

# Health and Social Care Scrutiny Sub-Committee

## Minutes

### 11 November 2021

**Present:**

**Chair:** Councillor Rekha Shah

**Councillors:** Michael Borio  
Hitesh Karia  
Dr Lesline Lewinson  
Kairul Kareema Marikar

**Advisers:** Julian Maw

**115. Minute Silence**

The Sub-Committee observed a minute silence for the late Councillor Vina Mithani, a vice-chair of Health and Social Care Scrutiny Sub-Committee.

Members and officers paid tribute to the late Councillor Vina Mithani.

**116. Membership**

**RESOLVED:** That the Sub-Committee welcomed Councillor Hitesh Karia as a main Member of the Health and Social Care Scrutiny Sub-Committee.

**117. Attendance by Reserve Members**

**RESOLVED:** To note that there were no Reserve Members in attendance.

## **118. Declarations of Interest**

**RESOLVED:** To note that the declaration of interests, which had been published on the Council website, be taken as read and that during the course of the meeting:

- (1) Councillor Kairul Marikar, a member of the Sub-Committee, declared a nonpecuniary interest in that she worked for Hertfordshire NHS Trust and CNWL NHS Trust. She would remain in the room whilst the items were considered.
- (2) Councillor Michael Borio, a member of the Sub-Committee, declared a nonpecuniary interest in relation to item 10: Covid and Vaccinations Update for Harrow in that he worked for the Department for Education. He would remain in the room whilst the item was considered.
- (3) Councillor Hitesh Karia, a member of the Sub-ommittee, declared a nonpecuniary interest in that he was a Director of a domiciliary care company. He would remain in the room whilst the items were considered.

## **119. Minutes**

**RESOLVED:** That the minutes of the meeting held on 22 June 2021, be taken as read and signed as a correct record.

## **120. Appointment of Vice-Chair**

**RESOLVED:** To appoint Councillor Dr Lesline Lewinson as Vice-Chair of the Health and Social Care Scrutiny Sub-Committee for the remainder of the 2021/2022 Municipal Year.

## **121. Public Questions \***

**RESOLVED:** To note that no public questions had been received.

## **122. Petitions**

**RESOLVED:** To note that no petitions had been received.

## **123. References from Council and Other Committees/Panels**

None received.

## Resolved Items

### 124. Covid-19 and Vaccinations Update for Harrow

The Sub-Committee received a presentation from Harrow Council's Director of Public Health and NHS staff which outlined the current position with regards to Covid in the borough as well as updating the Sub-Committee on progress with the vaccination programme. The following key points were raised:

- The case rate for London had been generally lower than surrounding areas, with highest rates found in Cumbria, however cases were also high in parts of West England, Bedfordshire and St Albans. As of 5<sup>th</sup> of November 2021 654 cases had been reported in Harrow in the previous 7 days.
- The 11 – 16 age group continued to have the highest rate of cases; however, this had halved due to the half term break, this being said the number of LFD recordings had also decreased during this period. However, no significant rise in cases had been seen in any age group.
- Since the 1<sup>st</sup> of October 2021, 70 Harrow residents had been admitted to hospital due to Covid-19, 36 were vaccinated with the majority of the 36 vaccinated were 60 or older. This had shown that those unvaccinated were twice as likely to be admitted with covid. In addition, intensive care data had shown that only 1 in 5 were vaccinated.
- Those that lived in affluent parts of Harrow were more likely to be vaccinated compared to those that lived in the most deprived parts of Harrow, in addition, people of black heritage and people in white ethnic groups had remained the least likely to be vaccinated.
- A local consultation had been planned to find out why people had chosen to have their first vaccination now as opposed to when they were first eligible. The information gathered would be used to encourage uptake of the vaccine, particularly to areas that had a lower uptake.
- That 284,000 vaccinations had been administered within Harrow, where GP practices, pharmacies and vaccination centres had been used for the vaccine to be delivered.
- Primary, mental health and acute care systems had returned to business as usual with the backlog of cases to be addressed a key challenge, whilst the vaccination programme continued.
- A target had been set for community engagement over vaccination uptake to be improved and for a number of approaches to be used.
- More than 75% of Harrow's population had already received their booster vaccination.

- Only 40% of children in north west London had been vaccinated.

