



Full Council
18 September 2023

**Report from the Corporate Director
of Communities and Regeneration**

**Community and Wellbeing Scrutiny Committee Chair's
Update Report**

Wards Affected:	All
Key or Non-Key Decision:	Council
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	One Appendix 1: Updated Community and Wellbeing Scrutiny Committee Work Programme 2023/24
Background Papers:	None
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1.0 Executive Summary

- 1.1. To update Full Council on the meetings and activities of the Community and Wellbeing Scrutiny Committee and North West London Joint Health Overview Scrutiny Committee since the last meeting of Full Council on 10 July 2023.

2.0 Recommendation(s)

- 2.1 That Full Council:

Note the report and the Community and Wellbeing Scrutiny Committee's updated 2023/24 work programme.

3.0 Detail

- 3.1 Brent Council has two scrutiny committees: the Community and Wellbeing Scrutiny Committee and the Resources and Public Realm Scrutiny Committee. The council also participates as a full voting member in the North West London Joint Health Overview Scrutiny (NWL JHOSC), which was chaired by Councillor Ketan Sheth during the 2022/23 municipal year. Councillor Sheth has since been re-elected as chair of the NWL JHOSC at its first meeting of the 2023/24 municipal year which was held on 18 July 2023.
- 3.2 A scrutiny committee can review anything which affects the borough or its inhabitants, subject to its remit. The remit of the Community and Wellbeing Scrutiny Committee is set out in the Council Constitution under the Terms of Reference for Scrutiny Committees which includes:
- Adult social care; Safeguarding; Children’s services; Cultural services; Education; Health; Housing; Public Health and Wellbeing.*
- 3.3 As part of its remit set out in the constitution, and its role to review the provision and operation of health services within the borough, the Community and Wellbeing Scrutiny Committee can scrutinise, and make recommendations to NHS organisations or relevant health service providers.
- 3.4 The work of the committee contributes to the delivery of all of the strategic priorities within the Borough Plan as it seeks to support, advise and enhance the Council’s activity. The recent activity outlined in this report contributes most specifically to the “A Healthier Brent” strategic priority within the plan.
- 3.5 The Community and Wellbeing Scrutiny Committee’s 2023/24 work programme has been amended since the last Full Council meeting was held and is detailed in Appendix 1. It outlines the policy areas and council decisions the committee plans to review during the 2023/24 municipal year. Statutory guidance on overview and scrutiny recommends that for scrutiny to be effective, scrutiny committees focus on conducting fewer in-depth reviews of highly significant topics¹.
- 3.6 It is with great sadness to report the passing of our Independent Chair for Brent’s Safeguarding Adults Board, Fran Pearson. Fran was an exceptional Chair and was recently appointed to be incoming Independent Chair of our Children’s Safeguarding Partnership. Fran was a valued colleague who worked tirelessly to raise awareness of safeguarding; both adults and children, tackling issues head on and tackling inequalities. Fran was committed to improving the lives of our residents and also the lives of others both locally and nationally, successfully driving forward safeguarding adults’ activity with great expertise, dedication, empathy and sensitivity. She worked with officers, partners, members, residents and their families tirelessly and will be deeply missed. Fran leaves a legacy which we will continue to build on, taking collective learning where the services we provide need to improve and how we can ensure people are kept safe.

¹ *Statutory Guidance on Overview and Scrutiny in Local and Combined Authorities* (Ministry for Housing, Communities and Local Government), p21

