

Joint Meeting of Scrutiny & Overview Committee and the Health & Social Care Sub-Committee

Meeting held virtually on Tuesday, 26 May 2020 at 6.30 pm via Microsoft Teams

This meeting was webcast and is available to view on the Council's website

MINUTES

Present: Scrutiny & Overview Committee

Councillors Sean Fitzsimons (Chair of SOC & HSC), Robert Ward (Vice-Chair), Leila Ben-Hassel (Deputy-Chair), Jeet Bains, Jerry Fitzpatrick and Joy Prince

Health & Social Care Sub-Committee

Councillors Andy Stranack (Vice-Chair), Patsy Cummings, Clive Fraser, Andrew Pelling, Scott Roche and Gordon Kay – Healthwatch Co-optee

Also Present: Councillor Tony Newman

PART A

21/20 Minutes of the Previous Meeting

The minutes of the Scrutiny & Overview Committee meetings held on 10 & 25 February 2020 and Health & Social Care Sub-Committee meeting held on 10 March 2020 were confirmed as a correct record subject to the following amendment to 25 February minutes:-

Item 4: Review of the Safer Croydon Partnership & Violence Reduction Network

Amendment to Recommendation 5 from

‘Consideration should be given to what quantifiable data on outcomes can be provided when the Safer Croydon Partnership is next reviewed by the Committee to allow a judgement to be made on the performance of the Partnership.’

To

‘Consideration should be given to what quantifiable data on outcomes can be provided when the Safer Croydon Partnership and other infrastructure organisations are reviewed by the Committee to allow a judgement to be made on their performance.’

22/20 **Disclosure of Interests**

There were no disclosures of interest made at the meeting.

23/20 **Urgent Business (if any)**

There were no items of urgent business.

24/20 **Covid-19 Update**

In order to gain an overview of the ongoing response to the covid-19 pandemic and the next steps as the response moved into the recovery phase the Committee was provided with a series of presentations from the Council and Health Care partners.

Presentations were provided at the meeting by the following:-

- Councillor Tony Newman – Leader of the Council
- Jo Negrini – Chief Executive
- Guy Van Dichele – Executive Director for Health, Wellbeing & Adults
- Shelley Davies – Director of Education & Youth Engagement
- Rachel Flowers – Director of Public Health
- Matthew Kershaw - Chief Executive of Croydon Health Service NHS Trust and Place Based Leader for Health

Copies of the presentations given at the meeting can be found on the following link:-

<https://democracy.croydon.gov.uk/ieListDocuments.aspx?CId=166&MId=2297&Ver=4>

During the course of these presentations the following points were noted:

The Leader of the Council

- Since the start of the crisis there had been almost 300 deaths in the borough that could be attributed to covid-19.
- At the time of the meeting there was over 14,000 people in the borough included on the Government's Shielding Programme, which identified vulnerable people who should be self-isolating and as such may require additional support. The Council had been working hard to provide support for these residents and thanks was given to all the community volunteers and partners organisations in helping to coordinate this response.

- The Local Government Association had estimated that there would be a shortfall of £10b in local authority funding as a direct result of the pandemic. The Government had previously provided assurance that local authorities would have their costs reimbursed, but to date there had been no official confirmation on the exact amount of funding or when it would be allocated which was creating financial uncertainty.
- As well as expenditure on the covid-19 response another financial repercussion of the crisis was the loss of income in areas such as parking which would have a significant impact on the Council's budget. A Finance Review Panel had been established to review the Council's budget in light of the covid-19 crisis. The emphasis of any savings plan arising from the work of the Panel would be to protect front line services and to continue to support to the most vulnerable in the borough.

Director of Public Health

- There had been a reduction in the number of positive covid-19 tests in the borough with the current average being one to two positive tests each day.
- In the same way as other areas with significant inequality, Croydon had been hit hard by the virus with the infection rate for the borough being the third highest in London.
- There were three separate elements to the pandemic which were hospital cases, community cases and care home cases.
- Since the start of the outbreak weeks 12 to 19 had seen the most excess deaths in the borough, however in week 19 there were fewer deaths attributed to covid-19.
- At this stage it was not possible to determine the exact impact of the virus upon BAME communities in the borough as the data was still being reviewed. However it was evident that the virus had a greater impact upon communities that experienced higher levels of health inequality.

