

Health, Inclusion and Social Care Policy and Accountability Committee Agenda

Wednesday 4 November 2020 at 6.30 pm
Online - Virtual Meeting

MEMBERSHIP

Administration	Opposition
Councillor Lucy Richardson (Chair) Councillor Jonathan Caleb-Landy Councillor Bora Kwon Councillor Mercy Umeh	Councillor Amanda Lloyd-Harris
Co-optees	
Victoria Brignell - Action on Disability, Action On Disability Jim Grealy - H&F Save Our NHS, H&F Save Our NHS Keith Mallinson Roy Margolis	

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Health, Inclusion and Social Care Policy and Accountability Committee Agenda

4 November 2020

Item **Pages**

1. APOLOGIES FOR ABSENCE

2. DECLARATION OF INTEREST

If a Councillor has a disclosable pecuniary interest in a particular item, whether or not it is entered in the Authority's register of interests, or any other significant interest which they consider should be declared in the public interest, they should declare the existence and, unless it is a sensitive interest as defined in the Member Code of Conduct, the nature of the interest at the commencement of the consideration of that item or as soon as it becomes apparent.

At meetings where members of the public are allowed to be in attendance and speak, any Councillor with a disclosable pecuniary interest or other significant interest may also make representations, give evidence or answer questions about the matter. The Councillor must then withdraw immediately from the meeting before the matter is discussed and any vote taken.

Where Members of the public are not allowed to be in attendance and speak, then the Councillor with a disclosable pecuniary interest should withdraw from the meeting whilst the matter is under consideration. Councillors who have declared other significant interests should also withdraw from the meeting if they consider their continued participation in the matter would not be reasonable in the circumstances and may give rise to a perception of a conflict of interest.

Councillors are not obliged to withdraw from the meeting where a dispensation to that effect has been obtained from the Audit, Pensions and Standards Committee.

3. PUBLIC PARTICIPATION

This meeting is being held remotely via Microsoft Teams. If you would like to ask a question about any of the items on the agenda, either via Teams or in writing, please contact: bathsheba.mall@lbhf.gov.uk

You can watch the meeting live on YouTube: <https://youtu.be/iXxY7OJWQlo>

- 4. MINUTES OF THE PREVIOUS MEETING** 4 - 12
- (a) To approve as an accurate record and the Chair to sign the minutes of the meeting of the Health, Adult Social Care and Social Inclusion PAC held on 10 September 2020; and
- (b) To note the outstanding actions.
- 5. COVID-19 - UPDATE**
- This item provides a verbal update from the Director of Public Health on Covid-19 and the Council's response in supporting residents throughout the pandemic.
- 6. INCLUSIVE EMPLOYMENT - UPDATE**
- This verbal update to the Committee sets out the work currently on going to support young people with disabilities to find suitable employment in a supported setting.
- 7. UPDATE - ROYAL BROMPTON HOSPITAL** 13 - 16
- This report provides background and context to the potential transfer of congenital heart disease surgical and interventional cardiology services away from Royal Brompton Hospital to appropriate alternative providers (subject to consultation).
- 8. HEALTHWATCH - YOUNG VOICES H&F** 17 - 22
- This report introduces the work of Healthwatch, Young Voices H&F in supporting the residents of Hammersmith and Fulham as they navigate care pathways in local primary and acute health services.
- 9. WORK PROGRAMME** 23 - 26
- The Committee is asked to consider its work programme for the remainder of the municipal year.
- 10. DATES OF FUTURE MEETINGS**

Tuesday, 26 January 2021

Health, Inclusion and Social Care Policy and Accountability Committee Minutes

Thursday 10 September 2020

PRESENT

Committee members: Councillors Lucy Richardson (Chair), Jonathan Caleb-Landy, Bora Kwon, Mercy Umeh and Amanda Lloyd-Harris

Co-opted members: Victoria Brignell (Action On Disability); Jim Grealy, H&F Save Our NHS (HAFSON); and Keith Mallinson

Other Councillors: Ben Coleman, Cabinet Member for Health and Social Care

Officers: Dawn Aunger, Assistant Director, People and Talent; Jo Baty, Assistant director mental health, learning disability and provided services, Adult Social Care Department; Tony Clements, Interim Strategic Director for Economy; Claire Cookson, Chief Executive Officer, DFN, Project Search; Mary Lamont, Head of People and Talent; Dr Nicola Lang, Director of Public Health; Mandy Lawson, Assistant Director of SEND, Children's Services Department; Wendy Lofthouse, Mental Health Commissioning Programme Manager, H&F CCG; Chelsea and Westminster Hospital NHS Foundation Trust; Maureen McHugh, Programme Specialist, DFN, Project Search; Kamal Motalib, Head of Economic Development, The Economy Department; Sharon Proberts, Head of Learning, Imperial College Healthcare NHS Trust; Lisa Redfern, Strategic Director of Social Care; and Linda Stradins, H&F Service Manager, West London NHS Trust

Guests and observers: Nandini Ganesh, ParentsActive; Merril Hammer, HAFSON; Philippa Johnson, Central London Community Healthcare NHS Trust; Kathryn Mangold, Lead Nurse for Learning Disability and Transition; Mary Melsom, ParentsActive; and Bianca Tavella, Project Manager, Fairshot Café

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Roy Margolis.

2. ROLL CALL AND DECLARATION OF INTEREST

Councillor Richardson confirmed the virtual attendance of members of the committee.

3. MINUTES OF THE PREVIOUS MEETING

The Chair noted a minor correction to the minutes, the name of Imperial College Healthcare NHS Trust had been incorrectly recorded.

RESOLVED

That the minutes of the meeting held on 8 July 2020 were agreed as an accurate record.

4. PUBLIC PARTICIPATION

Councillor Richardson thanked ParentsActive, for questions which informed Agenda Item 6, Supported Employment; and Hammersmith and Fulham Save our NHS, and Keith Mallinson for their questions and contributions to Agenda Item 7, Mental Health Integrated Network Team (MINT). Several residents also submitted comments and questions throughout the meeting which were forwarded to the committee for information and to officers for any possible actions.