The Community and Wellbeing Scrutiny Committee

- 3.7 The Community and Wellbeing Scrutiny Committee met for its first meeting of the municipal year on 5 July 2023. Here the committee reviewed an item on tackling health inequalities in Brent. The paper was introduced by Councillor Neil Nerva, Cabinet Member for Public Health and Adult Social Care who highlighted that there are significant inequalities in how people access care and their wider health determinants. The committee heard about a range of initiatives that had been put in place since the formation of Brent Health Matters (BHM) to tackle health inequalities in Brent. These included factory interventions, working with communities to best target outreach initiatives and employing members of the community to become Community Connectors and Brent Health Educators. The HR Business Manager's for GreenCore and Bakavor also spoke to the Committee about the outreach events that had taken place in their factories and their positive outcomes. Dr Melanie Smith (Director of Public Health) provided further details of this approach to the Committee.
- 3.8 The Committee were pleased that the report clearly outlined existing health inequalities and the progress Brent Health Matters (BHM) had taken to address these. However, they requested further benchmarking and data to understand how Brent compares with other areas. The Committee asked whether there had been any work done to identify 'pockets' of wards as having significant health inequalities, particularly in the North of the borough. Dr John Licorish (Public Health Consultant, Brent Council) confirmed that there were pockets of deprivation across the whole borough in some specific communities, such as the Brazilian community. The following recommendations have been suggested following the discussion on this item:
- That cross-council work on health inequalities is strengthened to develop a whole Council approach to further addressing health inequalities.
 - That appropriate Council officers are given training on intersectionality.
 - That neurological conditions (e.g. Dementia and Parkinsons) within the community are considered for inclusions as part of Brent Health Matter's work.
 - That healthcare resources are allocated to areas of Brent with greater need and deprivation, so that more targeted work can be done in those areas.
- 3.9 The second item reviewed Local Healthcare Resources Overview focused on funding and recruitment. Councillor Nerva introduced the report which detailed how local health service resources were allocated. The paper highlighted the challenges within the system regarding how Brent ensured community services were reaching people as early as possible and how that could be maximised. Tom Shakespeare (Managing Director, Brent ICP) informed the Committee that the starting position in Brent was challenging both in terms of workforce and funding relative to other NWL boroughs. He explained that Brent ICP was using every opportunity to maximise workforce, such as establishing a training hub. In relation to funding, the Committee heard that the starting position in Brent

was behind other NWL boroughs. Robyn Doran (Director of Transformation, Central and North West London (CNWL) NHS Foundation and Brent ICP Director) highlighted that a challenge for Brent was the NHS inner and outer London salary weighting, where inner London employees receive more than outer London employees. The Committee asked for further details regarding the £2,500 one-off bonus payment for health visitors detailed in the report and questioned what impact Brent ICP expected from that. Robyn Doran explained one-off bonus payments were a short term incentive and not enough to maintain people long term. The Committee asked how other boroughs falling within the same pay bracket as Brent were performing with recruitment and retention in comparison. The Committee were advised that both Central London Community Healthcare NHS Trust and CNWL had shared all information with Harrow, Brent and Hillingdon because the trusts cross borders, therefore measures being applied in Brent were also taking place in those outer boroughs. The following recommendations have been suggested following the discussion on this item:

- That North West London ICB colleagues are invited for further discussions relating funding settlements for Brent in relation to North West London.
- That work to address the inner and outer London pay gap is further escalated, and that bolder solutions are utilised.
- That the Brent ICP advocates for further levelling up funding for children's mental health services in the borough.
- That the North West London ICB commits to a timescale to address the historical underfunding compared with other North West London boroughs and to equalise levels of expenditure.
- That a collaborative approach is taken with staff, the community and managers to co-produce solutions for retention.
- That the proposed induction for all staff working in Brent should include attending a Brent Health Matters community event.
- That Brent continues to advocate for healthcare funding being allocated by need, rather than population.

3.10 The Community and Wellbeing Scrutiny Committee is due to meet on 21 September 2023 for its second meeting of the municipal year. Here the committee will review three items:

- The outcome of Brent's 2023 Ofsted ILACS and ongoing improvement activity within the organisation. The report will focus on detailing what score Brent achieved and what measures it has put in place to improve its children's services in response to any recommendations put forward.
- The second paper will report on the SEND strategy and its readiness for a joint Ofsted/CQC inspection.
- The final item will focus on Adult Social Care CQC Assurance. The paper will provide detail on the ASC local account for the committee to review, provide details of what aspects of ASC will be inspected by the CQC as part of its new single assessment framework and provide detail on the ongoing work the council has undertaken to prepare for a potential CQC inspection of its adult social services.

