

**MINUTES OF THE ADULTS AND HEALTH SCRUTINY COMMITTEE MEETING  
HELD AT 7.00PM, ON  
TUESDAY, 11 JULY 2023  
BOURGES/VIERSEN ROOM, TOWN HALL, PETERBOROUGH**

**Committee Members Present:** Qayyum (Chair), Shaheed (Vice-Chair), Asif, Bi, Casey, Khan, Mahmood, Rush, Skibsted and Co-opted Members Parish Councillor Neil Boyce, Sandie Burns and Chris De Wilde.

**Also in attendance:** Eva Woods, Youth Council Representative and Youth MP for Peterborough and Kelly Jesus, Youth Council Representative

**Officers Present:**

- Jyoti Atri, Director of Public Health
- Stephen Taylor, Executive Director of Adult Services
- Val Thomas, Deputy Director Public Health
- Jonathan Bartram, Programme Director, Strategic Commissioning Integrated Care Board
- Belinda Child, Head of Housing, Prevention and Wellbeing
- Laura King, Reablement Team Manager
- Charlotte Cameron, Senior Democratic Services Officer

**1. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Stevenson and S Farooq.

Apologies for absence were also received from Councillor Rangzeb and Councillor Asif was in attendance as substitute.

**2. DECLARATIONS OF INTEREST AND WHIPPING DECLARATIONS**

Councillor Qayyum declared her role at Bretton Park Medical Centre for this and future meetings.

**3. MINUTES OF THE ADULTS AND HEALTH SCRUTINY COMMITTEE MEETING HELD ON 14 MARCH 2023**

The minutes of the Adults and Health Scrutiny Committee meeting held on 14 March 2023 were agreed as a true and accurate record.

**4. CALL IN OF ANY CABINET, CABINET MEMBER OR KEY OFFICER DECISION**

There were no call-ins received.

## 5. **APPOINTMENT OF CO-OPTED MEMBERS 2023/24**

The Adults and Health Scrutiny Committee received a report in relation to the appointment of Co-opted Members in accordance with the Council's Constitution Part 3, Section 4 – Overview and Scrutiny Functions.

The purpose of the report was to seek approval from the Committee to appoint Sandie Burns MBE, Chris De Wilde and Parish Councillor Neil Boyce as Non-Voting Co-opted Members for the municipal year 2023/2024 and to approve the appointment of Parish Councillor Mark Ormston as the substitute for Parish Councillor Neil Boyce for the municipal year 2023/2024 to the Adults and Health Scrutiny Committee in accordance with Part 3, Section 4 – Overview and Scrutiny Functions.

The Senior Democratic Services Officer introduced the report and explained that the nominations for Parish Council Co-opted Members had been put forward by the Parish Council Liaison Working Group and that the appointments would be reviewed annually.

The Committee unanimously agreed to the appointments of Sandie Burns, Chris De Wilde and Parish Councillor Neil Boyce as non-voting Co-opted Members for the municipal year 2023/24, and the appointment of Parish Councillor Mark Ormston as substitute.

The Chair welcomed the co-opted members who were in attendance and invited them to join the committee for the rest of the meeting.

### **AGREED ACTIONS**

The Adults and Health Scrutiny Committee **RESOLVED** to agree to:

1. Appoint Parish Councillor Neil Boyce as a Co-opted Member with no voting rights to represent the rural area for the municipal year 2023/2024. Appointment to be reviewed annually at the beginning of the next municipal year.
2. Appoint Parish Councillor Mark Ormston as the nominated substitute for Parish Councillor Neil Boyce should they be appointed as the non-voting Co-opted Member representing the rural area. Appointment to be reviewed annually at the beginning of the next municipal year.
3. Appoint Christine De Wilde to the Committee as an Independent Co-opted Member with no voting rights for the municipal year 2023/2024. Appointment to be reviewed annually at the beginning of the next municipal year.
4. Appoint Sandie Burns to the Committee as an Independent Co-opted Member with no voting rights for the municipal year 2023/2024. Appointment to be reviewed annually at the beginning of the next municipal year.

## 6. **INTEGRATED TOBACCO CONTROL IN THE PETERBOROUGH AND CAMBRIDGESHIRE SYSTEM**

The Adults and Health Scrutiny Committee received a report in relation to Integrated Tobacco Control in the Peterborough and Cambridgeshire System.