5. COVID-19 UPDATE

Councillor Richardson welcomed Dr Nicola Lang who provided a verbal update on the Council's work in response to Covid-19. Dr Lang confirmed that the infection rate for H&F was 27.5 per 100,000 people, a figure derived from a seven-day rolling average. The number of cases across London was increasing rapidly and identified an upward trajectory of infectious cases at the end of August. 3% positivity (an increase from July of 1.3%) indicated that for every 100 people tested, three tested positive for Covid-19 and it was confirmed that the percentage was increasing. The full presentation can be found here:

[Dr Nicola Lang, Director for Public Health located at 05:15 minutes](#)

Dr Lang outlined the telephone exercise undertaken to identify patterns or trends in treatment and behaviour. This revealed that between 1 August and 8 September, of 183 new Covid cases identified in the borough, 40% fell within the 20-29 age group and about 70% had recently been on holiday. This was an emergent issue and the Council had implemented four main strategies in the outbreak management plan:

1. The evidenced based deployment of mobile testing units within the borough. Where numbers were identified in a ward, a mobile unit was deployed in easily accessible sites and a test did not need to be booked in advance. H&F was one of four London pilots where individuals testing positive received a follow up welfare telephone call.

2. A CRM (customer relationship management) had been set up using a robust IT system. allowing data to be collected and analysed more effectively. CRM data revealed behavioural patterns that chimed with the underlying trends identified by PHE within the same age group. The Council had significantly increased engagement and environmental health officers reinforced the message that it was the responsibility of businesses to help customers adhere to social distancing regulations through innovative communications work using a variety of channels. Significant work with NHS colleagues had also been undertaken in residential care homes and a robust testing system was in place with reinforced messaging. A mobile testing unit had been established at Westfield Shopping Centre to offer testing to young people as they were likely to use the Centre.
3. A third strand was to ensure that there was a contingency plan for each likely scenario and setting. Dr Lang explained that they had worked closely with homeless hostels and universities and various plans had been formulated to deal with emerging scenarios. The opportunity to plan would also address the need to ensure that other vaccinations were up to date. Dr Lang outlined a mapping programme that would show the location of every local case which allowed for autonomous checking of clusters both locally and nationally, an approach which was attributed to the progressive attitude of the council towards data collection and analysis.
4. The fourth stand of the containment strategy focused on community leadership. Officers had worked closely with community and faith leaders and forums from ethnic groups to ensure clear messaging and to listen to concerns. Ward councillors had raised awareness about the support available from Mutual Aid Groups (MAGs), foodbanks and the Smile Brigade.

Dr Lang cautioned that the number of infectious cases was rising, and vigilance was needed. Councillor Richardson welcomed the update and thanked Dr Lang, Linda Jackson and their respective teams for leading such a comprehensive and innovative response to the pandemic.

Victoria Brignell enquired if the council would be involved in enforcing new Covid-19 regulations that limited gatherings to groups of six people and how this might be managed. A second question was about whether people would be encouraged to take up flu vaccinations. Dr Lang responded that in terms of immunisations they were working closely with the NHS and that the Immunisations Working Group had been re-established. All staff were being encouraged to have the flu jab through a voucher scheme delivered through Superdrug. Carol Lambe added that the CCG were working closely with providers and Primary Care Networks to address flu jab and immunisation take up, prioritising vulnerable groups. Janet Cree added that joint work had been undertaken to encourage immunisation take up and that further details could be provided about this.

Councillor Lloyd-Harris expanded on the question of enforcement and how retailers could be encouraged to comply. Linda Jackson explained that there were several enforcement responses that could be applied. Providing guidance in the first instance, environmental health officers followed up with improvement notices and worked closely with police on tackling unauthorised events, although it was difficult to monitor the whole borough. Councillor Richardson thanked officers for their detailed update.

ACTION: CCG to provide further information about the joint work on immunisation take up.

RESOLVED

That the verbal update and actions be noted.

6. SUPPORTED EMPLOYMENT

Councillor Richardson outlined the scope of the item which was in three parts.

1. DFN Project Search

Claire Cookson and Maureen McHugh from DFN Project Search talked about the work of the organisation, its values and ethos. The aim was to ensure that each young person could access the same life choices, be independent and gain confidence through developing viable skills in full-time, paid employment. The positive benefits of working indicated that those who do gain employment are likely to lead happier, healthier lives. The full presentations can be found at:

[Claire Cookson, Chief Executive Officer, located at 35:22 minutes](#) and [Maureen McHugh, Programme Specialist, located at 42:59 minutes](#)

Victoria Brigwell commented that a supported internship was a wonderful way of overcoming barriers for people who were capable and skilled but who found it difficult to access the usual application process. A success rate of 60% of interns finding placements was impressive but required resources. Claire Cookson explained that Project Search was not a provider and worked with schools and colleges (and the Department for Education) to facilitate placements and to understand what was available.

Councillor Caleb-Landy commended the presentations and the outcomes that Project Search had achieved. There was awareness that an unemployment crises was likely and that the council's record on inclusive employment outcomes was not positive. Claire Cookson responded that the council could lead by example and highlight the importance of inclusive employment by setting the benchmark. During the pandemic 40 interns had gained employment and the opportunity to work. This was about providing the tools to succeed, a celebration of diversity and equality and key to this was to reframe the language used.

Councillor Kwon enquired if there was scope for sectors other than health and care, or logistics, where the same outcomes could be replicated in arts, for

example and if there had been an barriers that Project Search might have experienced. Larger organisations offered better training grounds and partnerships had also increased with universities. Participants who were hearing disabled or had difficulties with vision had educational health care plans and could access a fund which allowed individually tailored plans to configure proper support. One intern who was visually impaired had wanted to work in retail and found work in a Primark store, in the Harry Potter section as retail was an area that had interested him most. Interns often offered unique perspectives that resulted in positive changes.

There was real drive and focus on developing the employability of learning-disabled people and Project Search had the versatility and commitment to expand their work and reach other sectors in which suitable opportunities for intern placements could be identified. The breadth of opportunity was key, and within the health sector, interns often found it possible to navigate to other opportunities in an organisation such as Imperial College Healthcare NHS Trust where some had moved into technical roles.

