HEALTH AND WELLBEING BOARD

Friday, 7 February 2025

Minutes of the meeting of the Health and Wellbeing Board held at Committee Rooms - 2nd Floor West Wing, Guildhall on Friday, 7 February 2025 at 11.00 am

Present

Members:

Mary Durcan (Chairman)

Helen Fentimen OBE JP (Deputy Chairman)

Gail Beer

Deputy Marianne Fredericks

Dr Sandra Husbands

Gavin Stedman

Deputy Randall Anderson

Matthew Bell

Judith Finlay

Deputy Ceri Wilkins

Dr Stephanie Coughlin

In Attendance

Ike Kanya – Public Health Project Manager, Hackney Council

Officers:

Ellie Ward
Froeks Kamminga
Sarah Lawson
Swati Vyas
Hannah Dobbin
Community and Children's Services
Community and Children's Services
Community and Children's Services
Community and Children's Services

Shetal Parmar - Bart's Health NHS Trust

Sarah Latham - Homerton Healthcare NHS Foundation Trust

Carolyn Sharpe - City and Hackney Ratidzo Chinyuku - City and Hackney

Preet Desai - Town Clerk's Department Rhys Campbell - Town Clerk's Department

Deborah Bell - Strategic Education & Skills Director

Emmanuel Ross - City and Hackney

1. APOLOGIES FOR ABSENCE

There were no apologies.

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

There were no declarations.

3. MINUTES

RESOLVED, that – the public minutes and non-public summary of the previous meeting held on 15 November 2024 were approved as a correct record.

4. HEALTH AND WELLBEING BOARD DEVELOPMENT

The Board received a joint report of The Executive Director of Community and Children's Services and the Director of Public Health in respect of the proposed way forward for the development of the City of London Health and Wellbeing Board.

Officers advised the Board that work had been undertaken in coordination with the Local Government Assembly (LGA) and the Health and Wellbeing Board would focus more closely on addressing health inequalities, improving health and wellbeing of the local population, improving mental health, improving financial resilience and tackling social isolation. It was identified that these issues required a partnership approach rather than a single-agency approach.

Although there was a clear co-relationship with the Health and Social Care Scrutiny Committee and its role being to scrutinize health and social care services, the Board was reminded that its role as a partnership was to tackle health inequalities and improving health and wellbeing.

The Deputy Chair wanted officers to provide clarity on links between the Health and Wellbeing Board from the Health and Social Care Scrutiny Committee and how the Health and All policies would be implemented. Officers advised that they would assess these policies and update the Board at a future meeting.

A Member highlighted to the Board that the functions of the Board remained an integral part of the Corporate Strategy as well as community strategies. She encouraged more City of London Boards and Committees to be aware of the Board's work to help deliver its objectives. The Executive Director, Community and Children's Services agreed with this and advised that within some committee reports a health and wellbeing section existed and it was here that the work of the Health and Wellbeing Board could be included.

RESOLVED, that – Members approved the proposed way forward for the Board.

5. ANNUAL REVIEW OF THE HEALTH AND WELLBEING BOARD'S TERMS OF REFERENCE

The Board received a report of the Town Clerk in respect of the Annual Review of the Health and Wellbeing Board's Terms of Reference.

The Deputy Chair believed that there should be more consideration from the Board on how to become more open and inclusive to members of the public. More public engagement was recommended and the Board discussed how best

to do this such as allowing members of the public to attend meetings and put forward questions in advance. A Member agreed and asked if it was possible to have two informal meetings of the Health and Wellbeing Board where members of the public and stakeholders could attend with the view that this would help feed it relevant work streams.

A recommendation was also made which would involve moving the venue of a Health and Wellbeing Board meeting to an area where the Board may be able to engage with service users on an informal basis. The Executive Director acknowledged that she had seen this work well in other areas but given the size of the City population and the existence of City Question Time, she advocated a 'subset' of City Question Time to focus on specific issues relating to the work of the Board. The Chair agreed that these ideas could be implemented to facilitate public engagement, and it was agreed that authority would be delegated to the Town Clerk, in consultation with the Chair and Deputy Chair, to approve these recommendations.

RESOLVED, that – Members agreed to delegate authority to the Town Clerk, in consultation with the Chair and Deputy Chair of the Health and Wellbeing Board, to incorporate these changes regarding public engagement into the Board's Terms of Reference.

6. ANNUAL DIRECTOR OF PUBLIC HEALTH REPORT

The Board received a report of the Director of Public Health in respect of the Annual Director of Public Health Report.

Officers asked the Board to consider ways in which the recommendations listed within the report could be implemented across the partnership and suggestions of potential stakeholders who'd consider getting involved in the subject matter 'Health Weight'. The Board was reminded of Social Capital and its relationship with health and the data within the report highlighted there was a strong foundation to build on in City and Hackney. The report recommended an evaluation of community engagement, open spaces and the supporting of the voluntary and community sector.

