HEALTH AND WELLBEING BOARD

Friday, 16 June 2017

Minutes of the meeting of the Health and Wellbeing Board held at on Friday, 16 June 2017 at 11.30 am

Present

Members:

Deputy Joyce Nash Jon Averns Andrew Carter Karina Dostalova Glyn Kyle Dr Gary Marlowe Randall Anderson Tom Anderson Jeremy Simons Matthew Bell

In Attendance

Paul Haigh

Officers:

Natasha Dogra – Town Clerk's Department Neal Hounsell – Community & Children's Services Department Farrah Hart – Community & Children's Service Department Marion Willicome-Lang – Community & Children's Service Department Sarah Greenwood – Community & Children's Service Department Poppy Middlemiss – Community & Children's Service Department

1. APOLOGIES OF ABSENCE

Apologies had been received from Simon Murrells, Andrew Carter and Dr Penny Bevan.

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

There were no declarations of interest.

3. **ORDER OF THE COURT OF COMMON COUNCIL** Resolved – that the Order of the Court of Common Council be received.

4. ELECTION OF CHAIRMAN

The Committee were invited to elect a Chairman in accordance with Standing Order 29. Deputy Joyce Nash was the only Member to express an interest in serving and was duly elected Chairman for the ensuing year.

Resolved – that Deputy Joyce Nash be appointed Chairman of the Board.

5. ELECTION OF DEPUTY CHAIRMAN.

The Committee were invited to elect a Deputy Chairman in accordance with Standing Order 30. Randall Anderson was the only Member to express an interest in serving and was duly elected Chairman for the ensuing year.

Resolved – that Randall Anderson be appointed Deputy Chairman of the Board.

6. MINUTES

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

7. DEPARTMENTAL BUSINESS PLAN: DEPARTMENT OF COMMUNITY AND CHILDREN'S SERVICES

Members were presented with the high level business plan for the Department of Community and Children's Services (DCCS) for the year 2017-18. A draft of this high-level plan was circulated to the Health and Wellbeing Board prior to the Common Council elections.

The new high level business plan for DCCS was approved at the Community and Children's Services Committee on 11 May 2017. It details refreshed departmental priorities and the key outcomes we are aiming to deliver for the period of the plan. The report also presented an early draft of the Corporate Plan 2018-23 to give Members an opportunity to provide informal feedback before wider consultation on the plan takes place in the autumn with staff, partners and other external stakeholders.

Resolved – that the plan be received.

8. JOINT HEALTH AND WELLBEING STRATEGY ACTION PLAN

The Board noted the development of the draft action plan which underpins the City of London Joint Health and Wellbeing Strategy. The draft action plan sets out how the City of London Health and Wellbeing Board will deliver the Joint Health and Wellbeing Strategy in order to improve the health of City residents, workers and rough sleepers, based on five priorities:

- Priority 1: Good mental health for all
- Priority 2: A healthy urban environment
- Priority 3: Effective health and social care integration
- Priority 4: Children have the best start in life
- Priority 5: Promoting healthy behaviours

Resolved – that Members of the Health and Wellbeing Board approve the Joint Health and Wellbeing Strategy Action Plan.

9. SOCIAL WELLBEING STRATEGY

Members noted a proposed Social Wellbeing Strategy for the City of London

Corporation. Tackling social isolation and loneliness has been identified as a priority in the DCCS Business Plan, in the City Corporation's Joint Health and Wellbeing Strategy and Mental Health Strategy and by the Adult Advisory Group. The Strategy recommends that the City Corporation should take a number of actions to reduce loneliness and improve social wellbeing. These are based on community research carried out by Dr Roger Green of Goldsmiths, University of London and recommendations made by the Social Wellbeing Panel.

Members noted that a recent report from Age UK found that one in three people aged 65 or over are lonely. This is an important public health issue. Loneliness leads directly to lower personal wellbeing and has a significant impact on physical and mental health, which in turn leads to earlier than expected health and social care needs. It can also mean that a person is more at risk of abuse or neglect.

In response to a query it was noted that the City Corporation already provides a number of services to tackle social isolation, including the Reach Out Network of groups for older people, carers and those with a diagnosis of dementia; a befriending service commissioned from Age Concern; and a range of classes, groups and events delivered through the libraries, Golden Lane Sport & Fitness Centre, the Adult Skills and Education Service, Spice Time Credits and the Neighbourhood Development team.

Resolved – that Members approve the proposed Social Wellbeing Strategy.

10. SUICIDE PREVENTION ACTION PLAN

Members were presented with the a refreshed version of 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.

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.

The City has three potential population groups who are at risk of committing suicide: residents who live in the City; those who work in the City; and those who travel to the City with the intention of committing suicide from a City site, but have no specific connection to the City.

In response to a query Members noted that some of the main additions to the refreshed joint action plan include the implementation of the street triage pilot, the inclusion of Street Pastors, the rollout of the 'Release The Pressure' campaign, cameras to be added to City of London bridges and an action focussing on migrant mental health. A monitoring template is to be developed by the Public Health Team to track the progress of the implementation of the action plan. A group consisting of those organisations leading on actions from the plan will meet every six months and a lead officer from each organisation

will be asked to give an update. An update report on the action plan progress with a review of suicide data in the City of London will be produced for the Health and Wellbeing Board annually.

