



HILLINGDON
LONDON



Health and Social Care Select Committee

Councillors on the Committee

Councillor Nick Denys (Chair)
Councillor Reeta Chamdal (Vice-Chair)
Councillor Tony Burles
Councillor Philip Corthorne
Councillor Kelly Martin
Councillor June Nelson
Councillor Sital Punja (Opposition Lead)

Date: WEDNESDAY, 9 OCTOBER
2024

Time: 6.30 PM

Venue: COMMITTEE ROOM 5 -
CIVIC CENTRE

**Meeting
Details:** The public and press are welcome
to attend and observe the meeting.

For safety and accessibility, security measures will be conducted, including searches of individuals and their belongings. Attendees must also provide satisfactory proof of identity upon arrival. Refusal to comply with these requirements will result in non-admittance.

This meeting may be broadcast on the Council's YouTube channel. You can also view this agenda online at www.hillingdon.gov.uk

Published: Tuesday, 8 October 2024

Contact: Nikki O'Halloran

Email: nohalloran@hillington.gov.uk

Useful information for residents and visitors

Travel and parking

Bus routes 427, U1, U3, U4 and U7 all stop at the Civic Centre. Uxbridge underground station, with the Piccadilly and Metropolitan lines, is a short walk away. Limited parking is available at the Civic Centre. For details on availability and how to book a parking space, please contact Democratic Services. Please enter from the Council's main reception where you will be directed to the Committee Room.

Accessibility

An Induction Loop System is available for use in the various meeting rooms. Please contact us for further information.

Attending, reporting and filming of meetings

For the public part of this meeting, residents and the media are welcomed to attend, and if they wish, report on it, broadcast, record or film proceedings as long as it does not disrupt proceedings. It is recommended to give advance notice to ensure any particular requirements can be met. The Council will provide a seating area for residents/public, an area for the media and high speed WiFi access to all attending. The officer shown on the front of this agenda should be contacted for further information and will be available at the meeting to assist if required. Kindly ensure all mobile or similar devices on silent mode.

Please note that the Council may also record or film this meeting and publish this online.

Emergency procedures

If there is a FIRE, you will hear a continuous alarm. Please follow the signs to the nearest FIRE EXIT and assemble on the Civic Centre forecourt. Lifts must not be used unless instructed by a Fire Marshal or Security Officer.

In the event of a SECURITY INCIDENT, follow instructions issued via the tannoy, a Fire Marshal or a Security Officer. Those unable to evacuate using the stairs, should make their way to the signed refuge locations.



Terms of Reference

Health & Social Care Select Committee

To undertake the overview and scrutiny role in relation to the following Cabinet Member portfolio(s) and service areas:

Cabinet Member Portfolios	<ul style="list-style-type: none">• Cabinet Member for Health & Social Care
Relevant service areas	<ol style="list-style-type: none">1. Adult Social Work2. Adult Safeguarding3. Provider & Commissioned Care4. Public Health5. Health integration / Voluntary Sector

Statutory Healthy Scrutiny

This Committee will also undertake the powers of health scrutiny conferred by the Local Authority

(Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013. It will:

- Work closely with the Health & Wellbeing Board & Local Healthwatch in respect of reviewing and scrutinising local health priorities and inequalities.
- Respond to any relevant NHS consultations.

Duty of partners to attend and provide information

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, imposes duties on 'responsible persons' to provide a local authority with such information about the planning, provision and operation of health services in the area of the authority as it may reasonably require to discharge its health scrutiny functions through the Health & Social Care Select Committee. All relevant NHS bodies and health service providers (including GP practices and other primary care providers and any private, independent or third sector providers delivering services under arrangements made by clinical commissioning groups, NHS England or the local authority) have a duty to provide such information. Additionally, Members and employees of a relevant NHS body or relevant health service provider have a duty to attend before a local authority when required by it (provided reasonable notice has been given) to answer questions the local authority believes are necessary to carry out its health scrutiny functions. Further guidance is available from the Department of Health on information requests and attendance of individuals at meetings considering health scrutiny.