2. Provider experiences of delivering in partnership with Project Search

Councillor Richardson felt that the “value added” aspect of inclusive employment was a critical point and welcomed Sharon Probets to offer a provider perspective which can be found here:

[Sharon Probets, Head of Learning, Imperial College Healthcare NHS Trust, located at 64:37 minutes](#)

Sharon Probets explained that the success of the intern placements at the Trust was attributable to the quality of their collaboration with Project Search. The placements were a bridge for young people to transition into employment. The partnership with Project Search and North West London College, and within the Trust itself, for example with Sodexo, was key, underpinned by the follow up work of job coaching. The placement success rate of 60% (highlighted above) in previous years was high but it was recognised that the pandemic had resulted in significant challenges that had needed to be overcome for the programme to continue.

Councillor Richardson welcomed Kathryn Mangold, whose comments about the Trust’s partnership with Project Search and Queensmill School, Hammersmith can be found here:

[Kathryn Mangold, Lead nurse for Learning Disability and Transition, Chelsea and Westminster Hospital NHS Foundation Trust, located at 78:15 minutes](#)

As the business liaison lead for the programme Kathryn Mangold outlined that they were currently supporting a third cohort but had taken a slightly different approach which included young people on the autistic spectrum. This was an unusual model which needed a high ratio of support staff of one to two.

Jim Grealy welcomed details about training and employability, and the commitment and enthusiasm for inclusive programmes. He asked how

students were selected and placed, and, how much continuity of experience between leaving school and employment there was, a key success factor. Claire Cookson explained that they applied a rubric which contained measures to ensure that there was a clear, structured framework of reference to help review learners and support those that were not equipped to score highly. Qualities such as ambition, personal care and some academic ability, together with a network of family support were some of the positive markers sought.

3. The H&F Local Offer

Councillor Richardson invited Jo Baty to provide information about the work of H&F and its local offer, supported by Mandy Lawson and Kamal Motalib. Jo Baty began the presentation which can be found here:

[Mandy Lawson, Assistant Director of SEND, Jo Baty, Assistant Director Mental Health, Learning Disability and Provided Services, and Kamal Motalib, Head of Economic Development located at 88:18 minutes](#)

Kamal Motalib provided details of the challenging economic background currently being experienced within H&F, reflecting the broader national economic impact of Covid. Evidence suggested that the pandemic would impact economically on disabled residents for whom the cumulative effect of low employment opportunities were negative social and health outcomes. A decline on the high street and local businesses has been accelerated by Covid, exacerbating an already difficult situation. In terms of positives, many residents and businesses had adjusted work and business patterns and there existed a strong business base with a higher number of STEM orientated business.

Collaborative work across the council had brought together ASC, Children's Services and external partners such as West London Alliance, and were keen to encourage and help grow a more inclusive local economy. Employment, business services and job brokerage had been refocused to provide better support to communities.

Mandy Lawson elaborated on the development work undertaken on 'pathways to employment' which included the supported internship model, working with key local partners such as ParentsActive. There were twenty supported internship programmes across north west London with three based in H&F. In terms of next steps Mandy Lawson reported that an apprenticeship task force was being established within the council which would facilitate many apprenticeship opportunities across the organisation.

Councillor Richardson invited Bianca Tavella, Project Manager, Fairshot Café to outline the work of the café. Bianca Tavella commended Kamal Motalib and Nicola Burgess for their ongoing support and advice. The impact of Covid had resulted in the loss of funding for the Café which was a joint social enterprise initiative that provided training and employment for people with disabilities. This collaborative approach had resulted in a positive response

from Westfield shopping centre which was now actively seeking suitable premises for the Café.

Members of the Committee commended the work undertaken in establishing the Fairshot Café and other employment programmes, and the collaborative support that had been provided by council officers which was inspiring. Councillor Richardson read out four actions, the detail of which would be finalised and agreed outside the meeting (and appended to the minutes):

RESOLVED

1. That the Committee establish a scrutiny task force to contribute to the development of a Council wide strategy on inclusive employment;
2. To understand more the views and experiences of parents, carers and young people in relation to inclusive employment;
3. To recognise the importance of the social and economic value of supporting young people as they seek to lead independent lives and to identify the benefits of this for both the community and the Council; and
4. To identify a senior officer(s) within the organisation who would be able to.

7. COMMUNITY TRANSFORMATION - MENTAL HEALTH INTEGRATED NETWORK TEAM (MINT)

Councillor Richardson welcomed Jo Baty, Wendy Lofthouse and Linda Stradins who provided a presentation on MINT, details of which can also be found at the following link:

[Jo Baty, Assistant director mental health, learning disability and provided services; ASC, LBHF, Wendy Lofthouse, Mental Health Commissioning Programme Manager, H & F CCG and Linda Stradins, H&F Service Manager, West London NHS Trust, located at 122:22 minutes](#)

Jo Baty thanked Merrill Hammer, Jim Grealy and Keith Mallinson for their contribution towards the development of MINT which was first referenced in the NHS Long Term Plan, 2019. Wendy Lofthouse recognised that the local offer for core community mental health teams had not been updated or invested in for many years and that the Long Term Plan placed an emphasis on wrap around community care. MINT had received transformation funding ahead of a national roll out of the programme. This was a positive development given the level of investment aimed at addressing a funding gap.

Following the presentation Councillor Richardson commended and thanked officers for a well-informed presentation, and the Committee for their commitment to asking considered questions.

Jim Grealy welcomed the development work on MINT and recognised the extent of the positive impact the investment in the service will potentially have. He suggested that given the direction of travel and predicted economic decline, it might be possible to explore a potential link to increased demand for

mental health and wellbeing services. The progress on co-production was also welcomed. Victoria Brignell added that the members of Action on Disability was also committed to coproduction, many of who were keen to be involved in this work. Jo Baty confirmed that Action on Disability had been invited to meet with officers to discuss and to contribute to the work co-production, to help review the council's website on People First on social care and on MINT.