Croydon Health Service NHS Trust (CHS) & Croydon Clinical Commissioning Group (CCG)

- It was the responsibility of the Healthcare system to provide health care across the borough through the Croydon University Hospital, primary care and within the community
- The existing close working relationship between health and social care partners in the borough had benefited the delivery of the response to covid-19.

- Croydon Health Service NHS Trust had treated more than 1,100 patient with Covid-19. 770 had been treated and discharged and sadly just under 300 had died.
- At present there were 8 people in intensive care as a result of covid-19 which indicated that the situation was improving as this was significantly lower than at the height of the outbreak.
- CHS had tried to maintain service provision where possible throughout the crisis including maintaining full emergency care. Four out of five outpatient visits had been kept through the use of technology, but there had been a reduction in planned care.
- The staff working within the healthcare system were key to the ongoing delivery of services and CHS had worked hard to maintain safe staffing levels. At one point during the height of the crisis 15% of staff were self-isolating which meant that a high degree of flexibility had been required in order to maintain services.
- Some routine appointments and non-urgent operations had been delayed in line with national guidance. Routine appointments were now being rescheduled and plans were being made to resume non-urgent operations from July. Patients undergoing planned surgery would be required to self-isolate for 14 days before and after their operation.
- CHS had maintained good stocks of PPE throughout the crisis and was providing mental health support for its staff.

Chief Executive of Croydon Council

- The Council had an emergency gold structure in place to manage the response to the crisis.
- Key areas of work included providing support for vulnerable residents identified through the Government's Shielding Programme, with over 14,000 people in the borough currently included on this list.
- The provision of support for care homes was another priority with the borough having the largest care home market in London. 63 care homes were being provided with active support and the Council had recently taken on new responsibilities for testing care home staff and residents.
- It had been confirmed that the Council would be leading on the contact tracing process which was being developed by the Government.
- It was highlighted that although the situation was improving, the emergency was ongoing with the Council delivering an extensive amount of additional services. However it would not be possible to provide the level of support delivered without working closely with partners.

- Work was underway to prepare Bernard Weatherall House for the return of staff. The reopening of the office would be based on social distancing guidelines including cleaning regimes and systems for the use of the lifts.
- In preparation for the reopening of Bernard Weatherill House risk assessments would be undertaken with all staff to gain an understanding of individual requirements. The risk assessments would also provide an indication of the number of staff who would like to return to the office as based on current guidelines only 20% of the usual number of staff could work in the building. It was likely that the first staff would return to the office from early July.
- An extensive staff survey had been undertaken during the lockdown which had found that 67% of staff found agile working helpful, but this also meant that there was still a significant portion who had not for a variety of reasons.
- The financial cost of responding to the covid-19 crisis was likely to have a significant impact on the Council's finances. To date £19.9m in funding had been received from the Government, but this was not enough to cover the estimated over spend which was projected to be £62.7m. The shortfall across London was estimated at £1.8b.
- As well as direct expenditure other factors such as loss of income from areas including parking and rental income were also exacerbating the financial challenge facing the Council.
- In light of these challenges it had been decided to take a proactive approach, working on the assumption that funding from the Government would not cover the total shortfall. As such both a recruitment and spending freeze had been implemented and a Finance Review Panel, with an independent Chair, had been set up to undertake a comprehensive review of the Council's finances.

Director of Education and Youth Engagement

- It was confirmed that schools had remained open throughout the lockdown for both vulnerable students and children of key worker families and would continue to do so.
- All primary schools in the borough were undertaking risk assessments ahead of reopening on 1 June, with the key driver being the ongoing safety of pupils, their families and the staff.
- Secondary schools would begin moving towards a wider reopening from 15 June.
- The reopening of schools would use a phased approach and would vary depending on the context of individual schools.

