

Social Care and Health Overview and Scrutiny Committee

Thursday 14 September 2023 at 6.00 p.m.

Conference room 2, Walsall Council.

Committee Members Present

Councillor K. Hussain (Chair)
Councillor V. Waters (Vice-Chair)
Councillor R. K. Mehmi
Councillor A. Parkes
Councillor L. Rattigan
Councillor P. Smith
Councillor S. Ditta (substituting for Councillor S.B. Hussain)

Portfolio Holder – Adult Social Care

Councillor K. Pedley

Portfolio Holder – Wellbeing, Leisure and Public Spaces

Councillor G. Flint

Officers

Walsall Council

K. Allward	Executive Director for Adult Social Care
Nadia Inglis	Interim Director of Public Health
Paul Gordon	Director of Resilient Communities
J. Thompson	Democratic Services Officer

Black Country Integrated Care Board

Pip Mayo	Interim Director for Walsall
Ruth Smith	Primary Care Commissioning Manager

Walsall Health Care NHS Trust

Stephanie Cartwright	Group Director of Place for Walsall and Wolverhampton
Simon Harlin	Divisional Director – Community Services

Mindkind (Manor Farm Community Association)

Sue Evan	Volunteer
Mandy Lamedica	Volunteer
Nike Morris	Social Worker

Old Hall People Partnership

Diana Southall	Community Library (Bentley)
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Walsall Housing Group

Connie Jennings	Social Inclusion Manager
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08 Apologies

Apologies were received from Councillors R. Martin, P. Gill, W. Rasab and S.B. Hussain.

09 Substitutions

Councillor S. Ditta substituted for Councillor S.B. Hussain.

10 Declarations of Interest and Party Whip

There were no declarations of interest or party whip for the duration of the meeting.

11 Local Government (Access to Information) Act 1985 (as amended)

There were no agenda items requiring the exclusion of the public.

12 Minutes

A copy of the minutes of the meeting held on the 13 July 2023 was submitted to the Committee for consideration.

Resolved:

That the minutes of the meeting held on the 13 July 2023, a copy previously having been circulated, be approved and signed by the Chair as a true and accurate record.

13 Access to GP Services – Update on telephone system

At the request of the Chair, the Interim Director for Walsall, Pip Mayor introduced the report [see annexed]. The Interim Director for Walsall highlighted the salient points of the report including that there had been improvements at GP practices and that more face-to-face appointments were being offered to patients.

A discussion between Members and officers took place, some of the key point included:

- When it was found that GP Practices were not adhering to their contracts the ICB (Integrated Care Board) would first seek to work with the GP Practice on an improvement plan to help them meet their contract;
- GP practices had the ability to note if patients could use the NHS app, however, patient's abilities could change quickly;
- Patients should be encouraged to use the NHS app where possible;

- A team based at the ICB was responsible for contract management with GP Practices and would conduct site visits to practices;
- The ICB was carrying out a survey to help target the support offered through the additional funding from the Modern General Practice Model;
- Sixteen GP Practices within the Borough operated older telephone systems that were not helpful for patients, however, there was a plan in place to move all GP Practices to the modern cloud-based telephone system;
- The ICB did not collect data on the longest waiting times for calls to be answered at GP Practices however they did have a record of which practices were still using an analogue telephone systems;
- The ICB was encouraging the increased use of care navigators at GP Practices which would help patients find the right healthcare more quickly;
- The ICB did not yet have a complete picture of how GP Practices were performing but were building upon information which would help to deal with issues around waiting times;
- Work was being carried out to identify those registered patients who are vulnerable and cannot use computers or apps on their phones;
- The NHS app was there to complement telephone systems and not replace them;
- If contract standards were continually not met by a GP Practices, then a contractual notice could be used and this gave the ICB additional options to insure standards were met;
- Connie Jennings, from WHG, informed the Committee that they were helping their residents to build up their digital skills to help them more easily access healthcare;
- It was important that residents understood their right of access to healthcare and information will be provided on this and the change in contracts for GP Practices as part of the new Modern General Practice Model;
- The ICB encouraged all GP Practices to have a clear statement on their website on how to raise a complaint to the practice as this was the first place a patient should raise a complaint;
- The ICB had a central team called the 'Time to Talk' service, which dealt with complaints and the details on how contact and raise a complaint would be shared with Members;
- Walsall Healthwatch was another forum in which concerns of patients could be raised;
- It was acknowledged that the NHS app could be more proactive in helping patients to access relevant healthcare.

