

HEALTH AND WELLBEING BOARD

Friday, 15 June 2018

**Minutes of the meeting of the Health and Wellbeing Board held at on Friday,
15 June 2018 at 11.30 am**

Present

Members:

Deputy Joyce Nash (Chairman)
Randall Anderson (Deputy Chairman)
Jon Averbs
Dr Penny Bevan
Gale Beer
Jeremy Simons
Dr Gary Marlowe
Marianne Fredericks.

Officers:

Natasha Dogra – Town Clerk’s Department
Nicole Klynman– Community and Children’s Services Department
Simon Cribbens – Community and Children’s Services Department
Farrah Hart – Community and Children’s Services Department
Tizzy Keller – Community and Children’s Services Department
Sarah Thomas – Community and Children’s Services Department
Sukhjit Gill – Community and Children’s Services Department
Xenia Koumi - Community and Children’s Services Department.

1. APOLOGIES OF ABSENCE

Apologies had been received from Simon Murrells, Matthew Bell and Andrew Carter.

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

There were no declarations of interest.

3. THE ORDER OF THE COURT OF COMMON COUNCIL

The Order of the Court of Common Council was put to the Board for their consideration.

Resolved – that the order of the Court of Common Council be received.

4. ELECTION OF CHAIRMAN

The Board was invited to elect a Chairman for the year ensuing.

Resolve – Deputy Nash being the only Member expressing a willingness to serve was elected a Chairman for the year ensuing.

5. ELECTION OF DEPUTY CHAIRMAN

The Board agreed to defer this item until the next meeting to allow for those Members who were unable to attend this meeting to be considered for this appointment.

Resolve – that the appointment of a Deputy Chairman be deferred until the next Board meeting.

6. **TO CONFIRM THE APPOINTMENT OF A CO-OPTED MEMBER REPRESENTING THE CCG**

The Board was invited to a co-opted Member representing the CCG.

Resolve – David Maher, CCG, was appointed as a co-opted member of the City's Health and Wellbeing Board.

7. **MINUTES**

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

8. **PRESENTATION: CITY PLAN 2036**

The Board received a presentation regarding the City Plan 2036. It was noted that the Healthy and Inclusive City plan brings together policies on a range of issues in one section of the plan, including:

- Air Quality
- Noise and Light Pollution
- Social & Community Facilities
- Inclusive Buildings & Spaces
- Sport & Recreation/Play Areas.

In response to a query Members were informed that the draft plan was to be finalised in September 2018, so there would be an opportunity for Members to comment informally over the summer. The Board agreed that it would be very useful for Officers to engage with elected Members when producing plans which had an impact on several areas and committees. The current local plan did not focus largely on health and wellbeing, but this would be revised by the proposal to include a section relating to a health and inclusive city.

Resolved - that the presentation be received.

9. **PHARMACY SERVICES IN THE CITY OF LONDON**

Members noted that the Health and Wellbeing Board has a statutory obligation to produce a Pharmaceutical Needs Assessment (PNA) at least every three years. The PNA includes information on current pharmaceutical service provision, information on health and other needs, and an assessment on whether current provision meets current and future needs of the area.

In response to a query Members were informed that the PNA will be used by NHS England to commission future pharmacy services in the area and will also inform the commissioning plans of City of London Corporation and City & Hackney CCG.

The PNA does not identify any gaps in current provision of pharmaceutical services in the City of London and does not anticipate any gaps within the next three years. Members also considered the role of pharmacies in the City of London more broadly, particularly their role in health promotion and provision of health services for both City residents and workers.

The Board agreed that independent pharmacies were very helpful and a map plotting the current practices and the areas that access these provisions would be helpful. Officers informed Members that this information was included in the needs assessment report.

Resolved – that the update be received.

10. **DENTAL PUBLIC HEALTH**

Oral health is a key component of overall health and wellbeing. Tooth decay and oral disease is largely preventable but remains a widespread health problem and increases the risk of a number of serious health issues. Effective oral public health services are an essential component of public health improvement.

Members noted the oral public health services that are currently being delivered in the Square Mile through our commissioned provider. It highlights how the Public Health Team are working with the provider expand their activities within the City. This report also includes some possibilities for opportunities to increase dental public health provision and provide additional activities within the Square Mile to ensure we are effectively improving the oral health of our population.