A focus on healthy weight was expected in the next report submitted to Board since it was a priority at both the local and national level. Locally, a needs assessment had been published which highlighted the scale of obesity across the City and Hackney with two in five children leaving school above a healthy weight. Officers intended to create a whole system's approach with a particular focus on food environment, as well a whole life approach from pre-conception into older age.

A Member asked for further details regarding the Community Infrastructure Levy Neighbourhood Fund (CILNF) and its application process. Officers advised that the City Corporation could not access the fund directly but instead would be able to work with the community and voluntary sector to enable them to make the best use of the CILNF. Work with Hackney Council on a project named CVS Squared had already been conducted which sought to identify projects conducted by

voluntary sector organisations within the City. A Member, having worked with CVS squared, informed the Board that he had assisted in securing three spaces allocated for voluntary work, with help from livery companies and local organisations, and given that the voluntary sector was seeking more spaces to conduct their work he wondered if the Board could provide a single space which could be used for voluntary sector work purposes. Officers advised that the City Corporation would need to determine what type of space could be made available but agreed to investigate further. However, officers did suggest pop up spaces in different parts of the City as a potential idea. Members were aware of several planning applications in community spaces and believed that planning developers could be approached to provide such a space and work could be done with developers to advise them of local voluntary groups and to encourage the need for voluntary workspaces when submitting a planning application.

A Member advised the Board that there were livery companies which could be approached who would assist in offering spaces and agreed to share further information with DCCS. It was suggested that the Chair of the Livery Committee should be contacted also.

On the issue of open space, a Member highlighted to the Board that the Planning and Transportation Committee were delivering roof gardens and pocket parks and identified the need to maximise what space was available to help improve health and wellbeing in the City and Hackney. Officers advised that when community-led needs assessments are undertaken, communities would be questioned on how they would like to use the space.

The Deputy Chair asked officers to take responsibility for coordinating an action plan and reporting back to the Board. The Director of Public Health agreed to take responsibility of an action plan arising from the Social Capital report but not for mapping out all community spaces, however it was agreed that the latter would require more time and identifying voluntary sector groups seeking space within the City should be prioritised which DCCS agreed to undertake.

The Director of Public Health thanked Delani Harath and Tony Blisset for their work undertaken on this report.

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

7. NEL MATERNITY & NEONATAL DEMAND AND CAPACITY

The Board received a joint report of the Associate Director of Midwifery Newham University Hospital and Director of Midwifery & Lead for Neonatal Nursing, Homerton Healthcare NHS Foundation Trust in respect of the Northeast London (NEL) Maternity & Neonatal Demand & Capacity Case for Change.

Members were advised that report sought to increase pathways within services across the Northeast London sector, most notably preconception, and this involved education for women and families prior to pregnancy to encourage conversations surrounding health outcomes for BAME women and the inequalities which existed across local authorities. It was identified that the local

population around East London had varying complexities and this was increasing year on year, particularly in Northeast London there were a large amount of mothers with diabetes and cardiovascular issues. Pathways were being used to support these women and understand their health inequalities, and work was being done to ensure that the delivery of healthcare services could be understood in a variety of languages. The Maternity Women Voice Partnership Lead assisted with this in terms of feedback from women to ensure services were continuously improved.

A trend was identified in which poorer outcomes existed for BAME women and the NEL Trust would provide them with personalised care plans pertinent to their health which aimed to support these women through their pregnancy. Educational classes for all women were also being held. Officers informed the Board that there had been a rise in the percentage of induced labours within London which consequently caused caesarean section rates to increase which added to the complexities and recovery period for women.

The Deputy Chair highlighted the lack of mentioning of fathers and birthing partners within the report and asked officers to provide further information on this. Officers noted this comment and advised the Board that all fathers and birthing partners were welcome to educational learning sessions and participate at workshops.

A discussion about digital platforms was held and officers informed the Board that the development of a digital platform for mothers and birthing partners was being considered.

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

8. PUBLIC HEALTH CONTRACTS

The Board received a report of the Director of Public Health for the City and Hackney in respect of the use of the City of London ring-fenced public health grant and the current arrangements under the present combined Service Level Agreement (SLA) between the City of London Corporation (the City Corporation) and the London Borough of Hackney (LBH).

The Director of Public Health provided an update on public health contracts, explaining the allocation of funds in City and Hackney and the impact of reductions on services such as the Falls Clinic and the Mental Health Wellbeing Network. During the discussion Members were informed that at the time of writing the grant allocation for 2025/26 had been announced and an uplift of £127,000 was confirmed. It was identified that there were potential savings from the Hackney grant which were being redistributed to other areas of the council in relation to health and policies work.

Regarding the continuation of the Falls Clinic, the Director explained to the Board that negotiations with the service provider had taken place and they would be no longer able to continue the service if their funding was reduced but options for alternative funding, as an interim measure, were being sought whilst the falls

pathway review was being conducted. It was confirmed that the service would continue until the end of March 2025 but additional funding would need to be secured to maintain the service beyond this date.