Director of Health, Wellbeing & Adults

- Covid-19 had created a huge challenge for social care.
- On a national level it appeared that care homes had been forgotten during the early stages of the crisis with the primary focus on hospitals.
- The Council had been in regular contact with care homes since the early stages of the crisis about the supply of PPE and had provided assistance with the acquisition of PPE where needed.
- In Croydon there was both a lead pharmacist and clinician supporting care homes which helped with the coordination of the care provided.
- Moving forward the pandemic continued to present a high risk for care homes with the potential for a second spike if the easing of the lockdown was not managed correctly.
- Work was underway to identify how best the Council could continue to provide support for care providers including how to safely manage residents being able to receive visits from their families.
- It was currently week 8 of the 12 week Shielding Programme set up by the Government to minimise the risk of infection for vulnerable people. The support provided by partners working across the sector including voluntary organisations had been excellent.
- There was currently over 14,000 vulnerable people identified on the shielding list with work underway to establish the level of support required going forward should the Government stop providing food parcels at the end of week 12.

Steve Phaure – Chief Executive of Croydon Voluntary Action (CVA)

- Although the last two months had been testing for Croydon, it had been impressive to see the number of people in local communities volunteering to help support vulnerable residents. The mutual aid movement in the borough was as strong as anywhere in the country with over 70 groups.
- The last couple of months had seen the recruitment of 500 fully checked volunteers. A key challenge going forward would be to retain these volunteers for the long term as the crisis began to ease.
- The number of food banks in the borough had increased from less than 10 before the crisis to 38 in the past couple of months. In normal circumstances this level of provision would not be required, but it was a good reflection of the community support within the borough.

- A scheme in Coulsdon which provided hot meals for vulnerable families was highlighted as an example of the successful partnership work in the borough.
- As well as support with the provision of food the voluntary sector had also provided befriending support to check in with vulnerable residents.
- In light of the possibility of further waves of the virus, plans were being made to record all the positive learning over the past couple of months to drive improvement going forward.

Following the presentations the Committee was given the opportunity to question the attendees on the information provided and any other areas of the Covid-19 response not already mentioned. The first question praised the significant level of community spirit that had been witnessed throughout the crisis and asked what could be done to encourage volunteers to continue in the longer term. In response it was advised that the retention of volunteers for the recovery and beyond would be very much welcomed. As many of those who had volunteered were furloughed workers the possibility of promoting corporate responsibility should be explored to encourage businesses to provide their staff with additional opportunities to volunteer.

In response to a question about improving the access to funding for smaller grassroots organisations it was advised that a creative approach using partnership bidding was required. This approach was encouraged by the CVA with recent funding bids involving up to 50 community partners. In many instances funders also favoured partnership bidding.

The Healthwatch Croydon Co-optee on the Health and Social Care Sub-Committee, Gordon Kay, highlighted that throughout the crisis his organisation had focussed on their key priorities. One priority was improving signposting for patients which had resulted in the creation of an FAQ document for residents. Another priority was consulting with residents on the healthcare response to covid-19 with a survey launched on 3 April 2020. As a result two reports had been produced summarising the 260 responses that had been received which indicated that there was a need for more information on testing at a local level.

The results of the survey had also indicated that there would be an increased demand for mental health services going forward due in part to the effects of social isolation during the lockdown and the fear of contracting covid-19. As such it was questioned whether plans were being made to manage a surge in mental health patients. In response it was confirmed that CHS was working with the South London and Maudsley NHS Foundation Trust (SLaM) to put in place a range of mental health support for their staff. It was highlighted that SLaM would be best placed to provide more information on wider mental health provision, but it was confirmed that a major response was being planned. It was noted that as GPs were seeing an increase in mental health issues associated with the lockdown and bereavement extra services were being commissioned to provide additional capacity.

It was confirmed that there was always more that could be done to ensure that people adhered to social distancing guidance, but at present within Croydon the number of covid-19 cases was declining. The Government was developing a national system to contain the virus using a test and trace approach that would be managed on a local level by the Council. The full details of the test and trace process were likely to be confirmed in the coming weeks.

In response to a question about how the Council was monitoring the financial stability of care homes and whether there were contingency plans in place should a home close it was advised that the Council was in contact with care providers on a weekly basis. The Government had provided £600m funding nationally (£4m for Croydon) to support care homes during the crisis with £1m already distributed. The Council already had contingency plans in place that would ensure residents continued to receive care in the event of a home closure. Although all homes in the borough were receiving support from the Council, at present 63 had additional needs that were being addressed. Only one home had indicated that they did not wish to continue in the care market.

