

# Agenda Item 3

JOINT CONSULTATIVE COMMITTEE WITH ETHNIC MINORITY  
ORGANISATIONS  
11 SEPTEMBER 2018

PRESENT Councillors Councillor Edith Macauley (in the Chair),  
Councillor Eloise Bailey, Councillor Omar Bush,  
Councillor Joan Henry and Councillor Marsie Skeete

Councillor Akyigyina, Mr N Din, Jason Young, Mr R Siva, Dr  
Ruth Dawson, Mark Gale, Abbas Mirza, Mr Sheikh,  
Dr Arumugaraasah, Neil Thurlow

1 DECLARATIONS OF INTEREST (Agenda Item 1)

None.

2 APOLOGIES FOR ABSENCE (Agenda Item 2)

Mr Islam, Mr Hall and Mr Savage.

3 MINUTES OF PREVIOUS MEETING (Agenda Item 3)

Agreed.

4 CLINICAL COMMISSIONING GROUP (CCG) COMMISSIONING  
INTENTIONS - ABBAS MIRZA, ENGAGEMENT LEAD, MERTON CCG  
(Agenda Item 4)

Abbas Mirza gave an overview of the CCG's commissioning intentions. Meetings are being held from August through to November to engage with local residents to gather their views on the services they use and what they feel needs improving.

The CCG is facing numerous challenges including:

- The NHS is facing unprecedented financial challenges
- Long waiting times to access some services
- The quality of some of services are variable
- Not all of the NHS buildings are in the best condition and need repairs
- Having good access to psychological therapies remains a challenge

- There is expected growth in the population which will put pressure on services now and in the future
- There is an increasing demand for new treatments and therapies

Abbas outlined the CCG's priorities which are as follows:

**1. Start Well**

- Integrated support for children and families
- Emotional wellbeing and mental health

**2. Live Well**

- Wellbeing and long term conditions
- Mental health and wellbeing

**3. Age Well**

- Complex health and care needs

Abbas informed the meeting that community concerns are being gathered from the consultation. He asked the JCC to consider the following two questions:

1. What services have you used in Merton and liked?
2. What would you like to be improved?

**Comments/Questions**

Which groups have been consulted with? Abbas responded that he has engaged with BAME Voice, the engagement group of the Dementia Hub, Merton Centre for Independent Living, Community Forum, Merton Seniors Forum, Happy Day Lunch Club. The Internal Patient Engagement Group started the process.

Abbas added that he is trying to speak to as many people as possible.

Cllr Akyigyina suggested that Abbas contacts Vestry Hall and Positive Network to get further views from the BAME community to ensure that effective outreach work is being done.

Cllr Macauley added that BAME Voice consists of 14 to 15 BAME groups who have been part of the consultation.

Abbas confirmed that extensive outreach work is being done he is meeting Mitcham Churches including Black churches and will also be meeting the Polish Family Association.

Cllr Henry thanked Abbas for attending the Friends of Pollards Hill fun day.

Mr S Sheikh said that there were not enough people in attendance at the JCC because not all the organisations are present and therefore Abbas would not get a

representative view. He added that there is frustration about the lack of funds in the NHS impacting on the ability to deliver services.

Dr Aru said Diabetes is a problem and the approach needs to change - organisations need to be approached to discuss diabetes within community settings. He is not confident that the problem will be resolved.

Abbas replied that prevention and patient education is important. He added that Diabetes Truth is to be launched in October and not in a traditional setting. Cultural issues need to be considered too, Public Health and the CCG are working on diabetes as a priority.

Mr Din said that awareness raising is needed to provide more information around diabetes and high blood pressure and the lack of funds is a problem.

Abbas replied that nationally the NHS has recognised that diabetes is a problem and there has been a change in policy around sugar. There has been a cut in Public Health budgets and there is now focus on Prevention, Self-Education and Self-Management.

Abbas added that Language is also important and a co-design leaflet talks about “sugar” instead of diabetes.

Mr Sheikh stated that people’s faith affect how they think about health. He added that he can’t see a change in the approach compared to previous consultations.

Cllr Akyigyina asked what is being done about adult mental health?

Abbas replied that the mental health service is being re-procured. He recently attended an Involve meeting with the Voluntary Sector and the Commissioners where issues and problems with accessing IAPT services were discussed. A multi-agency approach is being considered and BAME organisations and individuals have been involved in co-designing the service.

Cllr Skeete stated that some contact numbers are not helpful and online support is not the right way.

Abbas replied that self-referral is being looked at and also GPs to encourage consistency. Hearts and Minds work with young people and efforts are being made to improve first point of contact.