Cross-cutting topics

This Committee will also act as lead select committee on the monitoring and review of the following cross-cutting topics:

- Domestic Abuse services and support

Agenda

5 Health Updates

Appendix C – Central and North West London NHS Foundation Trust 1 – 8

Appendix D – The London Ambulance Service NHS Trust 9 – 11

Central and North West London Update



October 2024

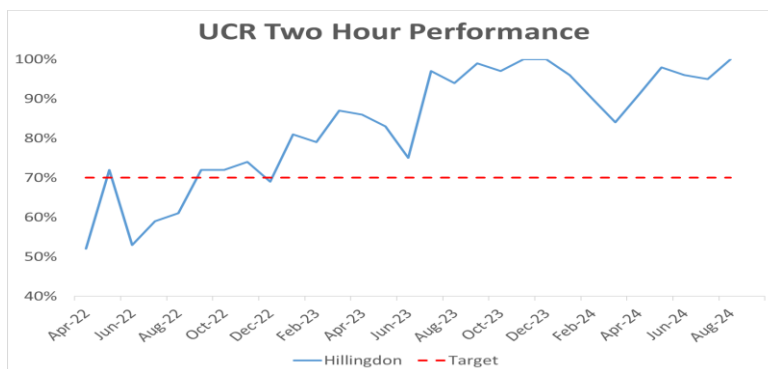
Central and North West London
NHS Foundation Trust

Work undertaken over the last six months

Physical Health

A large area of focus over the last six months has been the development of neighbourhood teams in Hillingdon and how CNWL teams form a core part of these multidisciplinary teams alongside GP's, Social Care and voluntary sector organisations. We have already focused on aligning our nursing teams, particularly District Nursing, around the neighbourhood teams and are currently working through therapy alignment including MSK Physiotherapy. We believe that through this greater integrated working we will strengthen our links with primary care in particular, which will ensure better outcomes for patients through more integrated and aligned pathways.

We also work really closely with Hillingdon Hospital on a range of areas including discharge pathways. We have been ensuring our teams, including Discharge To Assess and Home First, have clear pathways which adapt to need as required. Our Urgent Community Response team have consistently met their two-hour national waiting time target and seen consistent increase in performance with all sixty patients referred in August being seen within two hours of referral.



In our children's services we have been working really closely with the Local Authority to coordinate with the Family Hub and Stronger Families transformation. We have now signed a new collaboration agreement with the Local Authorities which will ensure we work in a much more integrated manner to maximise resources across the two organisations and align our priorities for children in the borough. As such we have launched a new transformation programme to develop new ways of working and better service delivery.

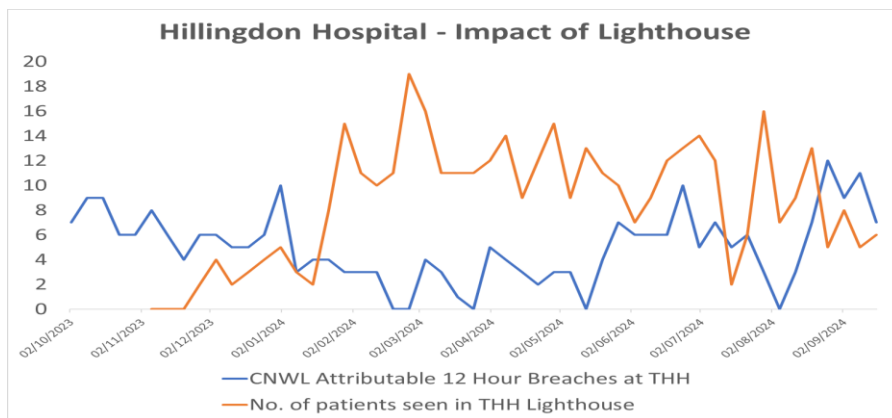
Following a procurement exercise taken by NHS England to review childhood immunisation services across London, the Hillingdon childhood immunisation service has now transferred from CNWL to Vaccination UK from the 1 September. We have been working with Vaccination UK to ensure the service transferred safely with minimal impact to staff, children, families and schools. Vaccination UK have been communicating with all schools to ensure they are aware of the change and to inform them of their service offer going forward.