It was confirmed that Croydon University Hospital had worked well with the care sector to coordinate the return of patients from hospital to their care homes. Testing of patients had been in place since the start of the crisis with results received quickly within 24 to 48 hours of testing and although patients had been released before receiving the results they had been discharged to a safe environment. Ongoing support and training had also been put in place for care home staff. The Committee agreed that given the vulnerability of residents in the care sector it would be important to carry out a review of testing prior to release from hospital to identify lesson learnt in the event of further waves of covid-19.

Concern was raised about the monitoring of care packages by the Council and how cases where people had accepted reduced care packages during the crisis had been managed. In response it was advised that contingency planning had taken place in the early stages of the crisis to understand how potential staff shortages would be managed, but there had not been any influence placed upon clients to accept reduced packages. As a result of the crisis some people were receiving a reduced care package while others had an increased package. Although the Committee acknowledged that contingency plans were required given the scale of the crisis, there was also concern that some people could have accepted a reduced care package from a sense of community obligation which may have been to their own detriment.

It was confirmed that although there was a range of different guidance available on the use of PPE that could be interpreted differently, both the Council and CHS had tried to provide a consistent approach in their guidance to staff. The supply of PPE for staff at the hospital had been maintained with support also being provided to primary care and care homes.

Regarding the Government's Shielding Programme, concern was raised about feedback received locally from vulnerable people who had struggled to register for the programme and as such it was questioned what the Council

could do to prepare in the event of further waves of covid-19. It was acknowledged that in the early stages of the Shielding Programme there was a lack of integration between the different data sets used, but this had quickly been addressed with over 14,000 vulnerable people on the current list. The process had highlighted vulnerable people living within the borough who would not normally have come into contact with the Council. This information was being used to inform future support.

There was concern about the potential shortfall in the Council budget as a result of expenditure on the response to covid-19. It was highlighted that at present, apart from assurances early in the lockdown that funding would be provided to cover covid-19 related expenses, there had been no confirmation from the Government on how much would be paid or when. As a result this had created uncertainty for local authorities across the country and in Croydon it had been decided that it would be prudent to take action to address the potential shortfall. This had included both a recruitment and spending freeze, and establishing a Financial Review Panel to undertake a thorough review of the Council's finances to reduce the shortfall

As a follow up officers were asked to confirm the level of short term borrowing held by the Council. It was advised that the Council had a temporary debt portfolio of £440m of which £140m had been borrowed from other local authorities to refinance a proportion of this debt. It was highlighted that there was currently no restrictions on the Council's borrowing.

It was questioned whether the Financial Review would result in restructuring and how this would get the buy in from the public. It was advised that further locality working and integration with partners would increasingly become the focus of the delivery of services to the public with care being taken to ensure that the services provided in specific localities met local need.

Given the importance of the financial challenge facing the Council the Committee agreed that it would have a more detailed review of the Council's finances at their next meeting in July.

Concern was raised about the risk that those most in need of education were losing out the most from not attending school and as such an update was requested on the support provided to vulnerable children during the lockdown. Assurance was given that the primary focus had been on the most vulnerable children throughout the lockdown, with significant effort made to ensure they were safe. The Council had a strong relationship with schools and was confident that schools were in regular contact with their most vulnerable pupils. Vulnerable children were prioritised into three categories with virtual meetings being maintained with those in the lower risk categories two and three and actual meetings being held with the most at risk children in category one on a fortnightly basis.

Schools were engaging with vulnerable students in a range of different ways including online learning and where access to the internet was not available arrangements had been made to deliver learning packs. The Government scheme to identify children who needed access to the internet had also been

used to provide laptops. In advance of schools starting to reopen from June preparations were underway to ensure that online learning continued to be maintained for those who would not be able to return immediately. As mentioned previously there was also a focus on the provision of mental health support as it was recognised there would be an increased demand in this area as a result of the lockdown.

As a follow up it was questioned how many children were considered not to be safe, how many it had not been possible to contact and what action was taken in these instances. In response it was confirmed that contact and visits with the most vulnerable children had been at a minimum maintained at their pre-covid-19 level, using virtual and telephone meetings as well as direct contact. Schools were also being proactive in ensuring they were having regular conversations with their most at risk pupils about their learning and mental health needs. It was highlighted that it was possible that some children would become at more risk during the lockdown which would not necessarily be picked up by either the Council or their school until they returned.

It was highlighted that there had been reports indicating that covid-19 had a disproportionate impact upon people from BAME communities and whether there was data to show the specific impact upon communities in Croydon. It was confirmed that it was likely that some communities in the borough had been disproportionately affected with health inequalities being one of the main contributory factors. Work to analysis the data on the impact of covid-19 from both a national and local level was underway and would be shared with the Committee once available. It was confirmed that ahead of reopening the Council offices a risk assessment would be undertaken with all staff.

Although there had been many reports in the media about the significant impact of covid-19 upon care homes providing support for the elderly, an update was requested on the impact on care homes providing support for other vulnerable residents such as people with learning disabilities. It was confirmed that the numbers were likely to be lower than those for elderly care, but work was ongoing to understand the full impact. Where possible services had been redistributed to try to ensure that people remained safe and contact had continued to vulnerable residents in the community through phone and digital means.

It was acknowledged that there was likely to be an economic crisis as a result of covid-19 and as such it was questioned whether there could be opportunities for local businesses and what strategy was being used to guide the support provided by the Council. It was highlighted that it was important to have a positive mindset for the future of business in Croydon, although the extreme vulnerabilities should not be underestimated. The Council continued to work closely with local businesses and had recently received confirmation that the Whitgift and Centrale shopping centres would be open from the start of June. There were opportunities for Croydon as a secondary office location which would also serve to increase the footfall for local shops and the focus on localities work across the borough would help to increase the footfall in the district centres.

In response it was highlighted that in recent years Croydon had lost a substantial proportion of its office stock due to redevelopment for residential use which may impact upon the opportunities to become a secondary office locations. In response it was highlighted that it was likely that much of the office stock lost would not have provided the right facilities for the future of work. Other councils had tried to introduce an Article 4 notice across their boroughs to prevent the conversion of offices for other uses, but had been turned down. It would be important to ensure that any new development took account future town centre uses and alternative types of office provision.

Given that the lockdown could potentially lead to an increase in domestic abuse an update was requested on the Council's response. It was confirmed that tackling domestic abuse remained one of the top three priorities for the Administration. During the lockdown the Council had conducted an extensive campaign in conjunction with the Police and the Family Justice Centre with posters to raise awareness in all off-licenses and supermarkets across the borough. The Family Justice Centre had also increased its opening hours to seven days a week along with the provision of a 24 hour support line. It was agreed that a detailed briefing would be provided to the Committee on domestic violence during the lockdown.

As there was a risk that there could be an increase in youth violence once the lockdown was relaxed, it was questioned what action the Council was taking to mitigate against this. It was highlighted that data showed that instances of serious youth crime, burglary and robbery had all decreased during the lockdown. The number of missing children had been reduced by a third and county lines activity had also decreased. Plans were being made to address the risk that these levels could increase once the lockdown was relaxed with a number of Panels in place to analysis the activity of young people.

At the conclusion of the meeting the Chair thanked the attendees for their participation at the meeting. It was noted that the Committee would be likely to want a further update on the Council's response to covid-19 at their next meeting on 22 July 2020.

Information Requests

The Committee agreed to request the following information:-

1. Detailed data on Covid-19 related deaths in the borough.
2. Confirmation on the number of people who had accepted reduced care packages and the date when the reduced package ends.
3. Data demonstrating the economic impact of the pandemic on the borough.
4. A briefing on domestic violence during the lockdown.

CONCLUSIONS

Following discussion of the report, the Committee reached the following conclusions:-

1. The Committee recognised that the potential shortfall in Government funding for Covid-19 expenses represented an area of extreme uncertainty for the Council and agreed that all avenues should be explored to lobby the Government to provide clarity over funding. The Committee agreed that it would write to the local MPs and the Government outlining concerns about the uncertainty over funding.
2. The Committee commended the proactive response taken by the Council to address the financial uncertainty including undertaking a financial review. It was agreed that the review should be as transparent as possible, with any savings identified as part of the review accompanied by a thorough impact assessment and risk analysis proportionate to the size of the saving. Any significant change to service provision should also be subject to extensive consultation prior to implementation.
3. It was agreed that a report would be requested for the next meeting of the Scrutiny and Overview Committee in July to focus in greater detail on financial position of the Council as a result of the Covid-19 crisis, including how potential savings would deliver service improvement and how any risks would be managed.
4. The partnership work between the Community & Voluntary Sector and the Council in supporting the most vulnerable sections of the community during the Covid-19 crisis was commended. It was recognised that there was an opportunity to learn from the partnership work during the crisis to inform the future relationship between the Council and the Community & Voluntary Sector, particularly in providing support for smaller grassroots organisations through encouraging partnership funding bids and the sharing of resources.
5. The Committee welcomed the reassurance given by Healthcare colleagues that they were aware of and making plans to manage a significant rise in mental health issues as the borough moved to the recovery stage of the crisis. The Committee agreed to recommend that mental health services should be one of the priorities for the Council as well moving forward.
6. The Committee recognised that there had been a need to proactively prepare contingency plans for potential staff shortages during the crisis. However there was unease that this had included contacting vulnerable residents to discuss reducing care packages as any such request may have been agreed by a resident from a sense of community obligation and to their own detriment.
7. As the existing data indicated that Covid-19 had disproportionately affected certain socio-economic and ethnic groups in the borough, the

Committee agreed that a greater level of granularity in the data was needed to gain an exact understanding of the impact of the virus.

8. The level of support provided by the Council and its partners to the vulnerable residents included in the Shielding programme was commended and it was agreed that a review to capture any lessons learnt from process should be undertaken to inform any future shielding should there be further waves of the virus.
9. Although the Committee was reassured that a thorough system of testing was now in place for care home residents being released from hospital back to their homes, it was agreed that a review should be undertaken of hospital discharge throughout the crisis to capture any lessons learnt.
10. The Committee remained concerned about the tracking of vulnerable young people who did not respond to contact from the Social Care team and agreed that this item would be referred to the Children & Young People Sub-Committee to scrutinise in greater detail at their meeting on 23 June 2020.
11. The Committee recognised that significant thought had been given to the support that could be provided to the Croydon economy in the face of a number of significant threats. In particular the recognition of the potential opportunities for the district centres was welcomed. However it was recognised that there was a large amount of uncertainty at the present time and as such it was agreed that the economic wellbeing of the borough would be included in the Committee's work programme for 2020-21.

RECOMMENDATIONS

The Committee **RESOLVED** to recommend to the Cabinet that all avenues to lobby the Government to meet its funding promises on Covid-19 are explored.

The Committee **RESOLVED** to recommend to the Cabinet Member for Finance & Resources that the review of the Council's finances be undertaken transparently with:-

- a. All savings accompanied by thorough impact and risk assessments, proportionate to the size of the saving.
- b. That any significant changes to service provision are subject to extensive consultation.

The Committee **RESOLVED** to recommend to the Cabinet Member for Safer Croydon and Communities that the lesson learnt from working in partnership with the Community and Voluntary Sector during the Covid-19 crisis be used to inform the Council's future relationship with the sector.

The Committee **RESOLVED** to recommend to the Cabinet Member for Families, Health & Social Care and the Cabinet Member for Children, Young

People and Learning that support for mental health provision be a priority as the borough moved into the recovery phase of the Covid-19 crisis.

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The Committee **RESOLVED** to recommend to the Cabinet Member for Families, Health & Social Care that:-

1. A response be provided to the Health & Social Care Sub-Committee to confirm how many people accepted reduced care packages, how many reductions were actually implemented, the end date of any reduced packages and what measures were put in place to safeguard the individuals who accept a reduced care package.
2. Work be undertaken to obtain data on a granular level of the impact from Covid-19 on communities across the borough.
3. A review be undertaken of the Shielding Programme to ensure that any lessons learnt are captured in the event of any future need for the programme.

The Committee **RESOLVED** to recommend to the Cabinet Member for Families, Health & Social Care, Croydon Health Service NHS Trust and the Croydon CCG that a review be undertaken of the hospital discharge of care home residents throughout the Covid-19 crisis to capture lessons learnt.

25/20 **Exclusion of the Press and Public**

This motion was not required.

The meeting ended at 10.10 pm

Signed:

Date: