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Merton Council

Healthier Communities and Older People Overview and Scrutiny Panel



Date: 21 June 2021

Time: 7.15 pm

Venue: Council chamber - Merton Civic Centre, London Road, Morden SM4 5DX

AGENDA

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Healthier Communities and Older People Overview and Scrutiny Panel membership

Councillors:

Peter McCabe (Chair)
Thomas Barlow (Vice-Chair)
Nigel Benbow
Pauline Cowper
Mary Curtin
Helena Dollimore
Jenifer Gould
Linda Kirby

Substitute Members:

Hina Bokhari
Joan Henry
David Chung
Andrew Howard
Oonagh Moulton
Dave Ward

Co-opted Representatives

Diane Griffin (Co-opted member, non-voting)
Saleem Sheikh (Co-opted member, non-voting)

Note on declarations of interest

Members are advised to declare any Disclosable Pecuniary Interest in any matter to be considered at the meeting. If a pecuniary interest is declared they should withdraw from the meeting room during the whole of the consideration of that matter and must not participate in any vote on that matter. For further advice please speak with the Managing Director, South London Legal Partnership.

What is Overview and Scrutiny?

Overview and Scrutiny describes the way Merton's scrutiny councillors hold the Council's Executive (the Cabinet) to account to make sure that they take the right decisions for the Borough. Scrutiny panels also carry out reviews of Council services or issues to identify ways the Council can improve or develop new policy to meet the needs of local people. From May 2008, the Overview & Scrutiny Commission and Panels have been restructured and the Panels renamed to reflect the Local Area Agreement strategic themes.

Scrutiny's work falls into four broad areas:

- ⇒ **Call-in:** If three (non-executive) councillors feel that a decision made by the Cabinet is inappropriate they can 'call the decision in' after it has been made to prevent the decision taking immediate effect. They can then interview the Cabinet Member or Council Officers and make recommendations to the decision-maker suggesting improvements.
- ⇒ **Policy Reviews:** The panels carry out detailed, evidence-based assessments of Council services or issues that affect the lives of local people. At the end of the review the panels issue a report setting out their findings and recommendations for improvement and present it to Cabinet and other partner agencies. During the reviews, panels will gather information, evidence and opinions from Council officers, external bodies and organisations and members of the public to help them understand the key issues relating to the review topic.
- ⇒ **One-Off Reviews:** Panels often want to have a quick, one-off review of a topic and will ask Council officers to come and speak to them about a particular service or issue before making recommendations to the Cabinet.
- ⇒ **Scrutiny of Council Documents:** Panels also examine key Council documents, such as the budget, the Business Plan and the Best Value Performance Plan.

Scrutiny panels need the help of local people, partners and community groups to make sure that Merton delivers effective services. If you think there is something that scrutiny should look at, or have views on current reviews being carried out by scrutiny, let us know.

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Agenda Item 3

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HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

26 APRIL 2021

(7.15 pm - 8.40 pm)

PRESENT: Councillors Councillor Peter McCabe (in the Chair), Councillor David Chung, Councillor Thomas Barlow, Councillor Nigel Benbow, Councillor Pauline Cowper, Councillor Jenifer Gould, Councillor Linda Kirby and Di Griffin

ALSO PRESENT: Mark Creelman, Executive Locality Director Merton and Wandsworth, South West London Clinical Commissioning Group, Vanessa Ford, Chief Executive of the South West London and St George's Mental Health NHS Trust, James Marsh Joint Medical Director and Deputy Chief Executive Epsom and St Helier NHS Trust.

Councillor Rebecca Lanning Cabinet Member for Adult Social Care and Public Health.

Stella Akintan (Scrutiny Officer), John Morgan (Assistant Director, Adult Social Care) and Dr Dagmar Zeuner (Director, Public Health)

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Apologies for absence were received from Councillor Mary Curtin

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of pecuniary interests

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

The minutes of the previous meeting were agreed as a true and accurate record.

4 IMPACT OF COVID-19 IN MERTON (Agenda Item 4)

The Director of Public Health gave an overview of her presentation and said whilst current Covid infection rates are low, there is a possibility of another surge. There is a risk from the South African variant which was found in the neighbouring boroughs of Wandsworth and Lambeth. Merton is ready to respond to any further outbreaks.