Discussions ensued regarding the provision available for school children in the City. Members noted that some additional opportunities to increase the provision of oral public health services in the City, potentially to be delivered with private partners, could include:

- ☐ Provide oral health information sessions for children, young people and their parents in community spaces, with a focus on areas with higher levels of deprivation in the City e.g. delivering sessions in Portsoken community centre.
- ☐ Distribute toothbrushes and toothpaste in more community settings e.g. libraries at children's sessions, community centres.
- ☐ Organise supervised tooth-brushing sessions to for children and young people, focusing on those with special educational needs and learning disabilities (SEND), in community sessions.
- ☐ Organise a health promotion campaign to raise awareness of free NHS dental services for children, the importance of young children visiting dentists, free apps available to encourage young people to brush etc.

The Board agreed that schools should be approached with the options above to ensure the dental provision was widely used by school children in the city.

Resolved – that Members reviewed options for expanding oral health promotion and agreed the approach.

11. **SUICIDE PREVENTION ACTION PLAN (ANNUAL UPDATE)**

Members noted the progress on the City of London Suicide Prevention Action Plan which is a jointly produced document between the City of London Corporation and the City of London Police.

In response to a query Members noted that following the transfer of public health from the NHS to local government in April 2013, suicide prevention became a local authority led initiative involving close collaboration with the police, clinical commissioning groups (CCGs), NHS England, coroners and the voluntary sector.

Suicide is one of the top twenty leading causes of death for all ages worldwide. Suicide is a major issue for society and a serious but preventable public health problem. Suicide can have lasting harmful impact economically, psychologically and spiritually on individuals, families, and communities. While its causes are complex and no strategy can be expected to completely prevent suicide, there is much that can be done to ensure that we reduce the likelihood of suicide and to ensure support is available for people at their most vulnerable.

Board Members were disappointed that cameras had not yet been positioned on bridges; the Chairman agreed to speak with the Chairman of the Police Committee regarding the matter. Discussions ensued regarding the slow progress and lack of monitored CCTV cameras erected around the city. It was proposed and seconded that a motion would be submitted to the Police Committee highlighting the Board's disquiet regarding the matter.

Resolved – that the motion be submitted to the Police Committee to be considered at their meeting on 12th July 2018.

12. **SEND AREA INSPECTION**

Members noted the outcome of the City of London Local Area Inspection letter – May 2018. Her Majesty's Chief Inspector of Education, Children's Services and Skills gave notification on 5 March 2018 to the City of London local area that we were going to be inspected, under section 20 of the Children Act 2004, from 12 to 16 March 2018.

The inspection provided an independent external evaluation of how well the City of London local area carries out its statutory duties in relation to children and young people with special educational needs and /or disabilities (SEND) to support their development. Ofsted and the Care Quality Commission (CQC) published the inspection findings in letter form on 18 May 2018. The findings set out briefly the context of the inspection, the evidence gathered, any strengths and weaknesses, and areas recommended for improvement.

Resolved – that the update be received.

13. **CITY WORKER HEALTH RESEARCH**

The last major piece of research carried out on the health needs of City workers was six years ago, in 2012. "The Public Health and Primary Healthcare Needs of City Workers" provided valuable intelligence, which informed the Joint Strategic Needs Assessment and was used to lobby for resourcing and shaped

commissioning of public health services for the Square Mile's worker population.

Since 2012 the landscape has shifted in some areas, including the further growth of the City's worker population, the Brexit vote and the significant increase in mental health awareness. It would be prudent to carry out follow-up research to explore current City worker health issues and how receptive City workers may now be to existing and new interventions.

Resolved – that Members approved the proposal to undertake research on the health and wellbeing needs of City workers.

14. HEALTH AND WELLBEING BOARD UPDATE REPORT

Board Members received an overview of local developments and policy issues related to the work of the Board where a full report is not necessary. Details of where Members can find further information or contact details for the relevant officer are set out within each section. Updates included:

- ☐ City of London Healthwatch update
- ☐ Leadenhall Sexual Health Centre
- ☐ Sustainable City Awards – Healthier City Award
- ☐ Housing Strategy update
- ☐ Sexual Health London update
- ☐ Integrated Commissioning update
- ☐ Better Care Fund update

Resolved – that the update be received.

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

There were no questions.

16. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

There was no urgent business.

17. EXCLUSION OF PUBLIC

Resolved - 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.

18. BI-ANNUAL PERFORMANCE REPORT

The Board received the bi-annual performance report of the Director of Community and Children's Services.

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

There were no questions.

20. 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.

The meeting ended at 1:00pm

Chairman

**Contact Officer: Natasha Dogra tel.no.: 020 7332 1434
Natasha.Dogra@cityoflondon.gov.uk**