Adult Mental Health

We continue to have an extensive crisis alternative pathway in adult mental health to ensure we can support system flow and pressures experienced on the crisis pathway, particularly as we move into winter. The below surmises each of the crisis alternative schemes that we have in place.

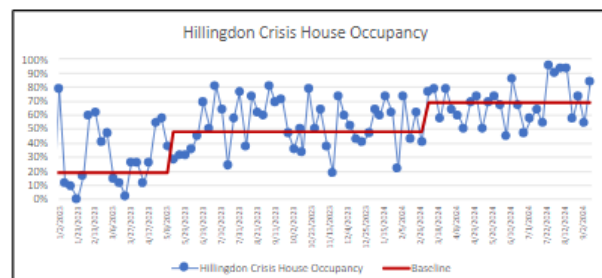
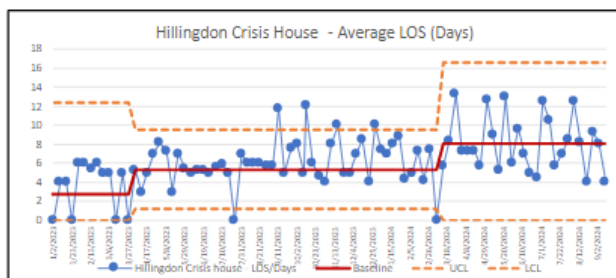
Hillingdon Lighthouse

Our Lighthouse in Hillingdon is located near A&E in Hillingdon Hospital and support patients attending A&E with a mental health crisis who do not need to be in A&E in a purpose-built environment designed to meet their needs. The offer is co-delivered with the voluntary sector and moved to a 24/7 model in January this year. This has allowed the Lighthouse to accept a higher complexity of patients and the number of patients being seen in the Lighthouse has increased significantly as a result. There appears to be a direct correlation on long stayers in A&E with a reduction in patients waiting more than 12 hours with a mental health need in the same timeframe.



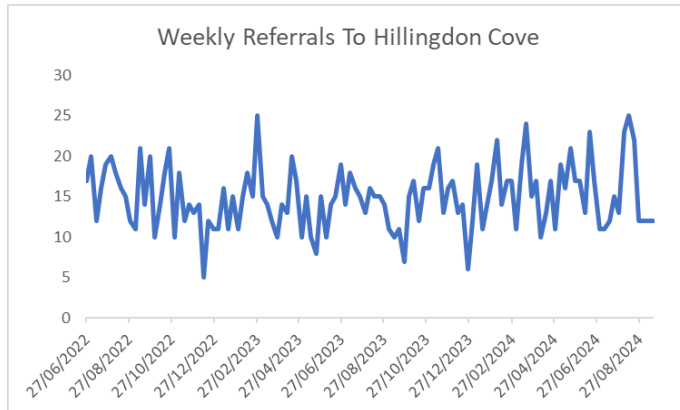
Crisis House

Our Crisis House in Hillingdon is called The Retreat and is delivered by Comfort Care. There has been an upward trend recently in occupancy levels in the Crisis House which is showing the key role it plays in supporting our pressures in the crisis pathway elsewhere in the system. We are working with NWL ICB to undertake a full evaluation of our crisis alternatives which will be concluded in June and inform future funding decisions on whether to continue with The Retreat.



The Cove

Opened in March 2023, the Cove Café is delivered by Hestia and provides a safe space for individuals to reduce their initial distress following referrals by clinical teams. We regularly seek service user feedback and 94% of service users are reporting that The Cove helped support them feeling better about managing their anxiety.

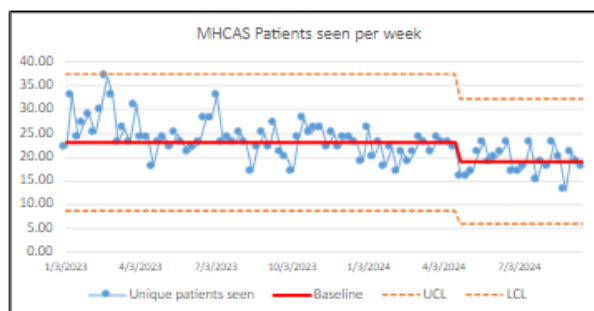


High Intensity User (HIU) Service

We have now relaunched our HIU service with the British Red to support mental health service users who are frequent users of mental health services included at A&E, community mental health teams and GP practices. It looks to build a resource structure around that individual that tackles unmet social needs with a view to better support them in the community.