The purpose of the report was to provide the Committee with an update on changes in Tobacco Control including stopping smoking and the challenges it presents for public health.

The Director of Public Health, the Deputy Director Public Health and the Programme Director, Strategic Commissioning Integrated Care Board (ICB) introduced the report

and highlighted key points including:

- The paper recognised the successes that had been made in tackling tobacco and the harm it caused. There had also been a reduction in tobacco prevalence. However, smoking was still one of the worst things that caused harm to health and was a persistent issue within Peterborough. Officers were thanked for their work on producing the report in front of committee.
- Officers were seeking support of the proposals outlined in the report, especially in the context of increasing concerns that smoking presents. The paper outlined some of the challenges with regards to the data that was being drawn upon.
- There had been a raft of legislation and guidance since 2006 to tackle smoking rates, however recently these rates had started to plateau.
- The initiative currently being worked on by both Peterborough and Cambridgeshire was a collaborative effort. Focus had now shifted to looking at preventative measures to stop people smoking.
- Working collaboratively was the only way to try and stop people smoking. The long-term plan was set out in 2019 with the aim to help people live longer, healthier lives.
- The treating tobacco dependency programme was to establish smoke-free pathways in acute hospital settings. One of the keys was to ensure support once out of hospital and there were community support groups to assist with this.
- This programme also looked at rates in deprived areas, along with aligning this to those higher rates of smoking in mental health patients and those who were also pregnant.
- The paper being presented also gave a good description of the challenges being faced, the stagnation of rates of those smoking and some of the new challenges faced by those who vaped. Although vaping was a pathway for people to try and stop smoking it was difficult at the moment to know the long-term effects of this on young people.
- The table at the end of the paper outlined a list of all the intervention methods that the services would like to take forward. Some commissioning was being reviewed and was now underway to look at ways of changing behaviours.
- This would eventually inform the development of services that were to be put in place. This included building on the school based programmes already in place. Work was also going to be undertaken with regulatory services, looking at illegal sales of tobacco.
- There were many ways of developing the services and work was already being done around digital services. Incentives were being drawn up to encourage those who were pregnant to not smoke, this builds upon similar successful programmes around the country.
- The paper also outlined details and ways that Councillors could assist the service, especially working within the local communities. There were also some national programmes that could be used to support Councillors in carrying out this work.
- Officers also commented that they would like to set targets for quitting smoking rates locally, this would be a shared target across the ICB, Cambridgeshire and Peterborough.
- The Adults and Health Scrutiny Committee debated the report and in summary, key points raised and responses to questions included:
- There was a lot of work done nationally to calculate the cost of smoking to the system, this was because it cut across a number of different services, such as the health service, social care service, waste and damage to the environment. Smoking rates were calculated by carrying out a survey locally.
- With regards to the definition of a smoker this was difficult to define, even if

you had one cigarette a day you would be deemed a smoker. There was no defined amount that was spent as a smoker in Peterborough, this was a national figure. When services were looking to assist people in quitting then the economy and cost to smoke could potentially be a key motivator for people.