Councillor Lloyd-Harris enquired if residents were time restricted in accessing services. There were circumstances where cases slipped through gaps in services or services then ceased operating. Wendy Lofthouse responded that the focus of any response would be to identify the needs of each individual and how those needs can be met. Having a model case load and case list meant that a person would be "attached" to that service despite not having an active intervention. If they received an intervention and were discharged, people might have concerns about returning to the service. The new model would have greater flexibility, be integrated within the community and accessible according to need. Maintaining good mental health and wellbeing was only part of the answer. Having decent housing, secure employment or having purposeful and meaningful social interactions were also important. The intention was that MINT would have a holistic approach with a more easily accessible, integrated and joined up network of services.

Councillor Lloyd-Harris acknowledged the benefits of the new approach but highlighted that a caseload of 20-28 seemed high particularly given that some patients had complex needs. She also highlighted that that more investment in IAPTs (Improving Access to Psychological Therapy programme) funding in long-term treatment services would have greater impact over short term responses as they were more likely to address a patients underlying concerns and so less like to return for a short-term intervention. Linda Stradins clarified that IAPTs were a collection of different, primary care psychological therapies, delivered in prescribed sessions either face to face or online by a team of clinicians.

Linda Stradins concurred that the number of cases were challenging and that within these there would be some patients that were relatively stable on depot medication, or clozapine (prescribed by a psychiatrist in secondary care). Improving pathways would make it easier to arrange stepdown care through better partnership access to GPs.

Councillor Richardson commended and thanked officers for the report and the amount of information covered over a short period of time.

RESOLVED

1. That an update report be prepared within six months to review the extent the development and introduction of MINT;
2. The Committee be updated about the timetable of resident engagement regarding MINT; and
3. That members submit any further questions about MINT to officers and that written responses be circulated.

8. WORK PROGRAMME

The Committee noted that the Children and Education, Policy and Accountability Committee would be considering a brief item on children and mental health at their meeting on 22 September 2020. However, the Committee planned to undertake more detailed scrutiny of this issue at a later meeting. The Committee was also planning scrutiny of mental health community support action programmes such as community champions.

RESOLVED

That the work programme be noted.

9. DATES OF NEXT MEETING

Wednesday, 4 November 2020.

Meeting started: 6.30pm
Meeting ended: 9pm

Chair

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Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

Supported Employment scrutiny item actions and outcomes 10 September 2020

- 1. To establish a scrutiny task force to contribute to the development of a Council wide strategy on inclusive employment:**
 - To look at the way in which the Council delivers “job brokerage”.
 - To review how the Council can identify, access and capitalise on existing opportunities.
 - To acknowledge the critical importance of the pivotal role of the Council in facilitating internship opportunities, not just within its organisation but locally.
 - To identify areas of best practice including looking at how supported employment is managed and delivered by other organisations and partners in the borough, e.g., community and voluntary sector, hospitals, private sector.
 - Liaise with Project Search about shared working/training opportunities.

- 2. To understand more the views and experiences of parents, carers and young people in relation to inclusive employment:**
 - Accessibility. How to improve the way in which a supported employment local offer is communicated, how young people can engage and navigate the application process.
 - To identify any gaps in communication and ensure that the supported employment pathway is more clearly signposted and to identify and co-produce any potential solutions.
 - That resources in the form of a “job coach” are identified to support young people and help with applications for employment.
 - Close working with residents/voluntary sector (H & F Can) to see how these can plug gaps (job brokerage, business engagement) and enable shared projects such as Fair shot café.

- 3. To recognise the importance of the social and economic value of supporting young people as they seek to lead independent lives and to identify the benefits of this for both the community and the Council.**

- 4. To identify a senior officer in Economy & P&T, as a subset of the Industrial Strategy work, who would be able to:**
 - Help strategically lead and contribute to the work.
 - Named person/people within council for inclusion and inclusive job brokerage
 - Lead an internal steering group and represent the Council on external steering groups, e.g., Charing Cross, West Middlesex.

Actions and next steps:

- Lisa Redfern has agreed to be the Chair of the Steering Group.

- Close working with The Economy to ensure joint working and shared opportunities and knowledge of new Workzone – job brokerage– meeting scheduled for next week with Cllr Richardson, Lisa Redfern and Tony Clements.
- Co-production with disabled people, Cllr Richardson to arrange to meet with Tara Flood and Kevin Caulfield to ensure design inclusive approach.
- Fairshot Café news – invite Bianca Tavella.



A lifetime of specialist care

Briefing paper for Hammersmith and Fulham Health, Inclusion and Social Care Policy and Accountability Committee – Wednesday 4th November 2020

1. Background

i) The RBH-KHP Partnership

Royal Brompton & Harefield NHS Foundation Trust (RB&HFT) is the largest specialist heart and lung centre in the UK, providing services to adults and children from across the country, Europe and the world. Guy's and St Thomas' NHS Foundation Trust (GSTT) is one of the largest providers of specialised services in the UK. It provides a full range of hospital and community services for people in Lambeth, Southwark and Lewisham; and is a tertiary centre for cancer, renal, orthopaedic, paediatrics, cardiovascular and many other specialist services.

GSTT is a partner in King's Health Partners (KHP), an academic health sciences centre for London that includes King's College London, King's College Hospital, and South London and Maudsley NHS Foundation Trusts.

In July 2016 NHS England announced plans to transfer congenital heart disease surgical and interventional cardiology services away from Royal Brompton Hospital to appropriate alternative providers (subject to consultation). Royal Brompton was not able to meet one of the new clinical standards, published in 2015, due to its lack of a comprehensive range of co-located children's clinical services.

In 2017, NHS England held a public consultation on proposals for future commissioning of congenital heart disease services. RB&HFT partnered with KHP to develop proposals for a world-leading centre of clinical academic excellence in cardiovascular and respiratory care, which were submitted in a joint response to the consultation. The proposals (subject to public consultation by NHS England) would eventually see Royal Brompton services move to the St Thomas' and Evelina London Children's Hospital site at Westminster Bridge, with its specialist clinical teams joining cardiovascular and respiratory colleagues from GSTT in a new world-leading heart and lung centre.