The Chair thanked officers and NHS representatives for their updates and asked a number of questions, which were responded to as follows:

- Asked if contingency plans for local outbreaks had been planned as part of the winter plan and what additional ward space and equipment had been identified at Northwick Park Hospital. The Deputy Chief Executive of London North West University Healthcare NHS Trust explained that a winter and contingency plan had been made for the hospital, which included how additional ward space would be created. In addition, it was planned that some elective activity may be reduced for bed space to be created; for critical care capacity to be expanded and additional funding had been received. It was emphasised that the timely discharge of patients needs to be maintained for bed space to be supported, investment in the discharge team had been made.

The Member asked for further details on how the trust were balancing the demand for planned/diagnostic procedures and covid specific care. An NHS staff member noted that there had been a low number of patients with long-covid admitted and that efforts had been made for the patient waiting list to be reduced. The Chief Executive for London North West University Healthcare NHS Trust added that the workforces needed to be supported and for new staff to be recruited in order for elective activities to continue and to cope with winter pressures as it had been predicted that the situation would get worse.

- It was raised that residents potentially faced information fatigue regarding covid vaccinations and therefore asked NHS staff how this might be tackled such as using key community influencers. An NHS staff member explained that that had been a challenge, however, there were community champions who supported engagement with communities.
- It was asked by a Member if initiatives were undertaken to support recruitment, to which the Chief Executive for London North West University Healthcare NHS Trust noted that work had been undertaken the past 12 months to streamline the recruitment process. There had been a dependency on overseas recruitment, particularly in nursing had been negatively impacted during the pandemic.

London North West University Healthcare NHS Trust's Chief Nurse added that the vacancy rate for trained health care support workers was less than 5%. This was due to a substantial recruitment drive. However it was the recruitment of a highly technical registered workforce. Significant vacancies included: qualified nurses and antitheists where recruitment drives had been planned at a national level and was considered a long-term issue due to the years required for qualifications.

In addition, a mapping exercise had been undertaken that looked at those who worked in healthcare support role who held a registered qualification in their country of origin. It was found that 96 people in the trust held such qualifications. However, it had proven difficult for these staff members to provide evidence or obtain the nationally required qualifications in maths and English, a pilot scheme had been offered to 14 Afghanistani refugees with health qualifications.

- A Member asked if there were indications to suggest that face to face appointments would increase given that the current infection rate had still been worrying. The Borough Director for Harrow NWL CCG added that some residents welcomed the use of digitised consultations, however, there were residents who had preferred to see their GP face to face and that plans were underway to increase face to face consultations as the government had set a target of at least 50% of consultations to be in person.

The Member asked if the reduction of face to face consultations had raised the number of A&E visits, to which the Borough Director for Harrow NWL CCG noted that a lot of patients had not wanted to go in to either A&E or their GP practice and that more recently demand had risen in both care services.

- A Member asked why Harrow had not been tendering new agencies and what were the costs of this. London North West University Healthcare NHS Trust's Chief Nurse explained that there was strict criteria in place in order for agencies to be on the NHS framework and that only agencies that had been approved were to be used.
- Concern was raised over the challenges for those who had learning disabilities and for those who were elderly faced when it came to accessing their GP digitally and asked if priority had been given to vulnerable groups when it came to face to face GP appointments. An NHS staff member explained that surgeries had asked residents who were able to book appointments online to do so in order for phonelines to be alleviated for those who were digitally excluded. A patient's records would show if they were vulnerable and therefore the appropriate action could be taken. In addition, surgeries were now open to residents to walk and to speak to a receptionist.

This was followed by concern raised over the consistency of these procedures to support vulnerable patients across all surgeries within Harrow, to which the Borough Director for Harrow NWL CCG reassured that data had been utilised so that weak points of surgeries could be managed.