- The attached appendix to the report did outline the cost to the system, which was £72.5 million. This figure represented the overall cost for roughly 22,000 smokers. It was difficult to know how much was spent per person on smoking as illegal tobacco sales were still quite prevalent.
- By smoking people were potentially decreasing their overall health levels.
- The Health Service had been liaising with Regulatory Services in relation to the sale of illegal tobacco. The illegal sales of cigarettes at a cheaper price to the community and potentially children, had also impacted the smoking prevention work being undertaken.
- Research was being conducted to understand the behaviour science, motivators and barriers, to provide bespoke cessation support for all areas particularly where the rates were higher.
- The action taken in relation to the illegal sale of vapes had included operational visits by Trading Standards (TS), where illegal vapes had been confiscated. Furthermore, Public Health (PH) had requested that increased enforcement visits were undertaken and during a recent inspection, Trading Standards seized 35,000 illegal vapes from one shop in Fenland.
- The sale of illegal vapes was a lucrative business and shop owners were known to pay the fine imposed by TS, then restock and start again. The aim of the PH team was to raise awareness of the dangers in illegal tobacco, e-cigarettes and alcohol consumption.
- A business found selling illegal products such as tobacco, could be shut down for a three-month period as a sanction, however, Public Health felt that this was not a long enough period of time to make an impact.
- Adults were three times more likely to quit smoking if the use of vapes was introduced as a cessation method.
- National work was being undertaken to monitor the impact of vaping and the positive outcome for smokers to quit. In addition, use by young people continued to be surveyed, however it was found that most would use a vape to experience it and then discontinue after a while.
- The sustainability impacts on the disposal of lithium batteries had been considered in relation to the proposed universal vape offer, and the related costs would be factored in.
- Support from the Youth Council around the dangers of smoking would be welcomed by PH; as a message from peers was more effective to school children. In addition, information and training could be provided to the Youth Council to help deliver the quit smoking message and a co-production effort could be organised with the team.
- Support provided to prevent young people vaping or smoking had not been fully developed as there was no robust evidence to fully understand the incentives and motivators to help them give up. Furthermore, Public Health would welcome the support of the Youth Council to understand these motivators.
- The NHS-funded tobacco treatment service was a new pathway plan that offered intervention through trained smoke free advisors to hospital inpatients admitted overnight to help them stop smoking.
- Members commented that there should be a zero-tolerance approach taken by Trading Standards to revoke the licence of a business that sold illegal tobacco.
- Members were advised that a more robust approach by Trading Standards on the sale of illegal tobacco would be effective; however, they had to abide by

the law and apply sanctions appropriately to each case.

- All data relied upon to monitor smoking and provide interventions would be broken down by categories such as ethnicity and depravity as a standard approach.
- The health outcomes would be monitored following the introduction of vapes as a smoking cessation method, however, this would only be in place for a period of one-year through local health services. Nonetheless, studies were being undertaken nationally on users of the cessation service post a year to fully understand the impact of vapes on health.
- Members were concerned about the societal image being portrayed in the education sector because vapes contained carcinogenic products.
- Clarification was provided that vapes had only contained nicotine and not the 4000 chemicals found in cigarettes. Furthermore, it was advised that on balance, the use of vapes had provided a more effective result for people to stop smoking.
- Public Health would not want to encourage people to start smoking as a result of the vape initiative, the aim was to encourage people to stop. In addition, the smoking cessation scheme would be monitored for health outcomes as it evolved.
- Members would be keen to learn the health outcome results following the use of a vape scheme as a cessation method for people who wanted to quit smoking.
- Members requested clarification on the number of stores where a test purchasing exercise was carried out in Huntingdonshire.
- The message that Public Health attempted to relay was that people should not smoke, however there was support provided to quit if needed and the use of vapes was an effective method for adults. Furthermore, young people would not be encouraged to use vapes as a cessation method, and instead be given realistic messages about the dangers of smoking through school-based programmes.

The following recommendation was made by Councillor Qayyum and seconded by Councillor Shaheed, that the Committee recommended to amend the proposed actions to include the exception of vaping intervention, until a follow up briefing note is provided giving an overview and evidence of health outcomes with reference to vaping and links to smoking cessation. A vote was taken on the recommendation from Councillor Qayyum and was **UNANIMOUSLY AGREED**.

## **AGREED ACTIONS**

The Adults and Health Scrutiny Committee **RESOLVED** to

1. The proposed actions to decrease the numbers of people who smoke.
2. A system wide approach to addressing smoking with an agreed shared target for reducing smoking rates.

The Committee also requested that the Deputy Director of Public Health provide further detail of the establishments visited in the test purchasing exercise, broken down by area.

## **RECOMMENDATION**

The Adults and Health Scrutiny Committee considered the report and **RESOLVED** to **RECOMMEND** to amend the proposed actions to include the exception of vaping intervention, until a follow up briefing note is provided giving an overview and

evidence of health outcomes with reference to vaping and links to smoking cessation.

## **7. REABLEMENT OVERVIEW REPORT**

The Adults and Health Scrutiny Committee received a report in relation to the Reablement Service.

The purpose of the report was to provide an update on the support the increased use of reablement service to support people to live independently, and therefore reduce care and support costs across adult social care.