Cllr Henry asked what is happening with Social Prescribing? Abbas gave an overview of the project and explained that support for managing and improving health will be more accessible to local residents e.g. support groups for women in East Merton.

He concluded that he is willing to visit organisations to further engage with communities.

**Resolved: It was resolved that feedback should be provided to Evereth to pass on to Abbas.**

5 KNIFE CRIME - NEIL THURLOW, HEAD OF SAFER MERTON, LBM  
(Agenda Item 5)

Neil Thurlow updated the meeting on the Knife Crime action plan that Merton has produced. The Mayor of London held a summit with local authority Chief Executives and Police Borough Commanders. Merton, along with other London boroughs now needs to complete a knife crime action plan working on five strands of business ranging from prevention to prosecution.

Neil outlined that the youth violence is driven by drugs and issues such as County Lines (where young people go out of London to sell drugs across the country). He added that not all the murders are gang related, there are many complex issues involved.

The Police are working to safeguard those most at risk and are working with gang workers. Merton is a safe borough and there have been no murders in Merton from the 16-24 age group, although there has been one adult murdered in Mitcham this year. Neil explained that for every victim there is impact on the immediate family and the network of friends, so some Merton residents may have been affected because someone close to them may have been murdered in another borough. He stressed the need for the boroughs to work together.

The joint action plan addresses: governance, targeting law breakers, protecting and education young people and supporting victims. Young people aged 16-24 are the most vulnerable age group and robberies mainly affect that group.

The action plan needs to be submitted to MOPAC by 14 September.

### **Comments**

Dr Ruth asked if there are any good models to follow? Neil replied that the gangs work and Child Sexual Exploitation approach is being used but the Mayor of London is keen for the Public Health model to be adopted. This is a long-term model and similar to Glasgow's approach. The model addresses root causes of the problem.

Cllr Bailey asked how the closure of Wimbledon Police station affects the plan? Neil replied that the Police are deploying resources more dynamically – the safeguarding and proactive team have improved and Merton will benefit from this. Also police officers are based in the Youth Offending Team and in Safer Merton.

Cllr Bush asked how many Merton residents are associated with the serious youth violence? Neil replied that Merton is the 4<sup>th</sup> safest London borough. Last year 20% of murders in London could be linked back to Merton through witnesses, arrests made or being friends or relatives of the deceased.

Cllr Akyigyina asked what is being done about missing young people? Neil replied that when the young people that go missing return to the borough there is a debriefing to assess their risks.

Cllr Bush asked if there is a plan to work with schools to target children under 16 years old. Neil confirmed that that this is being addressed in the MOPAC action plan in the Educating and Prevention theme. Schools Officers work with teachers and pupils.

Cllr Bush asked if there are any areas for improvement? Neil replied that the challenge is effective engagement to divert young people – the evidence on impact needs to be examined.

Cllr Henry asked what support is available for parents? Neil replied that the support package is designed around the child to enable parents to understand the risks associated with their child. Generally parents are receptive to work with the council – a whole family approach is taken.

Mr Sheikh raised concerns about the language used in the report particularly “5.3 Where knife crime is feared in an area the fear can become a self-fulfilling concern/area of focus as more people carry knives as they fear being victims of knife crime”. He also felt that the report was contradictory in terms of the knife crime statistics.

Neil clarified that fear of crime does indeed make young people want to protect themselves by carrying a knife. The figures include incidents and victims and may differ because of how they are recorded, e.g. victims may have been threatened but not with a knife.

6 MERTON HOME TUTORING SERVICE - DR RUTH DAWSON (Agenda Item 6)

Dr Ruth gave an overview of Merton Home Tutoring service which was set up 10 years ago. It provides 1:1 teaching and small classes. The 1:1 sessions last from 6 months to a year for one hour per week.

Following an assessment of their need students are taught the English that they require e.g. to support them attending hospital appointments or seeking employment.

There are 50 volunteer and 30 teachers who are supported by a Co-ordinator. The service is based at Wimbledon Guild. Referrals are mainly received from schools, G.P.s. There is now a new website: <http://mhts.org.uk> which Dr Ruth asked the JCC members to visit to get more information about the service.

### **Comments**

Can services be provided to a group of old people? Dr Ruth replied that the tutoring could be provided to a group of people but they would need to be individually assessed.

Cllr Henry asked if the service will go into people's homes, particularly where parents have young children and cannot easily get out. Dr Ruth confirmed that the service would go into people's homes to make the assessment.

Cllr Akyigina complimented Dr Ruth on the service.

### **7 ANY OTHER BUSINESS (Agenda Item 7)**

None.