**RESOLVED:** That the report be noted.

## 125. Update from the CQC Inspection of Services at Northwick Park Hospital

The Sub-Committee received a report from London North West University Healthcare NHS Trust's Chief Nurse, which provided an update on the Care Quality Commission (CQC) inspection in April 2021 of Maternity and A&E services provided by London North West University Healthcare NHS Trust (LNWHT) at Northwick Park Hospital. The following key points were raised:

- A CQC visit had taken place at Northwick Park Hospital in April 2021, where two departments were visited: Maternity Services and the emergency department.
- The overall rating for the Trust remained to be “required improvement” however inspectors had noted significant improvements within the emergency department.
- The CQC rated Maternity services as inadequate and had found areas of serious concern. A full improvement plan for maternity services had been developed in response to the issues found. This plan consisted of three themes which were: workforce, culture and leadership; women-centred care and safe, effective care.
- Improvements had been made to their systems and processes at Northwick Park Hospital, in addition a new leadership team had been introduced which had made a positive difference.
- Freedom to speak up champions were introduced which had given staff who might otherwise had been afraid to report concerns. In addition, a zero tolerance of bullying stance had been taken.
- The maternity improvement plan was reviewed on a weekly basis, the internal maternity improvement group would meet on a monthly basis ensuring the plan would be delivered. The ICS had operated a fortnightly check and challenge meeting within the Maternity ward which had since moved to a monthly meeting.
- A priority remained for appointments in key leadership posts to be made. In addition, an organisational development plan had been implemented in order to support and nurture teams. However, vacancy rates remained a challenge and were highlighted to be a long-term issue.
- Progress had been made and there was a focus for long-term strategic plans to be implemented for success to be ensured.
- General feedback from the CQC had been received and included improvements in staff attitudes, behaviours and morale were to be seen. Significant improvements in documentation were also noted and that it was recognised that changes made were required to be embedded into their structure.

The Chair thanked officers and NHS representatives for their updates and asked a number of questions, which were responded to as follows:

- A Member noted that it was good for some progress to be seen but aware that more work was needed. It asked how working cultures differed between departments within the same hospital and what mechanisms were in place to allow for shared learning. The interim CEO at London North West University Healthcare NHS Trust explained that they had identified a need for excellent clinical leadership where there would engagement, staff would be supported and that diversity and inclusion were embraced would have a positive impact on work place culture. It was noted that the new structure in the maternity unit had met these values.

The London North West University Healthcare NHS Trust's Chief Nurse added that a key challenge for improved learning within the maternity ward had been that the ward was geographically isolated compared to other units within Northwick Park Hospital. A buddy system for maternity ward based matrons to shadow other matrons had been implemented and secondments to other hospitals had been planned in order for learning to take place at different settings.

- A Member asked how the Trust had compared to other Trusts in terms of vacancy and sickness rates within the maternity services. The London North West University Healthcare NHS Trust's Chief Nurse explained that Northwick Park Hospital had high vacancy rates at band 6. However, high vacancy rates were noted to be a London wide issue. They added that turnover had been high but had seen an improvement.
- A Member asked, with the shortage of midwives, had these duties been delegated to other staff. The London North West University Healthcare NHS Trust's Chief Nurse explained that maternity support workers though not qualified midwives had received additional training that was appropriate to support patients. In addition, services had been consolidated in order for safety issues to be managed.
- A Member noted that targets set that could be measured regularly would be of benefit when considering accountability. The interim CEO at London North West University Healthcare NHS Trust explained that a series of metrics had been put into place that were agreed with the service and clinicians, these metrics were reviewed monthly at the internal maternal improvement group meetings, so that progress could be ensured. In addition, objectives had been set for the leadership team and metrics were discussed fortnightly amongst the directorship.
- The Chair asked if there were areas of the maternity service that required more attention compared to other parts of the service, to which the London North West University Healthcare NHS Trust's Chief Nurse explained the triage service and the labour ward had been of focus due to their high risk nature. In addition they noted that

community services were in need of modernisation with technology raised as an area in need of improvement.

- The Chair asked how the needs of local residents had been considered with Northwick Park Hospital. The London North West University Healthcare NHS Trust's Chief Nurse highlighted that there had been a need for the language and translation services to be better utilised so that accessibility could be improved.

The Chair thanked the Sub-Committee for their questions and thanked the NHS Staff for their presentation and answers and wished the NHS staff all the best for the future.

**RESOLVED:** That the report be noted.

#### **126. Update from NW London Joint Health Overview & Scrutiny Committee**

The Committee received a report from Harrow Council's Director of Strategy & Partnerships which provided an update on discussions held at the meeting of the NW London Joint Health Overview and Scrutiny Committee (JHOSC) on 23 September 2021.

**RESOLVED:** That the report be noted.

#### **127. Any Other Business**

(Note: The meeting, having commenced at 6.30 pm, closed at 8.32 pm).

(Signed) Councillor Rekha Shah  
Chair