

REPORT FOR:

HEALTH AND SOCIAL CARE SCRUTINY SUB- COMMITTEE

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| Date of Meeting: | 14 March 2017 |
| Subject: | Access to Primary Care in Harrow – Report from Health Scrutiny Members |
| Responsible Officer: | Alex Dewsnap, Divisional Director, Strategic Commissioning |
| Scrutiny Lead Member area: | Health: Policy Lead – Councillor Kairul Kareema Marikar Performance Lead – Councillor Vina Mithani |
| Exempt: | No |
| Wards affected: | All |
| Enclosures: | Access to Primary Care in Harrow – Report from Health Scrutiny Members |

Section 1 – Summary and Recommendations

This report presents health scrutiny members' findings and recommendations from their work on access to primary care within the borough over the last 18 months. The intelligence pulled together in this report comes from a variety of sources and focuses on walk in centres and GP surgeries.

Recommendations:

The Sub-Committee is asked to recommend to the Overview and Scrutiny Committee that it:

1. Consider and endorse the report from health scrutiny members;
2. Forward the review's report and recommendations on to the relevant agencies, as identified in the recommendations, for consideration and response;
3. Agree that the Health & Social Care Scrutiny Sub-Committee revisit primary care access and the implementation of this report's recommendation in its work programme for 2017/18.

Section 2 – Report

Background

Over the last 18 months health scrutiny members have conducted visits and pulled together some local intelligence around residents' access to primary care. This is an issue identified locally as needing attention and reflected in the numbers attending the Urgent Care Centre (UCC) at Northwick Park Hospital which was aimed at relieving pressures on A&E. It is also especially important given the stretched capacity at Northwick Park Hospital and with the hospital being asked to take on more capacity as a consequence of the Shaping a Healthier Future (SaHF) programme.

Members' visits focused on the boroughs' walk in centres (late 2016/early 2017) and the intelligence used from other sources included the Council's community engagement evidence for the Independent Healthcare Commission (summer 2015) as well as Healthwatch Harrow's recent and ongoing research on accessibility of GP surgeries. Members have also drawn on the intelligence from their discussions with local people and healthcare providers through their sub-committee work, their role on the NW London Joint Overview and Scrutiny Committee examining the implementation of the SaHF programme regionally, CQC inspection reports of local services, their roles as scrutiny leads, as well as residents' concerns brought to members' attention in their roles as local councillors and health champions.

The nature of health scrutiny members' enquiries is not a comprehensive scrutiny review but rather a snapshot look using intelligence pulled together over the last 18 months to build up a picture of local trends or recurring issues identified through various sources. The main focus of the recent scrutiny visits was Walk In Centres and the Healthwatch Harrow research focussed on GP surgeries, and therefore most of the report's observations relate to GP access (surgeries and walk in centres).

The aim of the work is to provide strategic support and a residents' perspective to the local CCG and NHS who strategically plan local services around access to primary care, as well as identifying what councillors as community leaders can do to encourage residents to make best and most appropriate use of the healthcare resources available to them in Harrow.

Members' observations

Observations from health scrutiny members' review of access to primary care in Harrow are summarised under the following themes:

- Accessing care appropriately
- Educating people
- One size does not fit all
- Changing community habits
- Relieving or shifting the pressures on local healthcare sectors?
- Workforce considerations
- Continuity of care
- Redirection and signposting
- Developing local services

Report recommendations

Health scrutiny members' recommendations in their report are as follows:

- **RECOMMENDATION 1 (TO ALL COUNCILLORS AND HARROW CCG):** That Harrow CCG and councillors work together to ensure that councillors use their role as community leaders to help promote the CCG's campaign on Harrow Health Help Now campaign. The effectiveness of this campaign should be reviewed by the Health and Social Care Scrutiny Sub-Committee in its 2017/18 work programme.
- **RECOMMENDATION 2 (TO HARROW CCG):** That Harrow CCG ensures that data sharing protocols are put in place so that WICS can access the GP records of Harrow patients (with patients' permission).
- **RECOMMENDATION 3 (TO THE CHAIR OF HARROW HEALTH AND SOCIAL CARE SCRUTINY SUB-COMMITTEE):** That the Chair of the Harrow Health and Social Care Scrutiny Sub-Committee, on behalf of the sub-committee, writes to Transport for London urging them to consider providing greater access by public transport to Alexandra Avenue Health and Social Care Centre, and also writes to the local MP and our GLA member to ask them to also lobby TfL in this regard.
- **RECOMMENDATION 4 (TO HARROW CCG):** That Harrow CCG explores opening up the first floor of Belmont Health Centre for clinical services so that the whole building is used rather than services increasingly being congested on to the ground floor.
- **RECOMMENDATION 5 (TO HARROW CCG):** That Harrow CCG ensures that there is better sharing of good practice around primary care and WICs across the borough, whilst recognising that one size does not fit all and all surgeries operate differently to meet the needs of different communities.
- **RECOMMENDATION 6 (TO HARROW CCG):** That Harrow CCG encourages all GP surgeries in Harrow to advertise and signpost patients to alternative primary care services on their websites and in their out of hours telephone messages, in a consistent manner. All GP surgery websites should provide the link to the CCG Harrow Health Help Now website.
- **RECOMMENDATION 7 (TO HEALTHWATCH HARROW):** That Healthwatch Harrow presents its final report on GP accessibility to the Health and Social Care Scrutiny Sub-Committee in July 2017 so that the findings may be considered in full.

Financial Implications

The costs of delivering the health scrutiny work programme are met from within existing resources.

Performance Issues

There is no specific performance issues associated with this report.

Environmental Impact

There is no specific environmental impact associated with this report.

Risk Management Implications

There are none specific to this report.

Equalities Implications

Local healthcare services help meet the needs of some of the most vulnerable members of the community, and therefore equalities implications are at the crux of examining access to primary care in the borough. The intelligence used to inform members' conclusions has been drawn from a range of sources that give insight to residents' views. The findings and recommendations from members' enquiries, as contained in this report, should help to influence how local primary care services are strategically planned to best meet the needs of all residents, including those who are particularly vulnerable.

Council Priorities

- Protect the most vulnerable and support families

Section 3 - Statutory Officer Clearance

Statutory clearances not required.

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| Ward Councillors notified: | N/A |
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Section 4 - Contact Details and Background Papers

Contact:

Nahreen Matlib, Senior Policy Officer, 020 8420 9204

Background Papers:

- Access to Primary Care in Harrow – Report from Health Scrutiny Members