In November 2017 NHS England agreed to allow the Partnership sufficient time to develop these proposals. That work continues.

ii) Decision to Merge

In January 2020, the Board of NHS England (NHSE) indicated its support for the proposed direction of travel on proposed approaches on cardiovascular and respiratory services in London which included:

- Support for North West London (NWL) finalising its clinical strategy and business cases to provide fit for purpose facilities at St Mary's, Hammersmith and Charing Cross;
- Developing proposals to move congenital heart disease (CHD) services from Sydney Street to Westminster Bridge, and achieve compliance with paediatric CHD service standards after estate developments at Evelina London; and
- Proposals to secure a sustainable future for RB&HFT and continued delivery of world class care by merging RB&HFT and GSTT.

Responding to NHSE's approach, in March 2020 RB&HFT's Board and the Board of GSTT set out a non-binding, mutual agreement to pursue a merger of the two organisations. After presenting options to the respective Boards in July 2020, a merger through acquisition was agreed to be the best organisational route to provide a strong, sustainable and resilient platform for bringing the Trust together from clinical and governance perspectives.

Subject to receiving the necessary approvals from both Boards, councils of governors and regulators, and input from local stakeholders, the Trusts plan to be ready to merge on 1 February 2021.

The merger would not directly affect the range of services available at Royal Brompton (or Harefield) or the manner in which those services are provided to patients.

When NHSI supported the approach of a merger between GSTT and RBHT in their January 2020 Board Meeting, they recognised that any substantive service changes remained subject to NHS national and regional specialised commissioning review and oversight, as well as public engagement and consultation where needed.

NHSE/I's review of the strategic case for the proposed merger in August 2020 concluded, on the basis of its assessment of risk, that the merger does not require in-depth external oversight by the regulator.

In December 2020, the boards and governors of both Trusts are expected to consider a motion to execute the merger transaction. In advance of that decision, the Trusts are required under the Transfer of Undertakings (Protection of Employment) Regulations (2006) (TUPE) to inform and consult affected staff in good time before the transfer happens. Formal staff consultation at Royal Brompton & Harefield started on 01 October 2020 and will run for eight weeks.

2. Benefits for patients

Our two Trusts have a long history of being at the forefront of patient care and research. We want to use our collective clinical and academic expertise to provide the best possible care to patients, meet all national standards for paediatric congenital heart disease and ensure the long-term future of the specialist services provided at Royal Brompton Hospital.

We are confident that by formally bringing together our respective organisations and the shared expertise of our clinical and academic teams, we can significantly improve care and outcomes for people with cardiovascular and respiratory disease.

Although not part of the formal acquisition transaction process, we also have an ambitious, long-term vision to create a new heart and lung centre on the St Thomas' site that will reflect the Royal Brompton name and heritage. We want to create one of the best centres for heart and lung disease in the world, deliver exceptional care to patients and drive research into new and better treatments. The process of joining Guy's and St Thomas' (GSTT) does not determine the future location of, or any proposed changes to services, which will remain subject to public consultation by NHS England but it will provide a sustainable future for our hospitals and enable us to keep our expert teams together.

3. The need for change

We have an ambition to create something new and world-class for future generations. If we stay as we are, NHS England will decommission our children's congenital heart disease services which will de-stabilise the whole Trust, split up our expert teams and risk all our services being dispersed.

It is not viable to maintain the status quo. Joining Guy's and St Thomas' is the best solution to sustain our services for the future; it will ensure our adult and children's teams are kept together and enable us to continue our 'lifetime of specialist care' approach which has always been integral to our care (providing specialist care from before birth to old age).

4. Alternative options

We have investigated other options, but none offered the right opportunity and partnership for the Trust to move forward and expand – vital for a specialist Trust with a strong reputation for breaking new ground in heart and lung disease treatment and research.

From our earliest discussions with Guy's and St Thomas' we realised we had the chance to create something new and dynamic with colleagues who shared our record and appetite for innovation and transformation, while keeping together our services and the teams who deliver them.

5. Royal Brompton and Harefield sites and heritage

We anticipate that Royal Brompton will remain operating on its current site for a significant period of time - probably a decade: Royal Brompton Hospital is certainly not closing. If our vision is realised, it would re-locate three miles to the St Thomas' site once new facilities have been developed there. Any service moves would be the subject of NHSE public consultation. Plans for the estate are not yet developed.

We expect Harefield to continue to thrive as it does now, as the designated heart attack centre for outer north-west London, the specialist heart and lung provider for a large population in northwest London and continuing to lead in heart and lung transplantation and devices for end-stage heart disease.

While RB&HFT will cease to exist as an independent Foundation Trust after joining a newly restructured Guy's and St Thomas' NHS Foundation Trust, both our Boards recognise the importance of the Royal Brompton name and heritage, and are committed to maintaining this as part of the naming of the new heart and lung centre. The Harefield name will be kept and used at that site in the same way as the Guy's and St Thomas' names are used at their sites today.

6. Paediatric services

In 2021, NHS England (NHSE/I) plan to start a public consultation process on the proposed move of paediatric services from Royal Brompton Hospital to an expanded Evelina London Children's Hospital (ELCH). If NHSE/I supports the move following public consultation, we envisage a substantial relocation taking place when new purpose built, state-of-the-art facilities are completed at ELCH in around five to six years' time. However, in the meantime, as a merged Trust, our paediatric teams will work together closely to best meet the needs of children and their families on the basis of a single, integrated clinical service delivered across our existing sites.

7. Implications for Hammersmith and Fulham residents and neighbouring NHS Trusts.

Hammersmith and Fulham residents (and indeed all patients from North-West London) will always be able to access our specialist services, wherever they may be based.

We are committed to continuing to support services at Imperial College Healthcare NHS Trust, Chelsea & Westminster NHS FT and Royal Marsden FT as we do today and for as long as that support is wanted – both following the proposed merger, and before and after any potential future service moves. There will be plenty of time to agree the nature of that support and how it should best be provided.

