HEALTH AND WELLBEING BOARD

Friday, 27 November 2015

Minutes of the meeting of the Health and Wellbeing Board held at on Friday, 27 November 2015 at 11.30 am

Present

Members:

Revd Dr Martin Dudley (Chairman)
Jon Averns
Helen Isaac
Glyn Kyle
Dr Gary Marlowe
Simon Murrells
Dhruv Patel
Jeremy Simons

Officers:

Tirza Keller

Natasha Dogra
 Sabina Johal
 Neal Hounsell
 Community and Children's Services Department
 Community and Children's Services Department

1. APOLOGIES OF ABSENCE

Apologies had been received from Deputy Joyce Nash, Karina Dostalova, Gareth Moore and Paul Haigh.

Community and Children's Services Department

2. DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

There were no declarations on interest.

3. MINUTES

Resolved – that the minutes of the previous meeting be agreed as an accurate record.

4. MINUTES OF THE HEALTH AND SOCIAL CARE SCRUTINY SUB-COMMITTEE

The Board received the minutes of the Health and Social Care Scrutiny Sub Committee meeting held on 2 November. Members noted that the Review of Health and Social Care Overview and Scrutiny Governance had been considered by the subcommittee and would be discussed at the meeting of the Community and Children's Services Committee on 11 December 2015.

Discussions ensued regarding the formation of the new stand-alone Health and Social Care Scrutiny Committee and whether it was necessary to omit Members serving on Community & Children's Services and the Health & Wellbeing Board. The Board were informed that restricting membership to exclude Community & Children's Services Committee Members was necessary to ensure there was no conflict of interest, but would severely reduce the 'pool' of Members likely to serve on the Health & Social Care Scrutiny Committee. Having a stand-alone Health & Social Care Scrutiny Committee would highlight the issues being considered, and acknowledge their importance.

Received.

5. CCG UPDATE PRESENTATION

The Board received a presentation from Dr Gary Marlowe and noted the following:

- A risk summit was held on at Homerton Hospital 28 September where it was agreed that a combined action plan picking up on the maternal deaths, CQC report and CCG report would be produced. The CCG Maternity Programme Board, with external support, would monitor the progress
- An external peer review of progress towards the end of 2015 would be undertaken and the CQC would make a further inspection to review progress against action plans.
- The CCG would attend St Barts and Royal London site specific quality meetings.
- The CCG would continue to collect duty of candour information.
- £8.8m of additional investment would be made into the GP Confederation for additional Primary Care services. This would be scrutinised by the Local GP Provider Contracts Committee without local GP involvement.

In response to a query, Members were informed that 21 practices offered extended hours, however there was limited scope to expand this due to workforce issues. It was also noted that practices had been running Sunday hours, but they had seen limited take-up from local patients.

Members requested that the City of London Police submit a report for the Board's consideration regarding how the police force interface with mental health services in the City. The Board agreed that it would be timely to discuss this matter and asked for the report to be submitted to the January or March Board meeting.

Discussions ensued regarding the issues of eating disorders and self-harm amongst city workers and young people studying in the City's schools and academies. Officers agreed to write to the Head teachers of the independent schools and academies to investigate whether this was a current problem, and if so, how it was being tackled.

Received.

6. CCG COMMISIONING INTENTIONS 2016/17

The Board received the report of the CCG and noted that the aims for achievement in City and Hackney were:

- Be in the top 5 CCGs in London in terms of quality
- Be an attractive place to work for existing and new primary care staff
- Delivery of safe services
- Services that are resilient by being productive, efficient, safe and value for money
- Services that are of high quality and offer comprehensive patient support
- Services that are accessible
- Reduce health inequalities

Received.

7. CITY OF LONDON MENTAL HEALTH STRATEGY

The Board received the Mental Health Strategy and noted that it was developed based on the findings of the *Mental Health Needs Assessment for the City of London* (2015). The mental health strategy set out the overarching aim for more people in the City to have good mental health, and described how the City intended to achieve this. It identified four priorities which are: Prevention, Personalisation, Recovery, and Delivery.

In response to a query, it was noted that the focus of the strategy was delivering better outcomes for residents, rough sleepers and workers. It aimed to improve the mental health of people in the City, keep people well and then ensured we provide effective support when mental health problems do arise. Members noted that the report would now be considered by the Community and Children's Services Committee at their meeting on 11 December 2015.

Resolved – that the Mental Health Strategy be approved.

