

Agenda Item 3

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HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

6 SEPTEMBER 2017

(7.15 pm - 9.35 pm)

PRESENT: Councillors Councillor Peter McCabe (in the Chair),
Councillor Laxmi Attawar, Councillor Mary Curtin,
Councillor Suzanne Grocott, Councillor Sally Kenny, Di Griffin
and Saleem Sheikh

ALSO PRESENT: Daniel Elkeles, Chief Executive Epsom and St Helier, Dr James Marsh, Medical Director, St Helier, Charlotte Hall, Chief Nurse, Epsom and St Helier, Lyla Adwan-Kamara, Chief Executive Merton Centre for Independent Living, Matt Brown, Service Manager, Citizen's Advice Merton and Lambeth

Dr Dagmar Zeuner (Director, Public Health) and Hannah Doody (Director of Community and Housing) and Stella Akintan, Scrutiny Officer.

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Councillor Abdul Latif gave apologies and Councillor Stephen Crowe attended on his behalf.

Councillor Brian Lewis Lavender gave apologies and Councillor Najeeb Latif attended on his behalf.

Councillor Brenda Fraser gave apologies and Councillor Joan Henry attended on her behalf.

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of pecuniary interests

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

Mr Saleem Sheikh Co-opted member highlighted that he attended the last meeting of the Panel but this was not recorded in the minutes.

RESOLVED

That the minute is amended to show Mr Sheikh as present
That the minute is agreed as a true and accurate record of the meeting

4 EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST: 2020-2030 VISION (Agenda Item 4)

The Trust showed a video info graphic about the current challenges facing Epsom and St Helier hospitals. The Chief Executive reported that in the last year there were 900,000 patient contacts which is the highest number to date. Also, it was the only Trust in South East England to deliver the Accident and Emergency standard. The Panel congratulated the Trust on their achievements.

The Chief Executive reported that this engagement process is to consider the next steps after 2020. The current challenges are caused by the following issues:

- The current buildings are not designed for 21st healthcare
- Clinical staff currently work between Epsom and St Helier sites. This is not sustainable as there are not enough staff to provide high quality healthcare on both sites.
- The Trust needs to be financially sustainable.

A panel member said the consultation has been on-going since 2002 at an approximate cost of £40 million. Concern was expressed that this is yet another process and a decision should be made. St Helier was put forward as the most appropriate site given the high levels of deprivation in the surrounding area.

The Chief Executive said it is a concern that a decision has not been reached about this for the last 20 years. The good performance at the Trust is a good platform to highlight that the current situation is unsustainable and this issue needs to be resolved. It is a long process and there will not be a new hospital until at least 2024.

The Medical Director added that they need suitable buildings and sustainable levels of staffing to provide world class services. Staff need to be on a single site to provide this level of care. If the acute trust operated one site, there would be no need for agency staff.

A panel member asked what consultation response rate would be deemed as successful or in favour of one option. The Chief Executive reported that a consultation will take place when the NHS has made a decision on big service change, and we are nowhere near that stage yet. The Trust are being open and transparent from the beginning, outlining the problem, and potential solutions and want to engage. This will mean the consultation would have tackled the issues that are currently being raised. The Chief Executive reassured the Panel that all the options are deliverable.

Panel members were informed that this engagement process should lead to a consultation if there is enough support for the investment. A strategic outline case will be published in November and feed into the refresh of the Sustainability and Transformation Plan for Merton. The NHS need to agree a business case which will

take six months. The options, a public consultation and a full decision could be reached by 2019.

A panel member asked which of the three sites is best served by transport links. The Chief Executive said transport is poor when travelling between two sites. Ten percent of capital is for infrastructure which can address transport needs.

The Chair reiterated the councils support to maintain St Helier Hospital on the existing site and expressed concern that health inequalities has not been identified as a major issue of concern. The Chief Executive reported that the public health team at the council are the experts who lead on this and they will address this in responding to the three options for the future of the hospitals.

5 PERSONAL INDEPENDENT PAYMENT ASSESSMENT PROCESS (Agenda Item 5)

The Chief Executive of Merton Centre for Independent Living (Merton CIL) reported that there had been a number of re-occurring issues when supporting people through the Personal Independent Payments (PIP) process;

- Many assessment centres are inaccessible to wheelchair users and there no centres located within the borough.
- One of the assessment centre sites requires a journey of three changes on public transport.
- People are receiving appointment cancellations on route or experience long waits at the assessment centre.
- Assessments are inaccurate.
- The appeal process is lengthy and time consuming and the impact of losing benefit is wide-ranging; including housing re-possession. As a result they can only help a few people because they are so time consuming.

A local resident who had requested to speak about their experiences with this process addressed the Panel;

He has lived in Merton since 1968, and experienced a serious injury at work and a further injury when hit by a car some years later. As a result he has multiple health issues. Merton CIL helped him to fill in the forms for PIP. His appointment was cancelled without notice and he was not informed about the rescheduled date. A home appointment took place and he was refused increased rate of mobility because the assessor decided he could walk fifty metres although this was contradicted by the

claimant and doctors. It took nine months to complete the appeal which was very stressful. Full benefits were eventually reinstated but this process needs to be improved.

The Chief Executive of Merton Centre for Independent Living reported the reality is different from the DWP report which seems to outline best practice but this does not reflect what is happening on the ground.

The Service Manager at Citizens Advice Merton and Lambeth reported that claimants had often expressed concern about the examining medical practitioners process; assumptions are often made about level of mobility. This makes it difficult for DWP to make an accurate assessment. This is reflected in the tribunal figures. Overall DWP needs to apply more scrutiny to their contracts.

The Panel expressed concern that the Department for Work and Pensions did not attend the meeting. It was agreed that the Chair would write a letter to the DWP asking them to attend a meeting and ask both local MP's would be asked for their support.

RESOLVED

Merton Centre for Independent Living and Citizen's Advice Merton and Lambeth were thanked for attending the meeting and for their work in the local community.

Political groups will be asked to write to Stephen Hammond MP and Siobhain McDonagh MP to urge DWP to attend the Panel and answer questions.

Councillor Peter McCabe to write to a senior representative at DWP inviting them to attend a future meeting of the Panel to discuss the PIP process.

6 PREVENTING LONELINESS IN MERTON - DRAFT TASK GROUP REPORT (Agenda Item 6)

Councillor Sally Kenny thanked the scrutiny officer and task group members for their work.

The chair thanked the task group for their work.

The Panel raised a number of issues including:

The importance of working with faith groups

The challenges in tackling loneliness given the reduction of funding in the voluntary and community sector

The importance of working with a wide range of partners including supermarkets.

RESOLVED

The task group findings were welcomed by the Panel and it was agreed to send the report to Cabinet for approval.

7 WORK PROGRAMME 2017-18 (Agenda Item 7)

Noted by the Panel.

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