8. Consultation and engagement

When two foundation trusts join together a public consultation is not required, but we will be continuing our briefing sessions with stakeholders as the business case is developed and will then update stakeholders if it is approved by the GSTT board (and our own) and ratified by both councils of governors. Our vision for heart and lung care in the future is separate to the merger and any service change that may arise from it (whether paediatric or adult) would be subject to public consultation by NHSE/I.

9. Staff involvement and formal consultation

Our plans are clinically led. Staff have been integral to their development since 2017 when we announced plans to form a partnership with King's Heath Partners and they have been working closely with colleagues at GSTT, and the wider Kings Health Partners, since then. In October a Transfer of Undertakings, Protection of Employment (TUPE) consultation began to address the implications of the formal transaction for each member of staff.

10. Patient involvement

Patients, their families and carers continue to be involved in the development of our partnership proposals and vision. This includes a PPRG (Patient and Public Reference Group) which has been established for over a year. These proposals all centre around delivering benefits for our patients and better clinical care, so the contribution from our patients is invaluable.

11. Academic relationships

Both RB&HFT and GSTT are committed to continuing to work with each of our existing academic partners and to exploring new academic models with them. Our aim is to support the academic sub-specialty focus that drives much of the world-class research and teaching today. In addition to collaborating with clinical academics from Imperial College London and King's College London, we will also welcome those from other academic centres in the UK and internationally.

Ends/



Healthwatch Hammersmith & Fulham

Jaime Walsh - OD, YVHSC

Maisie McKenzie - Operational Manager, Healthwatch Hammersmith & Fulham

Report for Health, Inclusion and Social Care Policy and Accountability Committee, LBHF

4 November 2020

Healthwatch - the background

YVHSC took over the provision of Healthwatch Hammersmith & Fulham on 1 April 2020.

Your Voice in Health and Social Care (YVHSC) is a company limited by guarantee and a registered charitable organisation that gives people a voice to improve and shape services and help them get the best out of Health and Social Care provisions.

YVHSC currently deliver 6 Healthwatch contracts across London including Hounslow and Ealing in North West London.

Staff Team

Tim Spilsbury - CEO, YVHSC

Jaime Walsh - Director of Operations, YVHSC

Hammersmith & Fulham office:

- Maisie McKenzie - Operations Manager
- Patricia Kouadio - Patient Experience Manager
- Nisha Devani - Project Officer
- Daniela Sahaj - Volunteer and Engagement Officer

All staff continue working from home due to government directives for COVID-19.

Volunteers

Three new volunteers have started supporting the work of the organisation with a focus on patient experience and supporting the development and rollout of the Digital Inclusion Research Project.

We have recruited two new members to the Shadow Committee, providing administrative support to the internal team and their partnership meetings and to work with our Patient Experience Manager gathering patient feedback.

Our Intern continues to work with our Patient Experience Manager on building a database of local organisations, supporting patient experience feedback gathering, and helping develop social media and broaden its reach.

Healthwatch Hammersmith & Fulham

141-143 King Street Hammersmith | W6 9JG

Tel: 0203 886 0386

E-mail: info@healthwatchhf.co.uk

Representation at key meetings

- We have been attending NWL Health and Care Partnerships COVID-19 communication leads meeting. During the meeting we continue to share feedback from local residents and key issues raised by community organisations representing seldom heard communities. We also use our participation at the meeting to obtain key trends and intelligence that helps shape our communication.
- We have participated at the Hammersmith and Fulham CCG's Public Reference Group (PRG) meeting.
- We have attended the Hammersmith and Fulham Health and Wellbeing Board.
- We have attended the Hammersmith and Fulham Safeguarding Adults Board
- We have attended the North West London Clinical Commissioning Group meeting with presentation by Jo Ohlson Accountable Officer for NWL CCG in regards to the proposal to merge to single NWL CCG. Healthwatch Hammersmith and Fulham also responded to the consultation with other YVHSC providers of Healthwatch Services in NWL (Ealing and Hounslow)
- We have attended Hammersmith and Fulham CCG Primary Care Commissioning Committee (Public Section)
- We have attended EPICS Steering Group Meeting
- We have attended the Hammersmith and Fulham PAC.
- We continue to attend the POPS Group for Hammersmith and Fulham.
- We have attended and participated in Healthwatch England meetings with local Healthwatch organisations across London.
- We attended a presentation by Sir David Sloman, NHS Regional Director for London and Martin Machray, Joint Regional Chief Nurse and COVID-19 Incident Director from NHS England and NHS Improvement, focussing on 'Remodelling Health Services In London Providing safe services during the Covid-19 pandemic and into the future'. The session was hosted by Healthwatch England.
- We attended workshop entitled 'Digital Inclusion/Inequalities' hosted by the North West London Health and Care Partnership. The recommendations from the workshop will inform the North West London Health and Care Systems Digital Strategy which will be presented to the NWL ICS Population Health Management Board Meeting in October 2020.
- We continue to establish contacts to enable our participation at key stakeholder meetings.
- Requests for representation at key meetings continue to be directed to the Manager

Workplan

Patient Experience

We started implementing our strategy to obtain patients feedback during social distancing. Measures include direct phone calls to residents, promoting patient experience and feedback through the Next Door App and Twitter and the production of the first Patient Experience Report.

To ensure we also reach people who do not have access to digital devices and/or are not online, we have distributed leaflets and patient experience forms to local Pharmacies in the Borough with plans to send over leaflets and patient experience forms to other local foodbanks

We have developed a flier to help promote the service and encourage local residents to leave feedback. To achieve this, we have contacted and liaised with a number of key stakeholders.

Patient Experience and Engagement

- We are working with individual GP surgeries to have a widget on their website which diverts patients and service users to our website to provide feedback on their experience of health services. So far, 7 GPs have agreed to attach this to their websites.
- We also continue sending Patient Experience forms to GPs to obtain feedback.
- Our Patient Experience Manager is making contact with PALS at Imperial to also include a widget on their website which diverts patients and service users to our website to provide feedback on their experience of health services
- We are also working with Dance West and Good Neighbour
- Since July 2020, we have collected 1060 reviews and so will reach our Quarterly target of 1200.
- During our direct engagement we were able to refer people to different services such as Age UK, Foodbank, CAN, and Mutual groups.
- We are still collecting reviews through direct engagement where we call patients/service users and ask to provide feedback.
- We are still promoting the service via NEXTDOOR APP, Twitter, and Mutual groups.

