

**HEALTH AND WELLBEING BOARD**

**Wednesday, 6 November 2013**

**Minutes of the meeting of the Health and Wellbeing Board held at on  
Wednesday, 6 November 2013 at 1.45pm**

**Present**

**Members:**

Revd Dr Martin Dudley (Chairman)  
Deputy Joyce Nash (Deputy Chairman)  
Ade Adetosoye  
Jon Averbs  
Superintendent Norma Collicott  
Dr Gary Marlowe  
Sam Mauger  
Gareth Moore  
Angela Starling  
Deputy John Tomlinson

**Officers:**

Natasha Dogra	- Town Clerk's Department
Chris Pelham	- Community and Children's Services
Farrah Hart	- Community and Children's Services
Lorna Corbin	- Community and Children's Services
Marion Willicome Lang	- Community and Children's Services
Maria Cheung	- Community and Children's Services
Tony Macklin	- Markets and Consumer Protection
Derek Read	- Built Environment
Greg Williams	- Public Relations Office

**1. APOLOGIES OF ABSENCE**

Apologies had been received from Simon Murrells, Sohail Bhatti and Penny Bevan.

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

There were none.

**3. MINUTES**

**RESOLVED:** That the minutes of the previous meeting be agreed as an accurate record.

*Matters Arising:*

The Policy Officer had discussed the issue of signage in the City with Officers in the Built Environment and was looking to progress a pilot scheme with support from the Barbican Estates Office and Museum of London, with a view to undertaking a long term audit of signage across the City.

#### 4. **GREEN SPACES: THE BENEFITS FOR LONDON**

The Board received the report of the Director of Open Spaces, informing Members that the Benefits for London' had been published by the City of London Economic Development Office and Public Relations Office. The report found compelling evidence that a range of benefits were delivered by green spaces. Members were informed that the Open Spaces department was undertaking a range of activities to maximise the benefits to Londoners of the green spaces.

Officers informed Members that surveys of visitors had been carried out at each site to increase understanding of who accesses the sites and for what purpose. From this work communities who did not access the sites had been identified and initiatives designed to encourage access. Recently the department had launched a social media strategy, promoting sites using social networking, including twitter accounts. This had aimed to reach groups of Londoners such as younger people and transient populations who did not visit open spaces as much as other groupings.

Officers informed Members that there were 200 small green spaces in the City which could be mapped to highlight areas that City residents and workers could enjoy. Officers also agreed to circulate the 'air quality' and 'quiet zones' reports which were considered by the Port Health and Environmental Services Committee in 2011.

Officers also agreed to investigate the possibility of commissioning a research project of PhD level to ascertain the difference green spaces make to stress and wellbeing, which the Director of Open Spaces would progress.

Members were concerned that the Board should be consulted on the Local Plan. The Plan would be out for consultation from mid-December to mid-February, and so would be added it to the agenda for the January Board meeting.

#### 5. **COMMUNICATIONS STRATEGY DISCUSSION**

The Board welcomed the Public Relations Officer to the meeting and considered a number of ways in which the Board could publicise the work currently being done by service areas to tackle health and wellbeing issues.

Board Members agreed that a strategy would act as a mechanism of broadcasting the work being undertaken by the City and the services available to residents and City workers which were currently not being utilised to their full potential. Members agreed that internal advertising of the Board was also needed to ensure that the Health and Wellbeing Board was consulted where necessary. Members agreed that a cross-directorate approach must be taken with the work of the Board so publicising their work remit would be a positive action.

Officers informed Members that there were a number of quick wins, such as publicising free flu jabs for workers in the City which could be progressed. Officers from PRO agreed to with Health and Wellbeing Officers to help deliver a number of quick wins over the upcoming months and report back to the Board in early 2014.

6. **HEALTH AND WELLBEING BOARD PERFORMANCE FRAMEWORK**

The Board received a report of the Public Health Commissioning and Performance Manager and noted that report set out the agreed local performance framework for the City's Health and Wellbeing Board, along with the current Key Performance Indicators (KPIs) for inclusion within the Department of Community and Children's Services Business Plan, which were agreed by the Board in May 2013.

Officers said that the KPIs currently in place were annual measures, which would not be reporting until April 2014; therefore it was proposed that some additional new measures were also put in place to be able to monitor the progress of the Health and Wellbeing agenda on a quarterly basis throughout the rest of the financial year.

The proposed indicators involve smoking cessation and exercise on referral. It was also proposed that the indicators in relation to workforce sickness absence within the Departmental Business Plan were removed. It was proposed that separate indicators on air quality are developed following the report to the Health and Wellbeing Board in January.

Members discussed looking at departments' performance indicators to identify indicators relevant to health. Officers were asked to prepare a report of indicators which may be considered by the Health and Wellbeing Board.

**RESOLVED:** Members noted the local performance framework and agreed that the draft performance framework be reconsidered by the Board at their meeting in January.

7. **HEALTH VISITING IN THE CITY OF LONDON**

The Board received the report of the Health and Wellbeing Policy Development Manager, which gave Members an overview of health visiting in the City of London. Members were informed that from April 2015, responsibility for commissioning health visiting services would transfer to local authorities. However, health visiting services were currently understaffed, and needed strengthening and expanding across London.

NHS England reviewed existing health visitor provision, to develop new models that better meet the needs of the 0-5 year old population nationally, and link more effectively with other 0-5 services. It also intended to tackle the shortfall in health visitor numbers, so that services could transfer to local authorities in a state where they did not require significant investment.

