPONSE TO COVID-19:

5.1 Tower Hamlets Local Test and Trace Briefing

The Committee received and noted a briefing on the Local Test and Trace. A summary of the discussions is set out below:

The Sub-Committee noted that:

- NHS Test and Trace is a national programme which ensures that anyone who develops symptoms of Covid-19 can be tested quickly. It also helps trace close recent contacts of anyone who tests positive for coronavirus and notify them so that they can stay at home (self-isolate) and help stop the spread of the virus.
- Residents must take the following steps if they have coronavirus symptoms or are contacted by NHS Test and Trace and told that they have been in close contact with someone with Covid-19. If they have one or more symptoms of Covid-19, which are a high temperature, a new, continuous cough, or a loss of, or change in, their normal sense of taste or smell, they must immediately self-isolate.

- They must then book a test through NHS.UK or call NHS 119. Testing being available for anyone who has symptoms.
- If they test positive, they will be contacted by NHS Test and Trace who will help them identify who they have been in close contact with and will ask for their contact details. They must then isolate for 10 days, whilst people identified as having been in close contact with someone who has a positive test must stay at home for 10 days, even if they do not have symptoms.
- One of the key things to say about the programme is that it was introduced as a national model and there were always going to be issues about how effectively it would work at the local level and particularly with local populations which are remarkably diverse and deprived like that in Tower Hamlets.
- As the programme was implemented what became apparent that was that it was not effectively contacting everyone in the resident population who was testing positive and so generally it was contacting about 80 percent of those who were testing positive. Therefore, when they were significant outbreaks after the first wave in cases such as Leicester and Blackburn the national programme was not managing to contact all positive cases and not being able to limit transmission in those areas. Therefore, a local test and trace programmes has been developed to complement the national programme.
- Tower Hamlets was one of the early adopters of such a programme and it is important to say that when talking about local test and trace programmes the focus of the programme is only on contacting those positive cases that the national programme has been unable to contact.
- Tower Hamlets programme is a little bit different to other programmes that have been developed across London in that it has commissioned from the Tower Hamlets GP care group. Therefore, once somebody with symptoms gets notified of the test results the GP care group contact those people to (i) check-up that they know that they have tested positive; (ii) collect information about their contacts; (iii) make sure that their isolating; (iv) see if they need any support whilst in isolation.
- The GP care group looked at who was best place to facilitate this work and established a team of people who had worked in social prescribing, trained advocates, and interpreters from within GP practices. Hence they (i) knew the local communities; area and services; and (ii) used locally produced scripts which are appropriate for a particular group.
- The Team contacted individuals through a variety means and as mentioned they talked them through the normal contact tracing requirements to identify their contacts and if they required any help or assistance **e.g.** financial; clinical; or assistance with shopping so that they can stay in isolation successfully and complete that period at home in the best way possible.
- Once the Team has completed the contact that information is feed back to the National Contact Tracing Team and the Borough's Public

Health Team to make sure that LBTH collects any additional information to help to respond to the Pandemic. This also enables the relevant agencies to see how well the services are developing and partners can learn from each other and share their experiences so that services can be strengthened across the local health network.

The Chair Moved and it was: -

RESOLVED to note the briefing.

5.2 Supporting Clinically Extremely Vulnerable (CEV) residents - Local response

The Sub-Committee received a report and presentation the detailed the Council's response to supporting those considered to be Clinical Extremely Vulnerable (previously known as shielding). The presentation covered; policy update and guidance to CEVs during current lockdown; the Council's response to supporting CEV residents; and the latest reporting on contacts and support provided. A summary of the discussions may be summarised as follows:

The Sub-Committee noted that:

- 30 percent of the calls to **residents** have acknowledged that some support was required and probably 20 percent of calls to **residents** identified a need for a significant level of support in terms of the complexities of discussions.
- 50 percent of residents do not have either a valid phone number for or do not actually respond to those telephone calls and therefore officers have started to put a programme of "door-knocking" together.
- If officers get no answer on the doorstep they leave a sealed envelope asking the resident to contact Public Health.
- Whilst the "door-knocking" programme in the Borough has only started recently in other Boroughs have reported up to 50 percent of people that they have contacted in this way have been able to contact afterwards which indicates a significant response in achievable using this method.
- The data is collected with the consent and used in the manner explained when the residents are making the decision to participate.
- That clear and user-friendly information serves to help promote voluntary participation and ensure residents are making informed choices to participate and are aware of the (i) purpose of the data collection; (ii) type of data that will be collected; (iii) the time-period the data will be held; and (iv) the benefits of the data collection.
- That one of the key strengths of this way of doing thing is that public health agencies then have a resident's ethnicity/location which can be linked to other elements of their health records.
- That self-isolating can be difficult, but it is important to stop coronavirus (COVID-19) spreading to other people. Help and support is available

with everyday tasks from an NHS volunteer who can assist with (i) collecting shopping and (ii) collecting medicines and prescriptions.

- That if a resident is on a low income and they are asked to self-isolate by NHS Test and Trace, they may be able to get a £500 Test and Trace Support Payment.
- Over Christmas, every child eligible and claiming Free School Meals will receive a £25 voucher through their school, for either Tesco or Asda. Whilst schools have also been asked to identify those not eligible for FSM but who they are concerned about and vouchers will be provided to 18,600 children which is funded through the DWP Covid Winter Grant to support children, families and the most vulnerable.
- The Council's Residents' Support Scheme supports residents who are either in or at risk of being in crisis and require immediate help and have no source of financial support available to them. The Scheme helps with short-term living costs such as food and gas/electric prepayment meters. It can also help in some circumstances with white goods and furniture.
- The Scheme so far this year has paid out £680,000 worth of grants to support those in need.

The Chair Moved and it was: -

RESOLVED to:

1. Note work underway or planned to support CEV residents

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

Nil items

The meeting ended at 8.25 p.m.

**Chair,
Health & Adults Scrutiny Sub-Committee**