Resolved – that the Board approve the Suicide Prevention Action Plan and agree to review the progress of the actions within the Suicide Prevention Action Plan annually.

11. BUSINESS HEALTHY STRATEGY

Members were presented with the Business Healthy Strategy, 2017-20. Business Healthy is an award-winning public health funded initiative that provides City employers with free support to promote better health and wellbeing among their staff, including events and signposting. Businesses are also encouraged to share best practice with each other. It also supports and promotes ongoing initiatives around health and wellbeing in the Square Mile, such as the Lord Mayor's Appeal's "This Is Me – In the City", the London Healthy Workplace Charter and work being undertaken by other teams in the City Corporation.

Resolved – that The Health and Wellbeing Board Members approve the Business Healthy Strategy and agreed to annually review the progress of the actions within the Business Healthy Action Plan (to be finalised in July 2017).

12. BETTER CARE FUND

The Board were informed that the Better Care Fund (BCF) plays a key role in the health and social care integration agenda and for the City of London funds a number of important initiatives such as the Care Navigator post which ensures that City of London residents have a safe and supported discharge from hospital.

In order to fit with the two year NHS planning process, the next round of the BCF is also for two years (2017-19). As the City of London Corporation moves forward with integrated commissioning, the BCF will be considered within the aims of this integrated approach. Publication of the technical guidance by the Department of Health and a submission date for the BCF is still awaited. The submission dates may sit outside of the cycle of Health and Wellbeing Board meetings and therefore this report seeks delegated authority for the sign off of the plan by the Chairman of the Health and Wellbeing Board, in conjunction with the Director of Community and Children's Services. This report sets out background information and a proposed outline of the plan for the City of London BCF in 2017-18.

Resolved – that the Board agreed to delegate authority to the Chairman of the Health and Wellbeing Board, in conjunction with the Director of Community and Children's Services, to sign off the BCF plans for submission if the timetable sits outside of the schedule for Health and Wellbeing Board meetings.

13. SEXUAL HEALTH TRANSFORMATION PROGRAMME GOVERNANCE

Members noted that the London Sexual Health Transformation Programme is supported by 28 London Boroughs and the City. This Programme is developing and delivering an ambitious new vision for the delivery of sexual health services in London. The City of London Corporation has already taken on the Lead Authority role for the new sexual health e-healthcare service for London. The City of London Corporation has now been formally requested to take on the governance of the London programme.

As part of its governance duties, the City will be required to recruit a Director of Sexual Health for London (0.5 FTE) and a Programme Support Officer (0.6FTE). It is acknowledged that hosting these roles should come at no extra cost to the City, and that the City's additional costs will be recuperated from the participating Boroughs.

Resolved – that the Board give approval for he City act as the governing body in delivering the pan-London Sexual Health Transformation Programme.

14. HEALTH AND WELLBEING UPDATE REPORT

Health and Wellbeing Board Members received an overview of local developments and policy issues related to the work of the Board and updates included were:

- Healthwatch report
- Air quality: Unnecessary vehicle engine idling
- Commissioning of sexual health services
- Pharmaceutical Needs Assessment
- Business Healthy Challenge
- Release the Pressure campaign
- Commissioning of childhood obesity services
- Late Night Levy and Safety Thirst scheme update
- East London Health & Care Partnership (NEL STP): Engagement activities
- City Gardens Management Plan 2017 2022 consultation
- Draft Construction Code of Practice consultation
- Bank On Safety experimental safety scheme
- Club Soda Mindful Drinking Guide to pubs and bars

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

In light of the tragic events at Grenfell Tower, Officers were asked whether significant fire inspections and risk assessments had been carried out on the City's housing estates. The Acting Director confirmed that these assessments had been carried out and a statement had been issued to all Housing Management staff and Estate residents. With particular regard to the risk of fire, we have undertaken and implemented a number of pro-active improvement measures including:

• Recently completed new Fire Risk Assessments on all of our housing stock;

• Carrying out regular reviews of Fire Risk Assessments to ensure they remain valid and 'fit for purpose';

• Carrying out monthly inspections of fire doors and other fire safety measures;

• Carry out regular estate inspections to ensure that any potential fire and other safety hazards are identified and removed;

• Giving our estate staff up to date training on fire risk management;

• Updated the design of our Fire Log Books and the information contained in them;

• Produced guidance notes on fire management plans and fire compartmentation that is applied to any refurbishment works carried out on our homes.

16. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT** The Board agreed that it would be timely to host a development day in the next few months and asked Officers to progress this.

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 HEALTH AND WELLBEING PERFORMANCE REPORT

The Board received a report of the Director of Community and Children's Services which presented the annual performance data for 2016/17 across a range of agreed key performance indicators.

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

There were no non-public 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 12:35pm

Chairman

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