A Panel member asked about support for long Covid. The Locality Director for Merton and Wandsworth said long Covid clinics have been established as a single point of

excess. All NHS services are equipped to deal with long Covid. A panel member asked if there is current data on the numbers of people dealing with long Covid. The Locality Director for Merton and Wandsworth it is too early to say.

A panel member asked which variants are the most prevalent. The Director for Public Health said the Kent variant is so transmissible it is more dominant than the South African and Brazilian strains

RESOLVED

The Chair thanked the Director for her presentation

5 SW LONDON MENTAL HEALTH TRUST - COVID-19 UPDATE (Agenda Item 5)

The Chief Executive of the South West London and St George's Mental Health NHS Trust gave an overview of her presentation.

RESOLVED

The Chair thanked the Chief Executive for her report.

6 MERTON CCG - COVID-19 UPDATE (Agenda Item 6)

The Executive Locality Director for Merton and Wandsworth South West London Clinical Commissioning Group and James Marsh Joint Medical Director and Deputy Chief Executive Epsom and St Helier NHS Trust gave an overview of their presentations.

RESOLVED

The Chair thanked NHS colleagues for their reports.

7 TOPIC SUGGESTIONS FOR 2021/22 WORK PROGRAMME (Agenda Item 7)

Panel Members agreed to email topic suggestions to the scrutiny officer.

Committee: Healthier Communities and Older People Overview and Scrutiny Panel

Date: 21 June 2021

Wards: ALL

Subject: Integrated Care System and placed based transition work

Recommendations:

- A. The Panel are asked comment and discuss the progress in developing the South West London Integrated Care System
-

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

The attached presentation, prepared by NHS colleagues, provides an overview of the development of the Integrated Care Partnership in South West London and the implications for Merton. The Chief Executive of the South West London and St Georges Mental Health Trust will provide an update of the work as well as respond to questions.

2 DETAILS

- 2.1. Integrated Care Systems are new partnerships between the organisations that meet health and care needs across an area, to coordinate services and to plan in a way that improves population health and reduces inequalities between different groups.
- 2.2. This Panel has an important role in overseeing these developments and holding all partners to account.

3 ALTERNATIVE OPTIONS

The Healthier Communities and Older People Overview and Scrutiny Panel can select topics for scrutiny review and for other scrutiny work as it sees fit, taking into account views and suggestions from officers, partner organisations and the public.

4 CONSULTATION UNDERTAKEN OR PROPOSED

- 4.1. The Panel will be consulted at the meeting

5 TIMETABLE

- 5.1. None relating to this covering report

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 6.1. None relating to this covering report

- 7 LEGAL AND STATUTORY IMPLICATIONS**
- 7.1. None relating to this covering report. Scrutiny work involves consideration of the legal and statutory implications of the topic being scrutinised.
- 8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**
- 8.1. It is a fundamental aim of the scrutiny process to ensure that there is full and equal access to the democratic process through public involvement and engaging with local partners in scrutiny reviews. Furthermore, the outcomes of reviews are intended to benefit all sections of the local community.
- 9 CRIME AND DISORDER IMPLICATIONS**
- 9.1. None relating to this covering report. Scrutiny work involves consideration of the crime and disorder implications of the topic being scrutinised.
- 10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**
- 10.1. None relating to this covering report
- 11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**
-
- 12 BACKGROUND PAPERS**
- 12.1.

ICS and placed based transition work Merton Overview and Scrutiny Committee

June 2021



**Our ICS is
made up of a
three parts;
together we
are the ICS**



ICS update headlines ...

- **Place** - transition teams in place commencing H&C Plan review and forming together. Resource and support will be important going forward. (slides in pack summarise)
- **Provider Collaboratives** – Met with APC and SLP to begin to consider the new expectations collaboratives and how they will develop capabilities and arrangements to achieve them.
- **Function review** – step one due 7 May 2021.
- **System Development plan** – due in June work in May, sign off by London in July.
- **Communications and engagement** – stakeholder plan being developed
- **OD** plan initial thinking conversations with CEOs and Place Leads but more in-depth conversations will be arranged – current thinking Simulation exercises; Big Tent
- **Growing focus** on Finance and provider collaboratives
- **London ICS Steering Group and Operations Groups** established
- **National guidance** expected shortly – ICS Operating Model; HR process; Collaboratives
- **National Timeframes** are a little behind

ICS Transition Update

Place based development



Place will have four main roles:

1. To **support and develop primary care networks** (PCNs) which join up primary and community services across local neighbourhoods.
2. To **simplify, modernise and join up health and care** (including through technology and by joining up primary and secondary care where appropriate).
3. To understand and identify – using population health management techniques and other intelligence – **people and families at risk of being left behind and to organise proactive support for them;** and
4. To **coordinate the local contribution to health, social and economic development** to prevent future risks to ill-health within different population groups.