We have developed a flier to help promote the service and encourage local residents to leave feedback. To achieve this, we have contacted and liaised with a number of key stakeholders.

Committee

The fourth meeting of the Shadow Steering Committee took place this month. It developed a plan to transform the Shadow Committee into a full committee (to include the Election of a Chair) by end of Jan 2021 and commented on our main priorities for this month on the Research Project on Digital Inclusion, suggestions for a second research project, locations for the Virtual Enter and View Visits in Health and Social Care Settings as well as work with the CCG in regards to the plans to open Hammersmith Urgent Treatment Centre.

Engagement

We continue to offer online engagement sessions and offer alternative forms of engagement through platforms such as WhatsApp, social media and Zoom conference meetings. Residents can leave feedback or ask for information and signposting to health and social care services using telephone and email if this is more convenient.

- Information & Signposting telephone and enquiry line is open 10am-5pm Monday-Friday **0203 886 0386**.
- WhatsApp Information and Signposting and Advice and Guidance messaging service is available 10am-5pm, Monday-Friday **07309 736622**.
- Email information and signposting and advice and guidance is available 10am-5pm, Monday-Friday **info@healthwatchhf.co.uk**.
- Virtual community engagement sessions are available weekly on Mondays and Thursdays.

We continue to focus on partnership building to develop our presence in the borough.

Information and signposting

We continue to signpost local residents to NHS services and update the website weekly with local information i.e. from Healthwatch England Workplace App, providing local residents to access up to date information on Covid-19 pandemic we continue to utilise our website <https://healthwatchhf.co.uk/>

We are also promoting the messages of local stakeholders including Hammersmith and Fulham CCG, NWL Health and Care Partnership and Healthwatch England. The topics of the information ranged from:

Saturday Science Club at The Invention Rooms - Imperial College.
Series of Science events at Saturday Science Club.

Message from Hammersmith and Fulham Council - Dr Liz Whitaker, Clinical Lecturer and Consultant, Paediatric Infectious Diseases and Immunology Imperial Hospital NHS Trust
GP Access During the Pandemic
Message from Hammersmith and Fulham CCG
COVID-19 Infrastructure Changes make
Cycling and Walking to School Easier and Safer.

The website is also being updated regularly with details of relevant COVID-19 information.

The information we share on our dedicated COVID-19 page covers a range of topics including:

- Links to up to date information from the North West London Collaboration of Clinical Commissioning Groups, the Government website, and the Local Authority.
- Guidance for people with diabetes
- Guidance in easy read.
- Guidance in British sign language (videos).
- Guidance in other languages.
- Mental wellbeing while staying at home.
- Information and guidance from local hospitals.
- Temporary changes to local services.



A useful fact-sheet with frequently asked questions for North West London residents

North West London residents including people living in Hammersmith and Fulham can now access local, up to date information on health and care services in their borough during COVID 19 pandemic.

This useful fact-sheet with frequently asked questions was produced by the North West London Health and Care Partnership.

Some of the questions cover topics such as:

- What should I do if I need medical help during this time?
- Can I still contact my GP?
- What should I do if I need a prescription or repeat prescription?
- I think I might be having a heart attack, what should I do?
- I'm having treatment for cancer and I'm worried about getting the virus...
- I have a learning disability/ autism, where can I get help?

For full list of topics and advice please click on the link: Help Us Help You Get Care When You Need It – FAQs.



We have seen an increase in residents emailing us with information and signposting queries. Up to date we have conducted 7 information and signposting queries.

Social Media

We continue to have a daily presence on social media with a focus on Twitter. We have currently posted 106 tweets and gathered nearly 103 followers with 9 new followers since August 2020. Our interaction on social media has been successful and helped attract participants to our Zoom engagement sessions.

We have tweeted the following topic areas:

- Mobile Testing Unit at Westfield Shopping Centre
- How to access your Dentist During COVID- 19 Q and A - Imperial College London
- Back to School message from London Borough of Hammersmith and Fulham.
- NWLCCG Important information on changes to the CCG
- Flu Vaccinations NWLCCG
- What people are telling us ? Outcome from Survey Healthwatch England.
- What the Tech ? - Imperial College London
- Hospital Experience During COVID-19 Healthwatch England
- Age UK Mobile Minibus Service - Age UK Hammersmith
- **Flu Vaccination**, stay well and protect the NHS.
- **2. Kick-start your health - Better Health LET'S DO THIS** is a campaign & app from the NHS which can help improve wellbeing by making healthier lifestyle choices.
- **3. Use 'NHS 111 New Campaign** across London to encourage people to contact 111 who are assessed as needing to attend an emergency department, will be booked a timeslot at their closest urgent and emergency care centre.
- **London ADASS Annual Carer's Festival 2020 - Free Event - Celebrating the role of Carers** across the Capital on 26 September 2020.

Zoom feedback and information sessions

We are developing engagement sessions for the research project which will be used to gather views and experiences of accessing GP services during the pandemic. Participants in induction interviews for patient experience and Shadow Committee member

WE WILL BE PROVIDING INFORMATION, SIGNPOSTING, GUIDANCE AND SUPPORT TO RESIDENTS WORRIED ABOUT THE CURRENT OUTBREAK OF COVID-19 (CORONAVIRUS)

ZOOM CONFERENCE SERVICE
We will be running weekly sessions via our Zoom conference services. They will be taking place:
• Every Monday 2PM – 3PM
• Every Thursday 10AM – 11AM

We will publish, instructions required for anyone to join the group on our website
For more information, please visit our website
healthwatchhf.co.uk/information-on-coronavirus/

WHATSAPP SERVICE
We have extended our Information & Signposting service, establishing a WhatsApp service available
• 10am – 5pm, Mon – Fri.
To join, please add us on 07309736622

healthwatch
Hammersmith and Fulham

Research

We have launched our first research project - GP ACCESS OVER THE COURSE OF THE PANDEMIC. The survey questionnaire has gone live and is available through Survey Monkey, along with Easy Read and WORD versions.