Mental Health Crisis Assessment Centre (MHCAS)

Based at St Charles Hospital, CNWL’s MHCAS is a calm and therapeutic mental health setting to treat the majority of emergency mental health presentations. They see and assess anyone over 18 years old that would otherwise go to an emergency department for mental health reasons and does not have an urgent medical need (for example, an overdose of medication). Whilst not a Hillingdon specific resource, they take referrals from Hillingdon A&E and support our local system.



Addictions, Recovery, Community, Hillingdon (ARCH)

The main area of focus for us has been the mobilisation of the new ARCH service. To date we have:

- Foster a positive work environment with a focus on staff well-being, flexible recruitment and effective retention
- Recruit into new roles (e.g. Principal Psychologist, Group Facilitator, Drug & Alcohol Trainer etc)
- Ensure accessibility through various engagement methods (e.g. co-location and satellites)
- 12 week structured Recovery Day Programme (RDP)
- Offering 7 day a week service including evening and weekend social drop-ins.
- Prioritise volunteer opportunities with lived experience in the service and community
- Deliver health interventions, including prescribing, BBV services, and community detoxification
- Educate diverse groups and professionals to reduce health inequalities

The below is a summary of the overall work we are doing in the service line.



We have also held a Recovery Day Event on 20th September to celebrate ‘Recovery Month’. The celebration was an opportunity to showcase the fantastic work that ARCH does in Hillingdon and for visitors to get a taste of how each team specialises. Attendees had the chance to meet with staff, ex-service users and volunteers to hear personal stories of transformation, reinforcing the message that recovery is possible and that support is available. With a range of activities, including informational booths, interactive games and guest speakers, the Recovery Party fostered a sense of community and connection.








Children’s Mental Health

A key area for focus for CAMHS transformation is ensuring children are seen at the right time, in the right place by the right person, using a need’s led approach which is Thrive informed. As part of this we have focused on developing our early intervention offer which supports people in a range of settings whether that is digitally, in Children Centres, schools or GP practices.