The Chair Members and Officers for their contributions.

Resolved

That the Committee note the update report on GP telephone systems.

14 Social prescribing in Walsall – the opportunities

At the invitation of the Chair the Interim Director of Public Health took the Committee through a presentation based on the report [see annexed].

The Director of Resilient Communities added that the Walsall Together Programme was started by Public Health and then handed over to the Resilient Communities team who expanded it. The Walsall Together Programme took on over six thousand contacts over the Covid-19 Pandemic and the Programme is focused locally and works across many Hubs within the Borough.

The Committee then heard from staff from MindKind and the Old Hall People Partnership. The key points included:

- They had been focused on social isolation but this focus had since changed after the Covid-19 Pandemic;
- They were now receiving referrals for health, mental health and poor living conditions;
- They helped to signpost residents to services they needed for support;
- They received many referrals from different organisations such as care homes and those in assisted living;
- They helped residents to navigate the complex systems of accessing additional support and healthcare;
- The age range of those who they helped had dropped recently;
- They ran support groups for fathers and supported young men with mental health. This included helping with budgeting, cooking and helping those who had a fear of government agencies;
- Social prescribing did help relieve pressure on the NHS;
- A focus was needed on making sure that there was enough capacity within the system and other agencies as social prescribing could not replace services provided by the NHS or the Council.

The Chair then invited Connie Jennings from WHG to inform the Committee what social prescribing work WHG were undertaking. Connie Jennings informed the Committee that WHG operated an online service which recruited staff with lived experiences. Their service was evidence based and measured the wellbeing of those who received support however, even at the end of the process many of those who received help still had wellbeing levels well below the national average. Additionally, it was positive that different social prescribing models were used across the Borough but these could not fill the

gap in statutory services. The services offered did add value and helping people into work was also important.

The Chair then invited Stephanie Cartwright and Simon Harlin from the Walsall Healthcare NHS Trust to contribute on the item. They informed the Committee that social prescribing could save lives and complimented the work of clinical teams within the health service. In addition, that social prescribing made a difference to people lives and should continue to be supported. That it empowers individuals and that is something the NHS could improve upon.

A discussion then took place between Members and officers/partners on the topic of social prescribing, the key points included:

- A member expressed concern that some public spaces within the Borough were not appealing and needed to be improved especially if residents were being encouraged to use green spaces as part of social prescribing;
- A Member also expressed concern at the amount of junk food available within the Borough and that work was needed to improve this;
- Social prescribing had only been a term used in the NHS for around six to seven years and data showed that 20-25% of patients attending GP appointments needed help other than medication or further clinical intervention;
- The Portfolio Holder for Wellbeing, Leisure and Public Spaces explained that the report had been presented to the Committee to promote the work around social prescribing being undertaken within the Borough. He also thanked all those involved in social prescribing for the work they were doing;
- There was not a lack of referrals for social prescribing and some services were oversubscribed;
- Many individuals were not able to carry out selfcare due to mental illness;
- Social prescribing also helped those who cared for others and also referred those who were helping others;
- The Walsall Together programme was based around hubs in the Borough and each of the hubs had multiple spokes.

The Chair thanks all those who attended and contributed on the item.

Resolved:

That the Committee congratulate all those involved in social prescribing work within the Borough and in noting the report, looks forward to the awareness of the projects being extended as far as possible.

15 Recommendation Tracker

At the invitation of the Chair the Democratic Services Officer informed the Committee of the items added to the Recommendation Tracker from its last meeting.

Resolution

That the Committee note the Recommendation Tracker.

16 Areas of Focus

At the invitation of Chair the Democratic Services informed the Committee that the Areas of Focus agreed at the last meeting of the Committee had been collated into the table contained within the papers and had been thematically grouped.

A discussion then took place between Members and the Democratic Services Officer in relation to how items from the Council Forward Plan could be added to the Committee work programme and how the Committee would carry out its budget scrutiny.

Resolution

That the Committee note the Areas of Focus.

19 Date of next meeting

The next meeting of the Committee would take place on the 26 October 2023.

The meeting terminated at 8:06p.m.

Signed:

Date: