

# Agenda Item 3

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## HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY PANEL

16 MARCH 2017

(7.15 pm - 9.10 pm)

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

Anjan Ghosh (Assistant Director and Consultant in public health)  
and Julia Groom (Consultant in Public Health) Hilina Asrress,  
(Senior Public Health Principal) Kenny Gibson (Head of Public  
Health Commissioning, NHS England ) Stella Akintan (Scrutiny  
Officer)

### 1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Councillor Munn substituted on behalf of Councillor Attawar

### 2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

none

### 3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

The Scrutiny Officer said the previous minutes made reference to Andrew Moore, Director of Recovery, Merton CCG and it should have been Andrew McMyllor, Director of Primary Care Transformation, Wandsworth and Merton CCG's.

RESOLVED

The Panel accepted this change and agreed the minutes.

### 4 NHS ENGLAND SEASONAL FLU AND CHILDHOOD IMMUNISATION PROGRAMMES FOR MERTON (Agenda Item 5)

The Head of Public Health Commissioning, NHS England gave an overview of the report and stated that we are now seeing the benefits from recommendations from the overview and scrutiny task group review in 2014 looking at improving immunisations amongst the 0-5 age group. A strong partnership is in place and they are working to an agreed action plan. Overall immunisations rates are improving. While the England average has fallen by 2% in Merton the rates have remained steady. Six GP practices have been identified for their good practice around improving immunisation rates and their approach is being shared with other practices in the borough. The Head of Public Health Commissioning reported that this work will be reported within the next six months and all comments from the Panel are welcomed.

Panel members asked about the safety of vaccines and if it can affect the immune system and if there is an antidote in the case of an emergency. The Head of Public Health Commissioning reported that the vast majority are safe, tried and tested with no detrimental effects. However having the illnesses can be detrimental. The Clinical Lead for Transforming Primary Care Nursing Lead & Maternity said reactions to vaccines are very rare and doctors and nurses are trained to deal with emergencies. A panel member sought clarification about how vaccines could prevent A&E admission. The Head of Public Health Commissioning reported that a recent study found that 45% of children in hospital had not had the flu vaccine. Therefore children who are asthmatic or have respiratory problems benefit from the vaccine.

Panel members queried the additional pressure on pharmacies to support the immunisation programme and if there is a plan to reduce the number of pharmacies. The Head of Public Health Commissioning reported that pharmacies have the capacity to reduce the pressure on GP's. The Head of Public Health Commissioning said it was his understanding that pharmacies are being retained as a prevention and dispensing hub and will be delivering a wider range of services. At the request of the Panel the Head of Public Health Commissioning endeavoured to find more details on the plans for London and Merton.

RESOLVED

NHSE to provide more details on the future of pharmacy services for London and Merton

#### 5 CHILDHOOD IMMUNISATION TASK GROUP UPDATE (Agenda Item 6)

The Public Health Consultant informed the Panel that the structures for immunisations had improved as part of the scrutiny review. The Clinical Lead for Transforming Primary Care Nursing Lead & Maternity is the Chair of the local action group. There is also a governance arrangement and the Health and Wellbeing Board has identified this as a priority. The new healthy lifestyles service will include health champions who will share healthy lifestyle messages including on immunisations. Health visitors will also continue to promote immunisations especially during the joint anti natal check. Public Health use communications channels available to promote messages about immunisations and this week there is a piece in My Merton.

A panel member congratulated officers on their work to improve take up of immunisations and asked how they are reaching those who are not registered with a GP. The Head of Public Health Commissioning said there is work taking place at a London level to understand groups who do not immunise their children and adapt services to meet their need. This could include Saturday or pop-up clinics.

RESOLVED

Officers were thanks for their work on this task group review

#### 6 PREVENTING DIABETES IN THE SOUTH ASIAN COMMUNITY - DEPARTMENT ACTION PLAN (Agenda Item 4)

The Assistant Director in Public Health gave an overview of the progress with each of the each of the recommendations and stated that recommendation one to five is being implemented and recommendations six will begin shortly.

The Chair of the task group said the progress is very encouraging and he thanked task group members and the scrutiny officer for their work. He also expressed concern that at a recent meeting there was some confusion about the difference between type one and type two diabetes. The Assistant Director in Public Health said the Diabetes Prevention Programme will address this.

In response to a question it was reported that lifestyle service has been commissioned for a further two years. A panel member asked where services will be provided since the Wilson Hospital site is due to close. The Assistant Director in Public Health said the Wilson is still in use and there will be a transition plan when services are decanted to a new building.

A panel member said diabetes cannot be prevented in some communities as they are genetically predisposed to the condition. The Assistant Director in Public Health said scientific evidence shows that it can be prevented and he can send relevant information to the Panel.

## RESOLVED

Public Health to circulate scientific research on diabetes prevention.  
Public Health to provide an update on diabetes task group in 12 months.

## 7 MERTON CLINICAL COMMISSIONING GROUP - ENGAGEMENT ON PROPOSED CHANGES TO SOME SERVICES (Agenda Item 7)

The Director of Financial Recovery, MCCG gave an overview of the report stating that a number of changes are being proposed to address the financial challenges. MCCG need to save £7 million this year and £13 million next year. They are putting a greater emphasis on who has the greatest clinical need to address the rising cost of health care in an ageing population. The Panel are asked to give their views on the proposals and if they believe a consultation process is required.

The Panel considered the proposal regarding self care medicines with new guidance given to GP's to discard this practice and encourage people to purchase over the counter medicine.

A panel member expressed concern that there is a lot of waste in this area as more medicine is dispensed than is needed. Another Panel member was concerned about the impact on families with children who rely on their free prescriptions. The Director of Financial Recovery said they will be issuing guidance to reduce potential waste when medicines are dispensed. GP's will still be able to judge level of need and will still prescribe medicines to families if there is a risk of a child not getting the medication they need.

With the assurance that GP's will still have discretion on individual cases the Panel agreed this measure.

### **Gluten Free products**

It is proposed that gluten free products are no longer provided on prescription. Some Panel member expressed concern that gluten free products. The Director of Recovery said they are discussing the implications with representative organisations. The Panel agreed the proposal

### **IVF**

The Director of Recovery reported that it is an effective treatment but it is considered to be too expensive to provide. Croydon CCG recently made the decision to stop providing the treatment and there is a concern that a postcode lottery is developing. A panel asked what support will be given to people who have infertility issues. The Director of Recovery reported fertility investigations will still be provided and it is possible there will be exceptions on IVF treatment for those who have cancer or HIV. The Panel agreed that this is a sensitive area and will require a full 90 day consultation with the public.

Supporting patients to be surgery ready

The Director of Recovery reported it is important to emphasise that this is not a ban but a measure to help those who are obese and/or smoke to adopt a healthier lifestyle and quit smoking to improve the success of the outcomes of their procedure. Panel members felt this is a common sense approach and supported the proposal.

### **RESOVLED**

That MCGG conduct a full 90 day consultation on changes to IVF. All other proposals were supported by the Panel

## **8 ACTIVITIES IN LEARNING DISABILITY DAY CENTRES - FINAL REPORT (Agenda Item 8)**

Councillor Sally Kenny, chair of the task group gave an overview of the report and , thanked the task group and scrutiny officer for their work.

### **RESOLVED**

Task group recommendations were agreed and should be incorporated into panel work programme for 2017/18

## **9 WORK PROGRAMME (Agenda Item 9)**

### **RESOLVED**

The work programme was noted. Panel members were asked to send topic suggestions to the scrutiny officer.