

HEALTH AND WELLBEING BOARD

Friday, 13 September 2024

Minutes of the meeting of the Health and Wellbeing Board held at Committee Rooms - 2nd Floor West Wing, Guildhall on Friday, 13 September 2024 at 11.00 am

Present

Members:

Mary Durcan (Chair), Court of Common Council
Helen Fentimen OBE JP (Deputy Chair), Community and Children's Services (Chair)
Gail Beer, Healthwatch
Deputy Marianne Fredericks, Port Health and Environmental Services Committee Dr
Sandra Husbands, Director of Public Health
Matthew Bell, Policy & Resources Committee
Judith Finlay, Executive Director, Children's and Community Services Gavin Stedman,
Port Health and Public Protection Director

In Attendance

Officers:

Ellie Ward	- Community and Children's Services
Emmanuel Ross	- City and Hackney Public Health Service
Claire Giraud	- City and Hackney Public Health Service
Conor Melia	- City and Hackney Public Health Service
Jayne Taylor	- City and Hackney Public Health Service
Rhys Campbell	- Town Clerk's

1. APOLOGIES FOR ABSENCE

Apologies were received from Ceri Wilkins and Deputy Randall Anderson.

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

Deputy Marianne Fredericks declared that she was a Bridge Watch volunteer.

3. MINUTES

RESOLVED, that – the public minutes and non-public summary of the meeting held on 5 July 2024 were approved as an accurate record.

Matters arising

- An update was requested regarding the Neaman Practice, the Deputy Chair advised the Board that the practice was in the process of renegotiating their building lease.

4. **BETTER CARE FUND 2024-25**

The Board received a report from the Executive Director, Community and Children's Services in respect of The Better Care Fund (BCF) programme.

Officers advised the Board that the template listed in the report set out the allocation of funding for 2024-2025 noting that the amount of funding had increased, however money had been carried over from the Disabled Facilities Grant from the previous year. There were no major changes made to schemes outlined in the BCF, however there were several alterations made with a focus on hospital discharges. The Chair raised a question in relation to hospital discharges. Officers advised the Board that very good performances were shown in this area.

Regarding acute hospitals within the City's boundaries, Members were keen to know if there were any concerns surrounding demanding capacity and which parties were responsible for a patient's discharge. Officers confirmed that it was a joint effort involving both the City Corporation and the relevant hospital, however if a City resident needed ongoing social care following a discharge, then it would be City Corporation's responsibility to provide this. The Executive Director further advised the Board that it was a well-established protocol for acute hospitals to reach across boundaries to support patients.

In terms of placed-based partnerships, such as the City and Shoreditch Park neighbourhood, discussions had been held to identify what options were available to provide more services (such as SEND and Community Nursing) within the City boundaries since officers identified the difficulty for some City residents to travel long distances to receive such services. Feedback mechanisms within adult social care had strengthened and this provided opportunities for further improvement for service delivery.

The Chair raised a question in relation to carers and wanted to know if assistance was being provided to those who were registered as carers. Officers highlighted that although some carers mentioned within the census may choose not to take the option of support, the Carer's Service had recently been recommissioned for a further three years with their specification being to promote the services available to carers providing both support and advice in relation to carer's rights.

RESOLVED, that – Members of the Board approve the revised City of London Better Care Fund Plans 2024–25.

5. **POPULATION HEALTH HUB UPDATE & HEALTH INEQUALITIES FUNDING**

The Board received a report from the Head of Performance and Population Health, NHS NEL ICB in respect of the Population Health Hub Update & Health Inequalities Funding.

Following the Chair's query in relation to foot health, officers advised the Board that the Podiatry Team offered foot health services to patients who were house-bound, in an effort to fill an inequality gap, since it was identified that they could not access this service due to being house-bound.

The Deputy Chair raised a question regarding MATCH (eMbedding heAlth equiTy in City and Hackney). She cited the reduction in funding listed within the report with funding allocated for 2023-24 being £220,000 and asked officers if there was any expected impact because of this and whether there was any alternative funding available. Officers advised Members that they had scaled down the programme areas to test their approach when working with people in an effort to embed sustainable consideration of health equity. The five programme areas which had been identified in MATCH were maternity, cardiovascular disease, anti-racist commissioning, food poverty and women's health. It was confirmed that due to the reduction in funding, programme areas were to be scaled down and that funding allocated for 2023-24 was for the next three years with a suggestion that this may be made recurrent. The Director of Public Health also mentioned that there was a focus to transform the way services were delivered in an effort to be more equitable.

Members of the Board highlighted their concerns that the report was not City orientated. Officers advised the Board that a review of the MATCH project could be applied to the City, especially in terms of accessibility to services for City Residents.

RESOLVED, that – the report and its contents be noted.

6. HEALTHWATCH CITY OF LONDON PROGRESS REPORT

The Board received a report from the Chair, Healthwatch City of London which detailed the progress against contractual targets and the work of Healthwatch City of London (HWCoL) with reference to the end of Q1 2024/25, and July and early August 2024.

The Board heard that Healthwatch had submitted their business plan to the City Corporation. Some objectives had been changed but these changes remained in line with Healthwatch England. Upcoming meetings were expected with Common Councillors to figure how the objectives were going to be attained within the next three years and how assistance may be provided in the east of City with the ward of Aldgate being mentioned.

The annual survey commented on how successful Healthwatch had been and was complimentary regarding their interactions with stakeholders and those they worked with, however Chair, Healthwatch understood that this needed to be conveyed to City residents.