The North West London Joint Health Overview and Scrutiny Committee (NWL JHOSC)

- 3.11 Since the last report to Full Council the NWL JHOSC met at the London Borough of Hillingdon on 18 July 2023 for its first meeting of the municipal year. Councillor Ketan Sheth has been re-elected to continue as chair of the committee for the 2023/24 municipal year. At this meeting the Committee reviewed the North West London Integrated Care System's strategy for the provision of acute beds, the plans to standardise adult and children's ophthalmology services across North West London and the development of musculoskeletal services across North West London.
- 3.12 The Chief Executive at North West London Integrated Care System (NWL ICS), presented a report on the NWL ICS strategy for the provision of acute beds and the impact that the Government's decision to postpone delivery of three 'new' hospitals in NWL would have on this. The objective had been to increase care for patients in their own homes where appropriate rather than increase the number of hospital beds to address inappropriate demand. The overall strategy was not to continue with the current acute bed situation in NWL but to respond to varying demand pressures as they arose throughout the year. There had been some issues raised as most hospitals were currently often running at capacity. Concern was expressed in relation to acute beds regularly being at 100% capacity rather than at the 92% target and it was queried how the ICS planned to reduce the total beds used. The following recommendations were made following this discussion:
- NWL ICS provide regular updates to Harrow in relation to the achievement of the 92% bed capacity target at Northwick Park Hospital
 - The Committee be provided with an update on the progress of the implementation of the NWL ICS strategy for the provision of acute beds.
 - Further information on vertical and horizontal integration be provided at a future meeting.
- 3.13 The second item focused on the standardisation of adult and paediatric ophthalmology services across NWL. The committee were advised that the current practice for the provision of adult and paediatric ophthalmology services across NWL needed to be standardised to make it easier for residents and communities to navigate. It was noted that paediatric ophthalmology would move immediately into acute hospitals which would provide patients with choice as to which hospital they preferred. Members queried the NWL performance against national benchmarks and requested more information in relation to health inequalities. It was confirmed that NWL had been benchmarked nationally and that the committee would be provided with baseline data on the current performance. The following recommendations were made following this discussion:
- That results are shared of the targeted work that had been undertaken in Hammersmith and Fulham
 - NWL ICS to provide the Committee with baseline data on the current performance in NWL (broken down to NWL and London level if possible)

3.14 The final item focused on the development of musculoskeletal services across NWL. The Senior Responsible Owner (SRO) of Musculoskeletal Services at NWL ICS advised that he had been working across the eight NWL boroughs to look at standardising musculoskeletal (MSK) services. Working over such a large area was deemed by some to be ambitious but the project was only in year one of a five-year programme. During this initial year, work had been undertaken to understand the variations in delivery and to look at the inequalities agenda. Members queried how better joined working could be encouraged between Hammersmith & Fulham and Brentford whilst also improving access. Members also queried how the service model would impact on service provision as, even though the Royal Borough of Kensington and Chelsea (RBKC) had been leading the way, residents were still having to wait 6-8 months for an appointment. The following recommendations were made following this discussion:

- The Committee be presented with baseline access and diagnostics information and detail of how it was proposed the situation be moved forward.
- To establish whether anticipatory pathways were being included for those with functional disabilities.

4.0 Stakeholder and ward member consultation and engagement

4.1 Non-executive members were involved in developing the work programme as part of their membership of the committee.

4.2 Councillors will discuss this report at the Council meeting.

5.0 Financial Considerations

5.1 There are no financial implications arising from this report.

6.0 Legal Considerations

6.1 There are no legal implications arising from this report.

7.0 Equality, Diversity & Inclusion (EDI) Considerations

7.1 There are no equality implications arising from this report.

8.0 Climate Change and Environmental Considerations

8.1 There are no climate change or environmental implications arising from this report.

9.0 Human Resources/Property Considerations (if appropriate)

9.1 There are no human resources implications arising from this report.

10.0 Communication Considerations

10.1 There are no communication implications arising from this report.

Report sign off:

Zahur Khan

Corporate Director, Communities and
Regeneration