Officers said that there were currently 6 health visiting teams in City and Hackney, one for each of the 6 Children's centre geographical areas (A-F), with the City of London included in area E. There were 3 HV Leads who manage 2 health visiting skill mixed teams of 12-20 members of staff. Staff were based in general practices, health centres and Children's Centres. Allied services include children's services, general practitioners, safeguarding teams and midwives. Budgets for health visiting and cost per child is higher in City and Hackney compared with neighbouring areas.

**8. THE CARE QUALITY COMMISSION (CQC) UNANNOUNCED ROUTINE INSPECTION OF THE ADULT SOCIAL CARE REABLEMENT SERVICE**

The Board received the report of the Assistant Director of People which informed Members of the outcome of the recent Care Quality Commission (CQC) unannounced routine inspection of the Adult Social Care Reablement Service, which took place on 5 September 2013.

The Adult Social Care Service provided reablement services to residents of the City of London for up to six weeks following their discharge from hospital, so that people could become more independent. The service provided home-based support, involving domiciliary care, occupational therapy, physiotherapy, equipment, telecare and/or social work support. The CQC inspection addressed quality and safety of care against five overarching standards:

1. consent to care and treatment
2. care and welfare of people who use services
3. co-operating with other providers
4. staffing
5. complaints

The Reablement Service was found to meet the standard for each area without any additional conditions or requirements being placed upon the City of London by the CQC. Members congratulated Officers and thanked them for their hard work.

In response to a query from Members, Officers clarified that although notification had been sent about the routine inspection of the Adult Social Care Reablement Service it was not received until two weeks after the inspection had taken place. Officers had raised this matter with CQC.

**9. PROPOSAL TO SEEK FUNDING FROM NHS ENGLAND FOR TWO POSTS TO SUPPORT HEALTH AND SOCIAL CARE INTEGRATION.**

The Board received the report of the Assistant Director of People which provided Members with details of the proposal made to NHS England in respect of the City of London Section 256 allocation of £174,630 to fund two specific and specialist posts that support the interface between health and social care.

Members were informed that the proposal highlighted the funding available from NHS England and represented what was felt to be an innovative and creative means by which to establish two full time posts. Members noted that

these posts would benefit the frailest and most vulnerable City of London residents, registered with the Neaman Practice; Tower Hamlets; or Islington GP's, who were admitted via acute A & E admissions to the University College of London Hospital; The Royal London; and Mile End Hospitals.

The City and Hackney CCG Chief Officer and Programme Board Chair indicated that they were fully in support of this proposal. These posts would support discharge planning arrangements as well as working with partners to prevent and reduce the level of admissions. They would be part of the City of London Adult Social Care structure, although much of their time would be spent in the GP and hospital settings.

**RESOLVED:** Members gave approval for the development of the proposal to seek funding from NHS England for two posts to support health and social care integration.

#### 10. **HEALTH & WELLBEING UPDATE REPORT**

The Board received an update from the Executive Support Officer which provided Health and Wellbeing Board Members with an overview of key updates on the following subjects of interest to the Board:

- Inaugural London Health and Wellbeing Board Chairs' Network
- 20mph speed limit
- Health and Social Care Scrutiny Sub-Committee
- Substance Misuse Partnership update
- The Integration Transformation Fund
- London: a call to action

The Officer also provided Members with the following policy updates

- Healthwatch England annual report 2012/13
- Reducing health inequalities
- Care Bill
- Personal health budgets
- Developing a new adult social care offer
- Delivering better services for people with long-term conditions
- Financial case for a reasonable rebalancing of health and care resources
- Improving integrated care for people with mental health problems
- Smoking and mental health
- Social and emotional wellbeing for children and young people
- How healthy behaviour supports children's wellbeing
- Walking works
- Health 2020: a European policy framework and strategy for the 21st century
- Working longer: an EU perspective
- LGA briefings
- NHS Health checks
- A self-evaluation tool for health and wellbeing boards
- Directors of public health: role in local authorities
- Health & wellbeing boards: orchestrating the possibility for integrated care
- Assessing the transition to a more localist health system

- Health and wellbeing system improvement programme development tool

In response to a query from Members, Officers agreed that in future the update would include information on specific parts of the reports which would be of interest to Board Members.

**11. TERMS OF REFERENCE OF THE HEALTH AND WELLBEING BOARD**

The Board received the report of the Town Clerk which informed Members that as part of the post-implementation review of the changes made to the governance arrangements in 2011 it was agreed that all Committees should review their terms of reference annually. This would enable any proposed changes to be considered in time for the reappointment of Board by the Court of Common Council.

Board Members asked Officers to submit a report to the January meeting regarding Board membership and other organisations who could be consulted for their views on reports and research considered by the Board.

**RESOLVED:** That Members approved the terms of reference of the Board for submission to the Court.

**12. FUTURE MEETING DATES**

The Board Members discussed the following dates of future Board Meetings and Development Days, and were asked to send their availability to the Town Clerk by 13 November 2013:

- 31 January (BM)
- 21 February (DD)
- 1 April (BM)
- 2 May (DD)
- 30 May (BM)
- 18 June (DD)
- 18 July (BM)
- 10 September (DD)
- 30 September (BM)
- 28 November (BM)

**13. QUESTIONS ON MATTERS RELATING TO THE WORK OF THE BOARD**

A Board Member raised a query regarding resources of the Board and asked that the Policy Officer, in consultation with the Chamberlain and Director of Community and Children's Services, write a report regarding the budgets available to the Board. It was agreed that reports to be considered by Members which included expenditure should be scrutinised by the Chamberlain before submission to the Board.

**14. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

There was none.

**15. 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 as follows:-

**Items:**

**Paragraph**

16 - 17

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

There were none.

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

There was none.

**The meeting ended at 3.15pm**

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Chairman

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