8. CARERS' STRATEGY AND PEER REVIEW

The Board received the refreshed Carers' Strategy 2015–18 and a peer review which had been recently undertaken on the City of London Corporation's work with carers.

Received.

9. INTEGRATION OF HEALTH AND SOCIAL CARE

The Board received the update on developments in integrated care both nationally and in the City of London Corporation.

Received.

10. HEALTHY BEHAVIOURS PARTNERSHIP

The Board received the Healthy Behaviours' Partnerships informing Members that the partnership would meet three times a year, to coincide with every other Health and Wellbeing Board meeting, and would provide strategic oversight of all alcohol, substance misuse and tobacco control work undertaken within the City of London. The meeting frequency would allow the Health and Wellbeing

Board to provide oversight and governance of the group, including performance of the programmes of work.

Received.

11. LONDON SEXUAL HEALTH COMMISSIONING TRANSFORMATION PROJECT

The Board received a report of the Commissioning and Performance Manager informing Members that from April 2013, local authorities had been mandated to provide comprehensive sexual health services to their residential population. To date, the City of London Corporation had been working with local authorities across London to look at the potential of commissioning a Pan-London sexual health service which represents value for money for all authorities involved. The vision for this service had now been set, with a specification currently being written by the authorities.

Resolved – that Members:

- Agreed to take part in a joint procurement process organised on a subregional basis to commission sexual health GUM services;
- Agreed to join a pan London procurement of a web based system to include a front end portal for advice, guidance and access to services including access to home/self-sampling kits for sexually transmitted infections:
- Agreed to join a pan London procurement of a confidential partner notification system.

12. JOINT HEALTH AND WELLBEING STRATEGY ACTION PLAN PROGRESS REPORT

The Board noted the Joint Health and Wellbeing Strategy Action Plan progress.

Received.

13. **COMMUNITY SAFETY UPDATE**

The Board received the community safety update. It was agreed by Board Members that the Licencing Policy had dramatically reduced the number of licencing hearings taking place, with none being required this municipal year.

Received.

14. **HEALTHWATCH UPDATE REPORT**

The Board Members received an update from Healthwatch.

Received.

15. HEALTH AND WELLBEING BOARD UPDATE REPORT

Members of the Board noted the update report.

Received.

16. THE HEALTH AND WELLBEING BOARD'S INPUT TO OTHER COMMITTEES

The Board Members considered a report informing them that the Health and Wellbeing Board did not have its own budget, therefore it was vital that it influenced other City of London Corporation committees and partner organisations in order to carry out its work.

Members noted that performance and progress reports were received on a six-monthly basis and enabled the Health and Wellbeing Board to monitor whether the priorities set out in the Health and Wellbeing Strategy were being successfully delivered. Several of the priorities had a significant impact on health and wellbeing but did not come under the traditional remit of public health, health and social care services. These included priorities about air quality, noise pollution and physical activity and child poverty. This meant that joint working with Port Health and Public Protection, Open Spaces, Planning and Transport, Built Environment and Economic Development was vital and the Health and Wellbeing Board was informed of progress and achievements through these reports.

Members were informed that the Department of Community and Children's Services were recruiting for the post of a Public Health consultant for the City Corporation. Report authors would be encouraged to consult with this person to ensure health aspects of their reports were referenced and investigated. The Board agreed that other City Corporation committees did consider health aspects of their decisions however there was room for this to be further embedded.

Resolved – that Members endorsed the adoption of a Health and Wellbeing Board forward plan that was supported by:

- a. regular agenda planning meetings with the Chairman and policy officers in the Town Clerk's department, to identify corporation-wide issues that touch on health and wellbeing; and
- b. Regular engagement with the City and Hackney CCG, Tower Hamlets CCG and NHS England, as part of the agenda-planning, to identify external health and wellbeing issues that have an impact on the City.

17. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE BOARD

The Chairman informed the Board that he had asked the Remembrancer to submit a report to the January meeting of the Health and Wellbeing Board regarding the provision of non-alcoholic beverages at City Corporation events.

18. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT There was no urgent business.

19. EXCLUSION OF PUBLIC

MOTION - That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A of the Local Government Act.

20. NON PUBLIC MINUTES

Resolved – that the minutes be agreed as an accurate record.

21. NON PUBLIC QUESTIONS ON MATTERS RELATING TO THE WORK OF THE BOARD

There were no questions.

22. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE BOARD AGREES SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED

There was no urgent business.

Chairman	

The meeting ended at 1.05 pm

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