

HEALTH AND WELLBEING BOARD

Friday, 22 September 2023

Minutes of the meeting of the Health and Wellbeing Board held at Committee Rooms - 2nd Floor West Wing, Guildhall on Friday, 22 September 2023 at 11.00 am

Present

Members:

Deputy Marianne Fredericks

Deputy Randall Anderson

Helen Fentimen

Matthew Bell

Mary Durcan (Chair)

Steve Stevenson – Healthwatch

Jonathan McShane – City and Hackney Place Based Partnership and Northeast London Integrated Care Board

In Attendance

Officers:

Chris Lovitt

- Community and Children's Services

Froeks Kamminga

- Community and Children's Services

Ellie Ward

- Community and Children's Services

Georgina Choak

- Community and Children's Services

Claire Giraud

- London Borough of Hackney

Emmanuel Ross

- London Borough of Hackney

Andrew Trathen

- London Borough of Hackney

Caroline Hay

- City of London Police

Kate Doidge

- Town Clerk's Department

Julie Mayer

- Town Clerk's Department

1. APOLOGIES FOR ABSENCE

Apologies were received from Nina Griffith, Gavin Stedman, and Judith Finlay.

Jonathan McShane attended on behalf of Nina Griffith.

Steve Stevenson attended on behalf of Healthwatch.

Ruby Sayed, Deputy Chair, observed the meeting virtually.

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

There were no declarations.

3. **MINUTES**

RESOLVED – That the minutes and non-public summary of the previous meeting held on 29 June 2023 be approved as a correct record.

4. **BETTER CARE FUND 2023-25**

The Board received a report of the Executive Director for Children's and Community Services to consider the Better Care Fund (BCF) plan for 2023-25.

RESOLVED – That Members approve the City of London Better Care Fund Plan 2023-25.

5. **APPOINTMENT OF CO-OPTEE'S UPDATE**

The Board heard a joint verbal report from the Town Clerk and Deputy Director of Public Health, providing an update on the appointment of co-optees.

The Board heard that three invitations had been sent to St Bartholomew's Hospital (St Bart's), East London NHS Foundation Trust (ELFT), and Homerton Healthcare NHS Foundation Trust (Homerton) to become co-opted members of the Board. A response had been received from Homerton. No response had been received from ELFT. St Bart's had enquired whether the Board wished for the member to be a representative of public health, or St Bart's Hospital. The Board were asked for guidance on whether the co-opted members be voting or non-voting. The Board also heard that under its current terms of reference, it could have up to two co-opted members, and were asked whether it wished to increase the number of co-opted members to three.

The Board agreed that it would prefer three co-opted members. It was noted that the Board were due to review its terms of reference at its next meeting and would agree to recommend increasing the number of co-opted members. It also agreed that the co-opted members should be voting members. Finally, it was agreed that the representative from St Bartholomew's Hospital should represent the hospital itself.

A Member of the Board suggested that membership of the Board should be expanded to include the business community, and suggested that officers investigate and contact City Mental Health Alliance.

6. **THE HEALTH AND WELLBEING OF THE CITY'S HIDDEN AND ESSENTIAL WORKERS**

The Board received a report of the Director of Public Health to consider resolutions for adoption by the City Corporation to support the health and wellbeing of the City's hidden and essential workforce, including two key recommendations for third party employment contracts relating to immediate sick pay (also known as Safe Sick Pay) and death in service benefits.

The Board heard that the resolutions had been received by the City Corporation's Senior Leadership Team (SLT) and the Chief Operating Officer. This was the direction provided when the report was previously received at the Board.

The Board agreed that the resolutions and a report should be received by the Corporate Services Committee, especially if there were any potential financial implications for adopting the resolutions. The cost needed to be properly considered prior to the resolutions being broadened out to other parties. The Board discussed that the implications could include the cost versus the benefit of improving health and wellbeing, including small studies and implementation plans. Once the resolutions were implemented as policy and the benefits demonstrated, the Board could consider broadening the resolutions to apply to other partners.

Members of the Board suggested sharing best practices with businesses within the City of London, including contacting CCLA.

RESOLVED –

- (i) That Members note the actions taken or planned since the last update to the Board.
- (ii) That Members agree to adopt the resolutions by the relevant committees of the City of London Corporation, and refer the resolutions to the Corporate Services Committee.

7. HEALTHWATCH CITY OF LONDON PROGRESS REPORT

The Board received a report of the Chair of Healthwatch, City of London, concerning the progress against contractual targets and the work of Healthwatch City of London (HWC_oL) with reference to Quarter 2 2023/24.

A Member enquired on the progress of signing the new contract with Healthwatch, the deadline being April 2024. The Board heard that Healthwatch had been extended for another year, at which point options would be appraised for future healthwatch providers. The Board agreed that it did not want to lose Healthwatch.

The Board heard that the overprescribing at the Portman Pharmacy was an unusual case. The Board heard that there had been new management at the pharmacy, and the system had been duplicating prescriptions. The incident had been resolved.

The Board heard from the representative of Healthwatch that resident engagement was difficult. For example, focus groups often had little resident attendance. Residents were encouraged to attend Healthwatch Board meetings as these were held in public. Resident engagement was often held via neighbourhood forums, but there were issues with access (such as time of day and location). There was a wish for wider integration and a move away from traditional engagement models, but there were few innovative models for resident engagement.

A Member of the Board noted the good feedback for the London Ambulance Service. The representative of Healthwatch noted that responses were quick for urgent medical emergencies, especially those in public places, but there were issues with slower response for non-life-threatening medical emergencies in private (such as residential) areas.

The Board heard that no funding had been provided to Hackney CVS. There was potential for a joint bid for grant funding, but this would be to develop the volunteer sector.

The Board thanked Healthwatch for the report, and especially thanked and recognised the work undertaken by the Chair of Healthwatch.

RESOLVED – That the report be received and its contents noted.

8. **SUICIDE PREVENTION IN THE CITY OF LONDON ANNUAL REPORT**

The Board received a report of the Director of Public Health, concerning an update on the suicide prevention action plan and data on suicides in the City of London.

The Board discussed the street triage operating hours. The hours would be reviewed 12 months following their implementation. The NHS are the lead commissioner so would make the decisions on changing the operating hours, if required.

A Member raised engaging with taxi companies for mental health and suicide prevention and expressed disappointment that Transport for London (TfL) had not responded. The Board heard that suicide alliance online training was promoted, and there were negotiations for suicide prevention to become mandatory training for taxi companies. Other partners were suggested for suicide prevention, such as business healthy, schools, and universities.

A Member queried the available facilities for watch patrols for suicide prevention. The response was that patrol volunteers could facilities at London Bridge station.

The Board noted that the City of London Police Authority Board had discussed the reduced involvement of police in mental health.

The Board expressed thanks for the report and the work undertaken as part of the suicide prevention action plan.

RESOLVED – That the report be received and its contents noted.

9. **MENTAL HEALTH SERVICES FOR PEOPLE WITH SEVERE MENTAL ILLNESS**

The Board received a report of the Director of Public Health, concerning how mental health services in the City of London were governed, delivered and integrated with other services, specifically those services for people with severe mental illness.

A Member enquired what types and the waiting times for therapies offered. The response was these would be followed up and confirmed.

A Member of the Board requested a follow-up from an issue of a response from Maudsley in relation to the Safeguarding Adults Review. The response was that this would be followed up after the Board meeting.

RESOLVED - That the report be received and its contents noted.

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

There were no public questions.

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

The following items of public urgent business were raised, as follows:

- Members heard that there were continuing discussions with community pharmacies for provision of season Covid-19 and flu vaccinations. The pharmacies would be confirmed in due course, and the vaccination offer promoted. This would include house-bound patients.
- There was one community pharmacy in the City of London not provided by Boots. There would be discussions with Boots to provide enhanced local services, as Boots were only providing national services.
- An update in the Pharmaceutical Needs Assessment would be received at the next meeting of the Board.
- The Board heard that a breakfast briefing session would be held for World AIDs Day. It would take place prior to World AIDs Day. The invitation would be extended to all members of the Court of Common Council and Hackney Council members.

12. **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.

13. **CITY OF LONDON SUICIDE AUDIT**

The Committee received a report of the Director of Public Health concerning the most recent audit for suicide in the City of London.

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

There was one non-public question.

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

There were no non-public items of urgent business.

The meeting ended at 12.33 pm

Chairman

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