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HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

7 FEBRUARY 2017

(7.15 pm - 9.00 pm)

PRESENT: Councillors Councillor Peter McCabe (in the Chair), Councillor Brian Lewis-Lavender, Councillor Laxmi Attawar, Councillor Mary Curtin, Councillor Sally Kenny, Councillor Abdul Latif, Councillor Marsie Skeete Councillor Najeeb Latif and Saleem Sheikh

ALSO PRESENT: Councillor Tobin Byers, Cabinet Member for Adult Social Care and Health

Dr Andrew Murray, Chair Merton Clinical Commissioning Group (MCCG), Andrew Moore, The Programme Director of Financial Recovery and Acting Director of Commissioning Operations, Dr Karen Worthington, MCCG, Rebecca Blackburn, MCCG and Stella Akintan, Scrutiny Officer, LB Merton.

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Apologies were received from Councillor Suzanne Grocott. Councillor Najeeb Latif attended as a substitute.

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

None

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

The minutes were agreed

4 CARE IN THE COMMUNITY FOR OLDER PEOPLE AND THE HOSPITAL DISCHARGE PROCESS (Agenda Item 4)

The Interim Head Adult Social Care gave an overview of the report highlighting that the aim is to get people back into their home at the earliest opportunity. It was highlighted that working in partnerships and focussing on what is best for each individual is an important part of this process.

Lynn Avery local resident who submitted a request for the panel to look at this issue was invited to speak for three minutes.

Ms Avery asked the panel to consider the creation of a website in which council checked care homes can upload details of short term room availability. This for hospitals to access when an elderly patient is ready to vacate a bed, but cannot do so because no immediate “at home” care can be provided. This can be beneficial to the Care Homes, Elderly Patients hospitals as well as the council.

The interim Head of Adult Social Care welcomed the suggestion and would be happy to explore the options. She reported that some council's do publish lists of vacancies in care homes. It is important that people are able to make the right decisions at the right time. There are a number of practical issues that need to be considered and she confirmed she was happy to meet with Ms Avery to discuss in more detail.

A panel member asked about the percentage of people in Merton who face delayed discharge. The interim Head of Adult Social Care said there are peaks and troughs in the number of people delayed. The period after Christmas tends to experience a high level of hospital discharges; the team is currently managing to respond to the level of referrals but acknowledged that finding support for people with complex needs can be more difficult.

A panel member asked if people are able to make payment for care home services when they are required to. The Interim Head of Adult Social Care said when people require longer term support this is financially assessed based on what people can afford.

5 CHANGES TO THE WILSON WALK-IN CENTRE - TO FOLLOW (Agenda Item 5)

Dr Murray gave an overview of the report saying the current contract at the Wilson site had been extended three times and was more expensive than a typical contract. They have spoken to other GP practices in the local area who have agreed to take on extra patients. NHS England has provided resilience funding of £100,000 which will provide a package of support to the most vulnerable patients. Dr Murray also reported that the Wilson Centre does not meet the requirements of an urgent care centre which should carry out a range of procedures including blood tests.

Additional NHS England funding will support improvements in GP Practices, Merton Clinical Commissioning Group (MCCG) will receive £1 million per year over two years.

A panel member said she was concerned about putting additional pressure on GP services as she currently has to wait two weeks for an appointment. Dr Murray said funding will support GP services and mean they will have more time for patients.

A panel member highlighted that the West of the borough has two state of the art clinics, yet life expectancy is much lower in the East of the borough and therefore should be a priority. Dr Murray said a decision was taken a few years ago to develop

the Nelson. The Health and Wellbeing Model for East Merton will help to address the differences in life expectancy.

A panel member said the human cost of closing the Wilson site has not been taken into consideration as people over 65 will have to get two buses to the surgery. Consideration should be given to moving the GP practice into the Wilson hospital. Dr Murray said the Wilson doesn't have suitable space for a GP practice. There will be a double bus journey for some people as registered patients are from a wide area across Merton and Sutton.

A panel member asked if a phased approach to closing the GP practice was considered. Dr Murray said the logistics and costs would make this prohibitive.

A panel member asked if there had been an application for planning permission for the new Wilson site. Dr Murray reported that the plans are not sufficiently developed. The focus is on the model of care rather than the buildings. At a recent public meeting it was thought that an application had been submitted. As this was not the case, a letter of apology was sent to the Leader of the Council to explain the error.

A panel member asked if sufficient notice was given about the closure of the Wilson walk in centre. The Programme Director of Financial Recovery and Acting Director of Commissioning Operations said a process was followed and the first notification was given at the beginning of December. Dr Murray added that he accepted it is a major upheaval for people.

A panel member highlighted that in their view, most GP practices in East Merton are under pressure and therefore it is difficult to believe that additional patients will be able to find space at a new local surgery. The Programme Director of Financial Recovery and Acting Director of Commissioning Operations said MCCG will be reminding practices of their responsibilities and will address complaints. MCCG have been working with practices to ensure they have extra capacity.

A panel member asked how much money will be saved by the changes. Dr Murray reported that there will be no savings all monies will be re-invested in the service as the money follows the patient.

A panel member expressed concern about the extravagant costs charged by developers for new buildings. Dr Murray reported that this is not a Private Finance Initiative scheme. Monies come from a Community NHS Finance Partnership therefore rents will be affordable and the interest will not be extortionate.

A panel member expressed concern that vulnerable patients and the 15-44 age group may not register with a new GP. The panel were informed that MCCG will be working with the practices to track vulnerable patients.

A panel member felt that local people will consider the reputation of the surgery when making a decision about where to register and this needs to be addressed as patients are being dispersed. The Programme Director of Financial Recovery and Acting Director of Commissioning Operations reported that they are working with practices to raise standards for all surgeries. There is a work strand addressing this,

clinical leads have visited every practice to give advice and best practice is being shared.

A panel member asked if there will be more GPs or longer waiting times as a result of the changes. The Programme Director of Financial Recovery and Acting Director of Commissioning Operations said MCCG will be looking at other models of care such as more nurses, telephone appointments, Skype and encouraging GP practices to work together. The new money will be invested in clinicians.

A panel member pointed out that it is important to focus on the whole of Merton rather than just the East or the West of the borough

RESOLVED

Officers were thanked for attending to present the report.

6 WORK PROGRAMME (Agenda Item 6)

The work Programme was noted

7 HCOP WORK PROG 2016-17 (Agenda Item 7)

8 CHANGES TO THE WILSON WALK-IN CENTRE (Agenda Item 8)