The Chair, Healthwatch City of London highlighted ongoing projects and was keen to work with the Board to broaden CPR training. A campaign for men's health strategy was expected with a meeting with NEL ICB planned to discuss how best to launch the campaign and hoped to have a launch event, engaging with different stakeholders, to develop a comprehensive approach to men's health. The digital apps project was near completion with a report being finalised whereas the access to sexual health services for non-city residents project had been completed. However, there was still work to be done in relation to the

neighbourhood's programme and its delivery with a need for all parties involved to be aligned with programme's objectives.

In relation to the Patient Participation Group, the ICB had announced that they were to restrict the number of texts sent to patients as a cost cutting measure. Although other methods of communication were being explored, such as email distribution, it was important for the ICB to be aware of those patients who struggle with connectivity issues. The Chair, Healthwatch City of London was keen to know what ICB had planned to manage this.

The Executive Director asked if Healthwatch had any intentions of developing engagement with children and young people. Whilst acknowledging that neither the resources nor population were available, it would be a collaborative effort involving other organisations to develop an engagement strategy for children and young people.

Members of the Board thanked the Chair, Healthwatch City of London and her team for the immense work undertaken so far.

RESOLVED, that – the report and its contents be noted.

7. SUICIDE PREVENTION ANNUAL UPDATE

The Board received a report of the Director of Public Health, concerning an update on the suicide prevention action plan and data on suicide incidents in the square mile.

A Member raised a concern in relation to the support scheme(s) offered to City of London Police (CoLP) officers and wanted to know whether more support could be offered to CoLP staff and officers. Having undertaken suicide prevention training she was keen for this to be rolled out to all CoLP officers and she also thanked the Bridge Watch patrols for their work, and encouraged those who were willing to volunteer. The Port Health and Public Protection Director further advised the Board that ongoing discussions with City Bridge Foundation were taking place to identify methods of improving bridge safety with a more reasonable approach to bridge barriers to be discussed.

A Member noted that International Suicide Prevention Day was a several days prior to this meeting and wanted to know what the City Corporation could do to raise further awareness and reduce the overall stigma surrounding suicide in the hope of identifying further ways of suicide prevention. The Director of Public Health informed the Board that suicide prevention remained a high priority as part of a comprehensive action plan and that information regarding suicide had been placed in public spaces such as the London bridges.

The Chair thanked officers and volunteers for their work in relation to suicide prevention.

RESOLVED, that – the report and its contents be noted.

8. TOBACCO CONTROL JSNA

The Board received a report and presentation which included a summary of the recently published Tobacco Needs Assessment for City and Hackney, the local response to the evidence and intelligence and an overview of the newly re-commissioned City & Hackney stop smoking service, including new funding streams. The report set out a series of recommendations for Board Members to consider.

The Deputy Chair raised her concerns surrounding vaping and this was echoed by fellow Members of Board. Since the Board were aware of the potential central government plan to ban smoking in public spaces, Members were curious to know whether action could be taken locally by the City Corporation within its remit. The Deputy Chair was in favour of the City Corporation signing up to a smoke-free charter and Members of the Board were also keen to explore further funding to bring up further initiatives to help people stop smoking.

Officers advised the Board that voluntary smoking bans in public spaces had been attempted in the London Borough of Hackney, however there was an issue when it came to enforcement. Opportunities for smoke free pavement licences existed since there was legislation available to do this and signing up to the local government declaration would be the initial step in doing so. Members of the Board were in favour of receiving further information on this to see what the City Corporation could do in relation to its smoke-free commitments.

The cost of cigarettes was highlighted and it was suggested that focus could be shifted towards this in an attempt to stop people from starting smoking. Officers reminded the Board of the addictive nature of nicotine which meant that highlighting the cost of tobacco would not necessarily deter smokers. However, there were a number of tobacco free groups (some with NHS funding) where any smoker could access support, and officers wanted to ensure that these pathways remained opened to those willing to quit smoking. Officers acknowledged that although evidence had shown e-cigarettes as an effective way to stop smoking tobacco a range of options were provided to those willing to quit smoking and this included vapes. However, apart from people already smoking tobacco, it was strongly advised to discourage people from vaping since vaping was not risk-free.

The sale of illegal cigarettes was raised as a further concern. The Port Health and Public Protection Director updated the Board regarding a recent prosecution of an individual selling illegal tobacco and vapes. The press release was circulated to Members after the meeting.

RESOLVED, that – the Health and Wellbeing Board endorse the recommendations listed within the report which include a joint City & Hackney partnership commitment to reduce the harms from tobacco.

9. ANNUAL REVIEW OF THE TERMS OF REFERENCE OF THE HEALTH AND WELLBEING BOARD

The Chair recommended that the number of co-opted Members on the Board should be extended from two Members to three Members.

The Town Clerk confirmed that there were outstanding vacancies for two co-opted Members and the NHS representatives listed within the constitution were external Members and not co-opted Members.

The Deputy Chair asked for further clarification within the Terms of Reference to ensure that it clearly stated who were the external Members and who were the co-opted Members since the wording was misleading. Officers highlighted that recent work from the Local Government Association could be used as feedback when drafting an updated version of the Board's Terms of Reference.

RESOLVED, that – the Town Clerk clarify the Membership listed in the constitution, extend the number of co-opted Members to three and to return to the Health and Wellbeing Board with a revised wording of its Terms of Reference for approval.

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

There were no questions.

11. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

There were no urgent items of business.

12. 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.

13. NON PUBLIC MINUTES

RESOLVED, that – the non-public minutes from the previous meeting held on 5 July be approved as an accurate record.

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

There were no non-public questions.

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

There no non-public urgent items of business.

The meeting ended at 12:48pm.

Chairman

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