CAMHS Early Intervention Offer

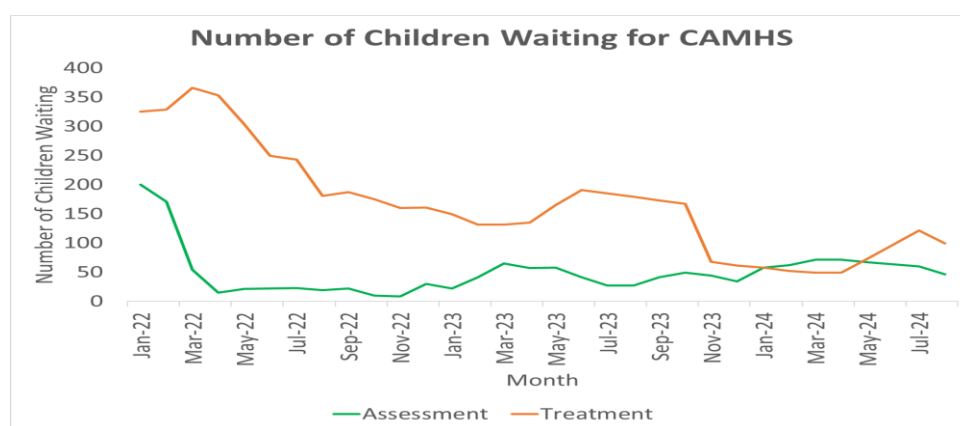


 <ul style="list-style-type: none"> • Free, safe and anonymous • Available through a smartphone, tablet or computer with internet connection • No referral needed • Confidential 1-2-1 messaging counselling services with a team of qualified counsellors • Open 365 days a year with counselling from 12pm weekdays until 10pm and from 6pm until 10pm on weekends • They work alongside other mental health and local services 	 <ul style="list-style-type: none"> • Under 5 service is well established and seen as leading model for early engagement and intervention for children • We have expanded this offer into the outer boroughs • The team consists of Therapists who usually meet with families in children’s centres • Joint sessions with parents and their child to support positive relationships, help parents understand how the world appears from their child’s perspective, or address other concerns parents may have. 	 <ul style="list-style-type: none"> • Early intervention service who work in partnership with local schools. Work with primary and secondary schools, to support young people with mild to moderate mental health difficulties. • Teams are based in Brent, Harrow & Hillingdon, including SEN schools.
<p>Child Wellbeing Practitioners</p> <p>Child Wellbeing Practitioners support the development and delivery of a wide range of interventions including:</p> <ul style="list-style-type: none"> • Deliver brief goal-based Interventions • Manage a small caseload of service users • Support neurodevelopmental assessments • Support school observations • Supporting assessment clinics • Supporting treatment waiting list initiatives 	<p>Children and Young People Primary Care Mental Health Service</p> <ul style="list-style-type: none"> • Formally called ARRS, this is now live in four boroughs in North West London • Role bridges the gap between GP practices and CAMHS, ensuring young people are navigated to timely, early support • Support GPs to extend their capacity within the community and widens the range of offers in primary care 	<p>SPA Advice Line</p> <ul style="list-style-type: none"> • Single Point of Access (SPA) is a mental health crisis line offering emotional support and advice, 24 hours a day, 7 days a week. • Open to children all ages, people who haven’t used mental health services, and carers and family members concerned about someone. <p>Phone: 0800 0234 650 Email: cnw-lr.spa@nhs.net</p> 
 <p>The Best For You website has information about wellbeing and specific content on mental health topics like anxiety and self-harm. It signposts to a range of support options including a 24/7 text support line, services or safe, innovative digital apps.</p>		<p>Online self help, support and resources: www.cnwl.nhs.uk/camhs @cnwlcamhs</p>

You can speak to a member of staff about any of these services. Contact SPA 0800 0234 650

A key component of our early intervention support is our Mental Health Support Team (MHST) offer into schools. Hillingdon has been allocated Wave 11 funding starting from September 2024 for two new MHST's to enhance our existing offer. We have recruited into the trainee posts who work with the schools, and they are now in post and commenced their University training courses. We are also currently recruiting to the supervisor posts to support these trainees. This new wave of funding will bring Hillingdon in line with other boroughs in London with 60% coverage being offered to schools which was the NHS Long Term Plan commitment. We are awaiting confirmation from NHS England on whether the program will be further rolled out nationally to all schools.

We have also expanded our core CAMHS offer with increases in the number of children accessing CAMHS, significantly reducing our waiting times and working with our system partners to embed Thrive across the system. The number of children waiting have reduced significantly over the last couple of years and there has been a significant drop in the number of children waiting for treatment particularly over the last year as shown in the below graph.



Young Adult New Models of Care

Driven by our Young Adult Forum consisting of service users, we have been radically improving our offer to young adults aged 16 to 25 years of age. Our new Young Adults Partnership Panel in Hillingdon aims to better manage young adults’ transitions from children to adult’s mental health services. Over the last six months, key areas of progress have been:

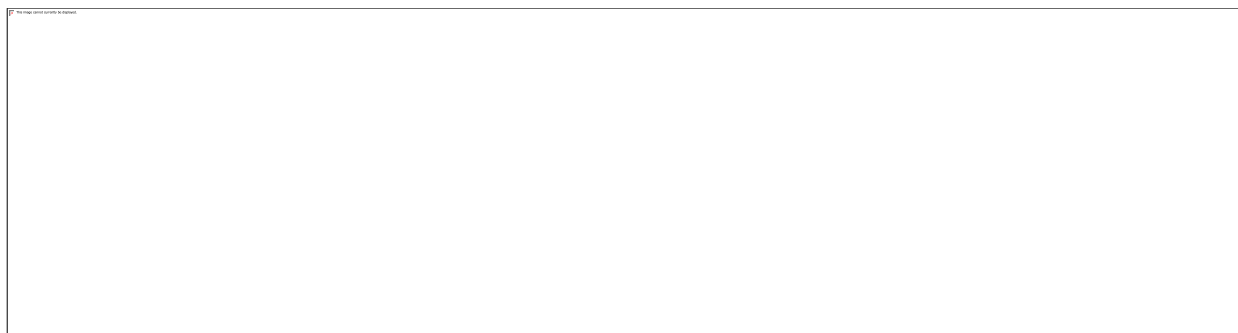
- Soft launch of the CNWL Discovery College (YA focused Recovery College) – currently running courses for young adults on “Preparing for University”
- Launch of the young adults Peer Support Service – Hillingdon has a dedicated peer support worker for young adults and also supporting other young adults projects (e.g. Discovery College)
- Awarded funding to higher education organisations and voluntary sector organisations to support early intervention and prevention of eating disorders
- Roll out of Me First training – communications skills training aimed at supporting professionals to effectively communicate and engage with young adults.

Targets and Performance

Within the NHS Long Term Plan there are a number of targets which NHS organisations are expected to deliver against. For children’s services this predominately focuses on the number of children accessing CAMHS and CAMHS waiting times, both of which we have been achieving in Hillingdon as per the table below through the additional capacity we have put into our children mental health teams.

Metric	Category	Theme	Target	Latest Nat Avg	Previous Period	Current Period	Divisions			SPC
							J	G	D	
MHS070CYPB CYP Access - 1 contact (12mth Rolling All <18yrs)	NHS National Standard	Children & Young People			2,518	2,508	2,508			
REF_16 CAMHS Referral Received to Treatment within 18 weeks	Internal Priorities	Children & Young People	85%		99.6% 288 289	100% 128 126	100%			

Our Talking Therapies team (IAPT) have to increase the number of people accessing their service year on year which was delivered last year, including waiting times for six- and eighteen-week targets.



Our children’s services continue to deliver well against their targets across our 0-19 and Children’s Integrated Therapies (CIT’s) teams, and compare well when measured against other London boroughs. The table below outlines performance against 0-19 checks that the Health Visiting team are required to deliver.

Metric	Category	Theme	Target	Latest Nat Avg	Previous Period	Current Period	Divisions			SPC
							J	G	D	
COM_03 New mothers receiving a new birth visit (within 14 days)	Internal Priorities	Primary care and Community Services	85%		89.9% 654 739	88.4% 232 300	88.4%			

The below is a summary of our performance in ARCH:

- The service has achieved a 100% success rate in meeting the target of 95% for new service users waiting times within three weeks.
- The service has achieved a retention or completion rate of 96.8%, exceeding the target of 85% for retention or completion within 12 weeks.
- The service has achieved a successful completion rate of 8.3% for opiates and 41.4% for alcohol, exceeding the national average.
- The service has seen a 28.8% increase in the number of service users in structured treatment, rising from 1,196 in April 2022 to 1,540 to date.

- The service achieved Hep C micro-elimination in 2023 and has successfully sustained this status for six months.
- The service has increased the percentage of individuals engaging in structured treatment following release from prison from 20.8% in April 2022 to 36.9% to date.



Update for Hillingdon Health and Social Care Select Committee – 9th October 2024

London Ambulance Service – Hillingdon Group

Work the organisation has undertaken over the last six months:

1. Building on the ‘tethered fleet’ project that was reported in May, Hillingdon Group have taken part in a series of work streams that have empowered the group to take ownership and accountability for actions that were previously centralised to the Trust. This involves localised scheduling, tethered equipment and localised fleet allocation.
2. In response to the staff survey results and learning from reports into the culture of other emergency services, the Trust has taken significant steps to make sure everyone feels safe in the workplace. The Trust’s Sexual Safety Charter sets out our commitment to make sure everyone behaves in a way that ensures sexual safety and shows our commitment to take any concerns raised seriously with empathy and understanding. NHS England have recently referenced London Ambulance Service as a case study in a report on good practice on sexual safety in the workforce. Every front line team at the Hillingdon Group has had a training session delivered by the Group Manager regarding sexual safety. This is with the aim of ensuring staff feel safe and supported in reporting any wrongdoing and highlighting the welfare referrals that are available to staff. It is also to ensure that staff are categorically clear that the Trust will robustly manage any wrongdoing or breaches of the Sexual Safety Charter.
3. Staff took part in a multi-agency major incident exercise at Heathrow Airport on the 25th September 2024. This was a live exercise to test our response to an aircraft incident with the following intentions:
 - Prepare Vehicle Crew Staff & Operational Commanders to support the management of a Major Incident Response.
 - To refresh and consolidate understanding of response to major incidents
 - Apply Ten Second Triage to mass casualty incidents and to consider the LAS casualty management plans when deploying LAS operatives.
4. The Trust held a staff awards ceremony ‘Our LAS Awards’ Ceremony on 26th September. This was a fantastic event where all staff had the opportunity to nominate colleagues and teams that they felt earned special recognition for their work over the year. In total, nearly 1400 people were linked to nominations in 13 categories.

5. The Trust has taken part in the filming of a new BBC documentary 'Ambulance' that is due to air in October. This is a fantastic opportunity to highlight to the public the challenges the Trust faces and the need to use our service appropriately. It highlights the rewarding work that staff undertake as well as development opportunities within the service for those who might want to join.

What target your organisation has been working towards

The LAS launched its 2023-2028 Strategy in September 2023. The full document is available online at [Our plans for the future - London Ambulance Service NHS Trust](#). This strategy was the result of extensive engagement both inside our organisation, with our partners and with our patients on how they would like to see us develop. The strategy sets out three missions:

1. Our Care: Delivering outstanding emergency and urgent care whenever and wherever needed.
2. Our Organisation: Being an increasingly inclusive, well led and highly skilled organisation people are proud to work for.
3. Our London: Using our unique pan-London position to contribute to improving the health of the capital.

Your organisation's performance against these targets during the last year and how this compares to recent years

- In North West London, the average response time to our Category 1 patients in the last three months was 7 mins 16 seconds for the 10,593 calls we attended. This is a 13% increase in calls for people in life-threatening circumstances, and we are working incredibly hard to reduce this response time even further.
- The Trust is currently operating at REAP (Resource Escalation Action Plan) level 3 (Major Pressure).

The Resource Escalation Action Plan is to support a consistent ambulance sector approach to strategic escalation pressure levels that provide alignment with the NHS Operational Pressures Escalation Framework (OPEL) whereby the symbolising of pressure levels is consistent and understood across the wider NHS. REAP provides NHS Ambulance Services with a consistent and coordinated approach across the organisation to the management of its response in situations where demand or other significant factors within the ambulance service see an increase and a challenge to the capacity to manage it.

- Staff sickness rates within the Hillingdon Group are currently sitting at 7.2% for the last 12 months.

- The average on scene times (the length of time we are with patients) for our time critical patients is 36.4 minutes in the last six months (0.5 minutes quicker than the last six months). This is compared to a Trust average of 38.0 minutes.
- We continue to champion the use of Alternative Care Pathways within the Hillingdon Group to reduce unnecessary conveyances of patients to the Emergency Department and ensure our patients are getting the most appropriate care for their needs. Following the audit reported in May, training sessions are being planned between staff from the Urgent Care Centre to our frontline staff in order to increase referrals. In the last three months, 52.1% of patients in Hillingdon were taken to an Emergency Department.
- Clinical Quality continues to be reviewed within the Hillingdon Group and is measured in a number of different ways including Clinical Performance Indicators (CPIs), Cardiac and Stroke Care bundles and Cardiac Arrest Care bundles. This is achieved by reviewing the care provided by our clinicians and ensuring that the appropriate care has been delivered. Some key highlights from recent reports:
 - 95% of staff within the Hillingdon Group have received Clinical Performance Indicator feedback within the last six months.
 - Between the 1st of April 2024 and 31st July 2024 33% of cardiac arrest patients attended by a Hillingdon Crew sustained a return of spontaneous circulation (ROSC) on arrival at hospital – where our teams manage to restart the heart rhythm following a cardiac arrest. Downloads of the Defib used in all cardiac arrest patients take place to provide feedback and assurance that all guidelines are followed with cardiac arrest management (Feb 2024 report).
 - 97% of Stroke patients received the appropriate and full care bundle (Feb 2024 report)

This page is intentionally left blank