The Executive Director of Adults Services, the Head of Housing, Prevention and Wellbeing accompanied by the Reablement Team Manager introduced the report and highlighted key points including:

- The reablement service was part of the Adults Social Care early intervention and prevention offer. Those who would need to use the service would be individuals who had declined ability or left hospital deconditioned to be as independent as they were.
- The service was run 365 days a year with a range of support in place, for a maximum period of 6 weeks.
- The service had a wide offer and would take opportunities to work with the Public Health team to deliver the best care.
- There were challenges with recruitment and there had been an ongoing campaign to improve this.

The Adults and Health Scrutiny Committee debated the report and in summary, key points raised and responses to questions included:

- Members noted that those who were non-weight bearing were excluded from the service and queried what service would be offered.
- The Officer clarified that reablement was the social care offer and the hospital care team determined the pathway someone would follow. There would be various recommendation that depended on the patients points of contact.
- The GP practices in Peterborough had access to social care services and Joy app subscribers had a direct route to the Adult Early Help front door.
- Members raised concerns that hospitals had not provided the right information and that they should be more informative.
- Members were advised that there was a practitioner based in the hospital and patients were referred there directly from wards so that communication would be made directly.
- Members noted that compliments outweighed the complaints but the complaints that had been received focused on the service not delivering to expectations. Lessons were learnt but it was important to note that each person had different expectations of what services should deliver.
- There were some areas of confusion on how to find support and the team had looked at methods of communication to help provide clarity.
- The Officers were advised that it had been helpful to understand the point a patient had started from and who they had been in contact with.
- There was work to improve the functionality of the website which included digital options. Members were advised that traditional forms like leaflets would still be used.
- Members were advised that the team had worked to support people earlier to prevent further decline.

- Members noted that referrals would come direct into the service areas which supported a quicker response to community referrals. An average time from start to the completion of an assessment was 5-7 days.
- Members praised the team for their work and congratulated them on their partnership award from the Council.
- Members raised concerns around discharges from hospital and were advised that the team would not leave anybody who was isolated or needed support.

## **AGREED ACTIONS**

The Adults and Health Scrutiny Committee **RESOLVED** to

1. Have regard to the content of the report and support the increased use of reablement service to support people to live independently, and therefore reduce care and support costs across adult social care.

## **8. REVIEW OF 2022/2023 AND WORK PROGRAMME FOR 2023/2024**

The Senior Democratic Services Officer presented the report which considered the 2022/2023 year in review and looked at the work programme for the new municipal year 2023/24 to determine the Committees priorities. Members also noted the Terms of Reference for the Committee.

Members requested a report from Healthwatch Peterborough and GP accessibility.

## **AGREE ACTIONS**

The Adults and Health Scrutiny Committee **RESOLVED** to

1. Considers items presented to the Adults and Health Scrutiny Committee during 2022/2023 and make recommendations on the future monitoring of these items where necessary.
2. Determines its priorities and approves the draft work programme for 2023/2024 attached at Appendix 1.
3. Notes the Terms of Reference for this Committee as set out in Part 3, Section 4, Overview and Scrutiny Functions and in particular paragraph 2.1 item 3, Adults and Health Scrutiny Committee and paragraph 3.5 Health Issues as attached at Appendix 2.

The Committee also requested that the Senior Democratic Services Officer add to the work programme a report on Healthwatch Peterborough and GP Accessibility for September.

## **9. FORWARD PLAN OF EXECUTIVE DECISIONS**

The Senior Democratic Services Officer introduced the report which included the latest version of the Council's Forward Plan of Executive Decisions containing decisions that the Leader of the Council, the Cabinet or individual Cabinet Members would make during the forthcoming month. Members were invited to comment on the plan and where appropriate, identify any relevant areas for inclusion in the Committee's Work Programme.

Members noted that the Cambridgeshire and Peterborough All Age Carers Strategy had been approved at Cabinet.

Members referred to the Approval to award a grant for a Mental Health Supported

Living Service and sought clarification on what that meant.

### **AGREED ACTIONS**

The Adults and Health Scrutiny Committee considered the current Forward Plan of Executive Decisions and **RESOLVED** to note the report.

The Committee also requested a briefing note on the non-key decision 'Approval to award a grant for a Mental Health Supported Living service.'

### **10. DATE OF NEXT MEETING**

The date of the next meeting was noted as being the 19 September 2023.

CHAIR

Meeting started at 7.00pm and ended at 8.33pm.