In addition, places are responsible for:

- **Ensuring the full involvement of all partners** who contribute to health and care in place.
- Putting in place **important links with other public or voluntary services** that have a big impact on residents' day-to-day health, such as by improving local skills and employment or by ensuring high-quality housing.
- **Delivery of place plans** in partnership with NHS providers, local government, primary care and the voluntary sector working together in each place in ICSs, built around primary care networks (PCNs) in neighbourhoods.

Our ICS places have now confirmed their transition teams including confirmation of the NHS Transition Place based leader

Place	NHS Primary Care Lead	NHS Acute Care Lead	NHS Community Lead	Local Authority Lead	NHS Mental Health Lead	NHS Transition Place based lead
Croydon	Agnelo Fernandez/ Bill Jasper	Mathew Kershaw	Mathew Kershaw	Annette McPartland	James Lowell (Chief Operating Officer, SLAM)	Mathew Kershaw
Kingston	Naz Jivani	Jo Farrar	David Hawkins	Sharon Houlden	Jennifer Allan	Naz Jivani
Merton	Sy Ganesaratnam	Suzanne Marcello	Alison Edgington	John Morgan	Vanessa Ford/(Jen Goddard)	Vanessa Ford
Richmond	Patrick Gibson	Jo Farrar	David Hawkins	Liz Bruce & Susan Anderson-Carr	Billy Boland	Jo Farrar
Sutton	Dino Pardhanani	Daniel Elkeles	Daniel Elkeles	Imran Choudhury	Amy Scammell	Daniel Elkeles
Wandsworth	Nicola jones	Andrew Grimshaw	Alison Edgington	Liz Bruce & Susan Anderson-Carr	Vanessa Ford/ (Jen Goddard)	Nicola Jones

Each local Transition team have been asked to begin to meet and focus on a number of key development areas.....

1. Begin work across each local placed based partnership to **identify and develop a 6,12- and 18-month programme** to deliver place requirements outlined in the White paper.
2. Reviewing and developing **revised Local Health and Care Plans** built on locally identified priorities and linked to expected national planning guidance.
3. Set **clear expected outcomes** for place priorities and actions so that their impact may be tracked.
4. Engaging in the **Strengthening Communities Programme Group** to think through in more detail the approach to place-based development, share learning and support the system wide development of place-based arrangements

Merton Place transition team – who are we?

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Vanessa Ford,
CEO,
SWL&StG



John Morgan,
Assistant Director
London Borough of Merton



Simon Shimmens,
CEO,
Merton Connected



Alison Edgington,
Director of Operations
CLCH



Dr Dagmar Zeuner,
Director of Public Health
London Borough of Merton



Dr Sayanthan Ganesaratnam
Lead Medical Director,
South West London Primary
Care Provider Alliance



Jennifer Goddard,
Associate Director
SWL&StG



Suzanne Marsello
Chief Strategy Officer,
St. George's University Hospital

Merton Place so far, early days

- Expanded the transition team to include, **Dr Dagmar Zeuner, Director of Public Health** and **Simon Shimmens, CEO of Merton Connect** representing the third and voluntary sector
- Transition team - developing understanding and trust – 2 face to face and 2 virtual meetings
- Merton Health and Care Together remains the partnership vehicle
- Organisational development needs for partners, sectors and MHCT
- Programme Director recruitment, CCG and provider resource
- Stakeholder Engagement and Communication plan
- Desktop update of Merton Local Health and Care – COVID impact and inequalities
- 3 primary care network development sessions completed



South West London

Health & Care
Partnership

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Background slides



ICS Health and Care Partnerships

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- ICS Partnerships will be responsible for **developing a plan that addresses the wider health, public health and social care needs** of the system.
- Members of the ICS Health and Care **Partnership can be drawn from Health and Wellbeing Boards within the system, partner organisations** with an interest in health and care (including Healthwatch, voluntary and independent sector partners, social care providers and for example housing providers).
- **Each system will set up** its Health and Care Partnership and membership
- **Guidance to support the establishment of these partnerships** will be developed with NHSEI and the Local Government Association
- **All NHS and LA's will have a duty to collaborate** across the healthcare, public health and social care system.
- **The ICS will work closely with local Health and Wellbeing Boards-** as 'place-based' planners, -, the ICS NHS Body will be required to have regard to the Joint Strategic Needs Assessments (JSNAs)/Joint Health and Wellbeing Strategies

The Role of ICS NHS Body

- The ICS NHS body will be responsible for:
 - **Strategic planning** to meet the health needs of the population and being accountable for the health outcomes of the population
 - The commissioning functions of CCG's and some of those of NHS England
 - Developing a **capital plan for NHS providers**
 - **Securing the provision of health services** to meet the needs of the system population
- Each **ICS NHS body will be directly accountable for NHS spend and performance** within the system allocative functions will be held by the NHS Body. **It will be able to delegation place and provider collaboratives**
- The ICS NHS body will be **responsible for the day to day running of the ICS**
- **The ICS NHS board will, as a minimum**, include a chair, the chief executive and representatives from NHS trusts, general practice and local authorities, with others determined locally.
- **Place-based arrangements will be left to local organisations to arrange.**

Committee:	Healthier Communities and Older People Overview and Scrutiny Panel
Date:	21 June 2021
Wards:	All
Subject:	Healthier Communities and Older People Overview and Scrutiny Panel Work Programme 2021/22
Lead officer:	Stella Akintan, Scrutiny Officer
Lead member:	Councillor Peter McCabe, Chair of the Healthier Communities and Older People Overview and Scrutiny Panel
Contact officer:	Stella Akintan: stella.akintan@merton.gov.uk , 020 8545 3390

Recommendations:

That members of the Healthier Communities and Older People Overview and Scrutiny Panel:

- i. Consider their work programme for the 2021/22 municipal year, and agree issues and items for inclusion (see draft in Appendix 1);
 - ii. Consider the methods by which the Panel would like to scrutinise the issues/items agreed;
 - iii. Agree on an issue for scrutiny by a task group and appoint members to the Task Group;
 - iv. Identify any training and support needs.
-

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to support and advise Panel members to determine their work programme for the 2021/22 municipal year.
- 1.2 This report sets out the following information to assist the Panel in this process:
 - a) The principles of effective scrutiny and the criteria against which work programme items should be considered;
 - b) The roles and responsibilities of the Healthier Communities and Older People Overview and Scrutiny Panel;
 - c) The findings of the consultation programme undertaken with councillors and co-opted members, Council senior management, voluntary and community sector organisations, partner organisations and Merton residents;
 - d) A summary of discussion by councillors and co-opted members at a topic selection workshop held on 7 June 2021; and
 - e) Support available to the Healthier Communities and Older People Overview and Scrutiny Panel to determine, develop and deliver its 2021/22 work programme.

2. Determining the Healthier Communities and Older People Overview and Scrutiny Panel Annual Work Programme

- 2.1 Members are required to determine their work programme for the 2021/22 municipal year to give focus and structure to scrutiny activity to ensure that it effectively and efficiently supports and challenges the decision-making processes of the Council, and partner organisations, for the benefit of the people of Merton.
- 2.2 The Healthier Communities and Older People Overview and Scrutiny Panel has a specific role relating to public health, health partners, adult social care and mental health scrutiny and to performance monitoring that should automatically be built into their work programmes.
- 2.3 The Healthier Communities and Older People Overview and Scrutiny Panel may choose to scrutinise a range of issues through a combination of pre-decision scrutiny items, policy development, performance monitoring, information updates and follow up to previous scrutiny work.
- 2.4 The Healthier Communities and Older People Overview and Scrutiny Panel have six scheduled meetings over the course of 2021/22, including the scheduled budget meeting (representing a maximum of 21 hours of scrutiny per year – assuming 3 hours per meeting). Members will therefore need to be selective in their choice of items for the work programme.

Principles guiding the development of the scrutiny work programme

- 2.5 The following key principles of effective scrutiny should be considered when the Commission determines its work programme:
- **Be selective** – There is a need to prioritise so that high priority issues are scrutinised given the limited number of scheduled meetings and time available. Members should consider what can realistically and properly be reviewed at each meeting, taking into account the time needed to scrutinise each item and what the session is intended to achieve.
 - **Add value with scrutiny** – Items should have the potential to ‘add value’ to the work of the council and its partners. If it is not clear what the intended outcomes or impact of a review will be then Members should consider if there are issues of a higher priority that could be scrutinised instead.
 - **Be ambitious** – The Panel should not shy away from carrying out scrutiny of issues that are of local concern, whether or not they are the primary responsibility of the council. The Local Government Act 2000 gave local authorities the power to do anything to promote economic, social and environmental well being of local communities. Subsequent Acts have conferred specific powers to scrutinise health services, crime and disorder issues and to hold partner organisations to account.
 - **Be flexible** – Members are reminded that there needs to be a degree of flexibility in their work programme to respond to unforeseen issues/items for consideration/comment during the year and accommodate any developmental or additional work that falls within the remit of this Panel. For example Members may wish to question officers regarding the declining performance of a service or may choose to respond to a Councillor Call for Action request.

- **Think about the timing** – Members should ensure that the scrutiny activity is timely and that, where appropriate, their findings and recommendations inform wider corporate developments or policy development cycles at a time when they can have most impact. Members should seek to avoid duplication of work carried out elsewhere.

Models for carrying out scrutiny work

- 2.6 There are a number of means by which the Healthier Communities and Older People Overview and Scrutiny Panel can deliver its work programme. Members should consider which of the following options is most appropriate to undertake each of the items they have selected for inclusion in the work programme:

Item on a scheduled meeting agenda/ hold an extra meeting of the Panel	<ul style="list-style-type: none"> ■ The Panel can agree to add an item to the agenda for a meeting and call Cabinet Members/ Officers/Partners to the meeting to respond to questioning on the matter ■ A variation of this model could be a one-day seminar-scrutiny of issues that, although important, do not merit setting up a 'task-and-finish' group.
Task Group	<ul style="list-style-type: none"> ■ A small group of Members meet outside of the scheduled meetings to gather information on the subject area, visit other local authorities/sites, speak to service users, expert witnesses and/or Officers/Partners. The Task Group can then report back to the Panel with their findings to endorse the submission of their recommendations to Cabinet/Council ■ This is the method usually used to carry out policy reviews
The Panel asks for a report then takes a view on action	<ul style="list-style-type: none"> ■ The Panel may need more information before taking a view on whether to carry out a full review so asks for a report – either from the service department or from the Scrutiny Team – to give them more details.
Meeting with service Officer/Partners	<ul style="list-style-type: none"> ■ A Member (or small group of Members) has a meeting with service officers/Partners to discuss concerns or raise queries. ■ If the Member is not satisfied with the outcome or believes that the Panel needs to have a more in-depth review of the matter s/he takes it back to the Panel for discussion.
Individual Members doing some initial research	<ul style="list-style-type: none"> ■ A member with a specific concern carries out some research to gain more information on the matter and then brings his/her findings to the attention of the Panel if s/he still has concerns.

- 2.7 Note that, in order to keep agendas to a manageable size, and to focus on items to which the Panel can make a direct contribution, the Panel may choose to take some "information only" items outside of Panel meetings, for example by email.

Support available for scrutiny activity

- 2.8 The Overview and Scrutiny function has dedicated scrutiny support from the Scrutiny Team to:

- Work with the Chair and Vice-Chair of the Panel to manage the work programme and coordinate the agenda, including advising officers and partner organisations on information required and guidance for witnesses submitting evidence to a scrutiny review;
 - Provide support for scrutiny members through briefing papers, background material, training and development seminars, etc;
 - Facilitate and manage the work of the task and finish groups, including research, arranging site visits, inviting and briefing witnesses and drafting review reports on behalf on the Chair; and
 - Promote the scrutiny function across the organisation and externally.
- 2.9 The Healthier Communities and Older People Overview and Scrutiny Panel will need to assess how it can best utilise the available support from the Scrutiny Team to deliver its work programme for 2021/22.
- 2.10 The Panel is also invited to comment on any briefing, training and support that is needed to enable Members to undertake their work programme. Members may also wish to undertake visits to local services in order to familiarise themselves with these. Such visits should be made with the knowledge of the Chair and will be organised by the Scrutiny Team.
- 2.11 The Scrutiny Team will take the Healthier Communities and Older People Overview and Scrutiny Panel's views on board in developing the support that is provided.
- 3. Selecting items for the Scrutiny Work Programme**
- 3.1 The Healthier Communities and Older People Overview and Scrutiny Panel sets its own agenda within the scope of its terms of reference. It has the following remit:
- Formal health scrutiny including discharging the Council's responsibilities in respect of the Health and Social Care Act 2001;
 - Health including promoting good health and healthy lifestyles, mental health and reducing health inequalities;
 - Community Care (adult social care and older people's social care);
 - Active ageing
 - Scrutiny of the Health and Wellbeing Board
- 3.1 The Scrutiny Team has undertaken a campaign to gather suggestions for issues to scrutinise either as agenda items or task group reviews. Suggestions have been received from members of the public, councillors and partner organisations including the police, NHS and Merton Voluntary Service Council. Issues that have been raised repeatedly at Community Forums have also been included. The Scrutiny Team has consulted departmental management teams in order to identify forthcoming issues on which the Panel could contribute to the policymaking process.
- 3.2 The councillors who attended a "topic selection" workshop on 07 June 2021 discussed these suggestions. Areas were prioritised at the workshop and a long list was identified. Panel members are asked to rank this list to help to develop the 2021-22 work programme. These are listed at Appendix 1

4. Task group reviews

- 4.1 The Panel is invited to select an issue for in-depth scrutiny and establish a task group.

5. Public involvement

- 5.1 Scrutiny provides extensive opportunities for community involvement and democratic accountability. Engagement with service users and with the general public can help to improve the quality, legitimacy and long-term viability of recommendations made by the Panel.
- 5.2 Service users and the public bring different perspectives, experiences and solutions to scrutiny, particularly if “seldom heard” groups such as young people, disabled people, people from black and minority ethnic communities and people from lesbian gay bisexual and transgender communities are included.
- 5.3 This engagement will help the Panel to understand the service user’s perspective on individual services and on co-ordination between services. Views can be heard directly through written or oral evidence or heard indirectly through making use of existing sources of information, for example from surveys. From time to time the Panel/Task Group may wish to carry out engagement activities of its own, by holding discussion groups or sending questionnaires on particular issues of interest.
- 5.4 Much can be learnt from best practice already developed in Merton and elsewhere. The Scrutiny Team will be able to help the Panel to identify the range of stakeholders from which it may wish to seek views and the best way to engage with particular groups within the community.

6. ALTERNATIVE OPTIONS

- 6.1 A number of issues highlighted in this report recommend that Panel members take into account certain considerations when setting their work programme for 2021/22. The Healthier Communities and Older People Overview and Scrutiny Panel is free to determine its work programme as it sees fit. Members may therefore choose to identify a work programme that does not take into account these considerations. This is not advised as ignoring the issues raised would either conflict with good practice and/or principles endorsed in the Review of Scrutiny, or could mean that adequate support would not be available to carry out the work identified for the work programme.
- 6.2 A range of suggestions from the public, partner organisations, officers and Members for inclusion in the scrutiny work programme are set out in the appendices, together with a suggested approach to determining which to include in the work programme. Members may choose to respond differently. However, in doing so, Members should be clear about expected outcomes, how realistic expectations are and the impact of their decision on their wider work programme and support time. Members are also free to incorporate into their work programme any other issues they think should be subject to scrutiny over the course of the year, with the same considerations in mind.

7. CONSULTATION UNDERTAKEN OR PROPOSED

- 7.1 To assist Members to identify priorities for inclusion in the Panel’s work programme, the Scrutiny Team has undertaken a campaign to gather suggestions for possible scrutiny reviews from a number of sources:

- a. Members of the public have been approached using the following tools: articles in the local press, My Merton and Merton Together, request for suggestions from all councillors and co-opted members, letter to partner organisations and to a range of local voluntary and community organisations, including those involved in the Inter-Faith Forum and members of the Lesbian Gay and Transgender Forum;
- b. Councillors have put forward suggestions by raising issues in scrutiny meetings, via the Overview and Scrutiny Member Survey 2020, and by contacting the Scrutiny Team direct; and
- c. Officers have been consulted via discussion at departmental management team meetings.

8. FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 8.1 There are none specific to this report. Scrutiny work involves consideration of the financial, resource and property issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific financial, resource and property implications.

9. LEGAL AND STATUTORY IMPLICATIONS

- 9.1 Overview and scrutiny bodies operate within the provisions set out in the Local Government Act 2000, the Health and Social Care Act 2001& 2012 and the Local Government and Public Involvement in Health Act 2007.
- 9.2 Scrutiny work involves consideration of the legal and statutory issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific legal and statutory implications.

10. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 10.1 It is a fundamental aim of the scrutiny process to ensure that there is full and equal access to the democratic process through public involvement and engagement. The reviews will involve work to consult local residents, community and voluntary sector groups, businesses, hard to reach groups, partner organisations etc and the views gathered will be fed into the review.
- 10.2 Scrutiny work involves consideration of the human rights, equalities and community cohesion issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific human rights, equalities and community cohesion implications.

11. CRIME AND DISORDER IMPLICATIONS

- 11.1 In line with the requirements of the Crime and Disorder Act 1998 and the Police and Justice Act 2006, all Council departments must have regard to the impact of services on crime, including anti-social behaviour and drugs. Scrutiny review reports will therefore highlight any implications arising from the reviews relating to crime and disorder as necessary.

12. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 12.1 There are none specific to this report. Scrutiny work involves consideration of the risk management and health and safety issues relating to the topic being scrutinised. Furthermore, scrutiny work will also need to assess the implications of any recommendations made to Cabinet, including specific risk management and health and safety implications.

13. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- 13.1 Appendix I – Healthier Communities and Older People Overview and Scrutiny Panel draft work programme 2021/22

14. BACKGROUND PAPERS

- 14.1 None

Health and Older People Overview and Scrutiny Panel

Topic suggestions 2021/22

The Long list of topics agreed at the workshop are as follows:

1. COVID-19

- Understanding residents experience of services during, and lessons learnt from, the pandemic response including:
 - a. Care homes
 - b. Maternity services
 - c. Hospital admissions
- Understanding the current position of local immunisation rates and screening services as a result of the pandemic

2. Progress with the Wilson Health & Wellbeing Campus

Reviewing the current position of this development which has been ongoing for some considerable time. The review would also allow a clearer understanding of proposed future plans; the current financial position as well as any future commitments.

3. Dentistry in Merton

The Panel would consider the current levels of NHS provision in the borough versus private spaces. It would also review sign up rates and future provision planning.

4. Scrutiny of the Integrated Care System

To develop an understanding of the reconfiguration of the six Clinical Commissioning Groups into the newly formed Integrated Care System and its impact on local services for Merton. Providing panel members with a clear understanding of the approach being taken, the meaning of 'place' and future delivery projections particularly around:

- governance – what is the relationship with Merton's Health and Wellbeing Board
- finances – ensuring the Merton £ is protected and invested locally

5. Review of Lunch Clubs in Merton / VCS / Social Prescribing

To scrutinise the report being published by Merton Connected on the current position of Lunch Clubs in Merton, following the pandemic. This report could be considered as part of a wider understanding of the state of the voluntary sector post COVID and its capacity to support the social prescribing model in Merton.

6. Future of Adult Social Care

To scrutinise the awaited green paper on the future of adult social care with a focus on time allocations and community based approaches. Also relevant to the Integrated

Care System (ICS) review (above).

7. Review of the new public health system

To understand the reconfigured public health system from 1st October 2021 – following the disbanding of Public Health England. Emphasis on understanding the new structure and how they will be held to account locally.

Standard agenda items:

- Immunisations schedule: including diabetic eye screening, breast cancer, flu for the older 65s and vulnerable groups.
- Safeguarding Adults Annual Report
- Primary Care Strategy - South West London Clinical Commissioning Group
- Public Health Annual Report
- Updates from local Health Providers

It is unlikely there will be enough Panel time to consider all the above issues, therefore Panel members have been asked to rank them according to priority in order that a short list can be developed.

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