This has been promoted with the assistance of our partners, contacts and stakeholders such as CCG, SOBUS, GP Link-workers, London Borough of Hammersmith and Fulham, and Imperial College Healthcare NHS Trust.

The survey closes on 12th October 2020 and presentations have been made to PRG, POPS Forum and We-Coproduce, with the Shadow Committee also promoting the project with their contacts.

We have also spoken with partners and stakeholders about the joint delivery of the next phase of focus groups which will take place during October 2020

We have begun to assess options for the second research project and are discussing these with stakeholders. One suggestion is Young Carers and Mental Health.

The Survey Monkey link is <https://www.surveymonkey.co.uk/r/HQZQ7J7>

Enter and View

The standardised suite of documentation across the London Your Voice, Health and Social Care Healthwatch organisations is now complete. This revised suite of documents will support the virtual Enter and View Programme locally. The group of Enter and View representatives across the YVHSC Healthwatch Sites will continue to meet on a monthly basis to exchange experiences of the new way of working. This will feed into the training for the Shadow Committee who would like to participate in the virtual visits.

We assisted Healthwatch Bromley with their first virtual visit to Baycroft Care Home on 23rd September 2020 and will assist again on 30th September 2020. Lessons have been learnt from the initial session which will assist in improving the virtual method delivery going forward.

We have been considering the Enter and View strategy for Hammersmith and Fulham and are considering a variety of options including community resources.

Priorities for the next month

In the next month we will focus on the below priorities:

- Continue to gather intelligence to shape our workplan and formulate our priorities
- We will continue to focus on engagement sessions and work in partnership with partner organisations to ensure we are able to reach the most vulnerable and seldom heard voices
- We will identify settings for future Enter & View reviews
- We will continue to work with the Borough and CCG to roll out the Digital Exclusion Research Project i.e. promoting survey and facilitating focus groups
- Develop options for a second Research Project
- Recruit to the vacancy of Chair for our Shadow Committee
- Direct Engagement of local residents by our Patients Experience Manager in order to collect patient experience and reviews
- Continue to engage with emerging intelligence and data to shape our workplan and strategy

London Borough of Hammersmith & Fulham

Report to: Health, Inclusion and Social Care Policy & Accountability Committee

Date: Wednesday, 4 November 2020

Subject: Work Programme

Report of: Bathsheba Mall

Summary

The Committee is asked to consider its work programme for the municipal year 2020/21

Recommendations

The Committee is asked to consider the proposed draft work programme (attached as Appendix 1) and suggest further items for consideration

Wards Affected: All

H&F Priorities

Our Priorities	Summary of how this report aligns to the H&F Priorities
<ul style="list-style-type: none">• Building shared prosperity	<i>In accordance with its constitutional terms of reference the work of the Committee will support the Council's priorities by helping to develop, shape and deliver health and social care services for the benefit of all borough residents.</i> <i>The Work Programme comprises of health and social care topics, ensuring an inclusive agenda of emerging and strategic policy areas.</i>
<ul style="list-style-type: none">• Creating a compassionate council	
<ul style="list-style-type: none">• Doing things with local residents, not to them	
<ul style="list-style-type: none">• Being ruthlessly financially efficient	
<ul style="list-style-type: none">• Taking pride in H&F	

Contact Officer:

Name: Bathsheba Mall
Position: Committee Co-ordinator
Telephone: 020 87535758 / 07776672816
Email: Bathsheba.mall@lbhf.gov.uk

Background Papers Used in Preparing This Report

None.

List of Appendices:

Committee Work Programme 2020/21

**Health, Inclusion and Social Care Policy and Accountability Committee
Work Programme Development Plan 2020/21**

Item / working title	Overview / Development	Report Author / service
10 September 2020		
Covid-19 Update	Brief update from the Director of Public Health	PH
Supported Employment	To look at the opportunities for improving the provision of supported employment placements within the Borough and that development of guidance for this.	ASC / Economy (LBHF) / Providers
Community Transformation – Mental Health Integrated Network Team	This item provides detailed background information as to the development of the Mental Health Integrated Network Teams (MINT) across Hammersmith & Fulham.	CCG / WLT
4 November 2020		
Covid-19 Update	Brief update from the Director of Public Health	PH
Inclusive Employment - Verbal Update	To look at the opportunities for improving the provision of supported employment placements within the Borough and that development of guidance for this.	ASC / Economy (LBHF) / Providers
Brompton Hospital	Background and context to the potential movement of services from RBH to other providers.	RBH
Healthwatch Young Voices H&F	An outline and introduction to the organisations work and remit, specific to H&F.	Healthwatch Young Voices H&F
26 January 2021		
Budget	For the Committee to review corporate and ASC budget plans and medium-term financial strategies.	Resources / ASC

Suggested items – included for information (2020/21)

<p>Mental Health</p> <ul style="list-style-type: none"> • Analysis of Mental Health data and how this informs key performance indicators • West London NHS Trust update • Health Based Places of Safety • The impact of Covid-19 on mental health and wellbeing • Impact of Covid-19 on older people 	<p>Children's</p> <ul style="list-style-type: none"> • Immunisations • Supported Employment
<p>Community / Public Health</p> <ul style="list-style-type: none"> • Community Champions - to consider current provision and support, following disaggregation of the service and what this means for LBHF residents; to consider the further development and support of the service. • Health and Public Transport for older residents • The Digital Development of Primary Health Services – GP at Hand • Brompton hospital – impact of the transfer of services* • Immunisation – how to support work around improving immunisation take up, what are the barriers and how can these be effectively addressed 	<p>Health Partners and Providers</p> <ul style="list-style-type: none"> • CAMHS update • Track and track review issues generated by the Imperial Quality Audit. • Engage with and review work being done by PCNs on the effectiveness of their work on Long Term conditions* • Dentistry – most services have been suspended for COVID (an issue that disproportionately effect the more deprived areas)*