In respect of the Mental Wellbeing Network, the Board were advised that the reduction in funding for the network would primarily affect therapy services, and request for the NHS to take further responsibility. The supportive social elements of the network would continue and access to all available programmes for City residents would still be available. The Chair asked if there were any other areas in which the NHS should be providing funding and the Director explained that whilst not all were a result of a legacy of transfer from the NHS in 2013/14, such as the falls clinic, the network did not fall into this category and services in NEL were not providing funding for services which the NHS were responsible for. A Member acknowledged that large cuts to therapy services in the NHS had occurred and if there was no funding secured then there would be no therapy services, however the Director explained that the conditions of the public health grant would not allow for funding of services which were the responsibility of the NHS and not City and Hackney. The Deputy Chair raised a concern regarding overall mental health services and its source funding, and advised that further work regarding mental health needed to be undertaken which included businesses contribution in supporting their employees' mental health.

A concern was raised regarding ELFT and if any assistance could be provided however the Director explained that funding remained the outstanding issue and mental health wellbeing was not adequately funded despite the increase in mental health issues, and the service hadn't been expanded to meet this need. However, improvements within the current envelope could be sought.

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

9. CITY AND HACKNEY IMMUNISATIONS STRATEGIC ACTION PLAN (2024-2027)

The Board received a report of the Director of Public Health in respect of City and Hackney Immunisations Strategic Action Plan (2024-2027).

Officers advised the Board of their concern of declining trend in immunisation coverage nationally and locally and had developed a strategic action plan to improve immunisation coverage across all populations with a focus on reducing inequalities in populations that were expected to have lower uptake. The strategic objectives of this plan were to reach high-risk groups with vaccinations in community spaces, co-create resources and campaigns with local communities using better data to plan and deliver services, making sure services were efficient and evidence-based and training staff to ensure that at every interaction there was an opportunity to promote vaccinations. The lack of granular level of data and the uncertainty regarding devolved commissioning arrangements for immunisations, as well as funding, were identified as a potential risks to this plan.

Members were made aware that the Covid and Flu data had not gone through to the Neaman Practice or Richmond Road so it appeared that there was a lower rate of Covid and Flu immunisations since many individuals were vaccinated outside of Richmond Road. Better advertisements of viruses were encouraged as well as ensuring that NHS staff delivering healthcare were well informed about the importance of vaccinations.

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

10. ANNUAL REPORT ON IMPLEMENTATION OF THE CITY & HACKNEY SEXUAL AND REPRODUCTIVE HEALTH STRATEGY AND ACTION PLAN

The Board received a report of the Director of Public Health in respect of the annual update on implementation of the City and Hackney Sexual and Reproductive Health strategy adopted by the board in February 2024.

Officers advised that an easy-read version of the strategy was to me made available to the public after review and this was presented this to the Board for further feedback. The overarching initiatives had been a communications campaign and there had been substantial efforts made in regards to men's sexual health, in particularly heterosexual men's sexual health, and a positive sex campaign had been instigated to identify areas of engagement such as beer mats and posters that could be distributed to pubs, bars and places of sport.

Delivery plans were drafted in response to the action plan and engagement with young people had been listed as an area of focus. Officers advised the Board that Health Spot had opened in September 2024 and there was clinic available for young people and engagement with neighbourhood programmes had also taken place. Self-referral for long-term contraception was available in some places and work with the Super Youth Hub in relation to the condom distribution scheme had continued. Regarding HIV, the participation of an opt out HIV testing in health checks within City and Hackney practices had taken place. A toolkit had been prepared which could be shared with other practices to increase the offer of HIV testing in their own local authorities.

Officers highlighted the work of Healthwatch and Hackney with steps users, formerly rough sleepers, in which they were asking for their priorities in relation to healthcare priorities and their preferred method of communication.

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

11. THE SEND NEEDS ASSESSMENT AND THE SEND AND ALTERNATIVE PROVISION STRATEGY

The Board received a Joint Report of The Director of Community and Children's Services and The Director of Public Health in respect of key findings and recommendations of the City and Hackney Health Needs Assessment (HNA) for Children and Young People with SEND 2024, and the SEND and Alternative Provision Strategy 2025-29 for information.

In relation to key findings and recommendations of the City and Hackney Health Needs Assessment (HNA) officers highlighted to the Board that in addition to data and qualitative insights key areas of recommendations had been noted such as communication information and advice diagnosis early intervention, access to services, addressing inequalities, data and records and social determinants of health.

In respect of the SEND and Alternative Provision Strategy 2025-29, an easy-read version had been produced along with an action plan, equality impact assessment and a summary of engagement and consultation.

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

12. HEALTHWATCH CITY OF LONDON PROGRESS REPORT

The Board received a report of Healthwatch, City of London in respect of the Healthwatch City of London Progress Report.

The Chair, Healthwatch highlighted the Digi Apps report which was being launched imminently and that NHS healthcare apps used within the City were being reviewed and officers were concerned about digital exclusion and recommended that further investigation, particularly across Northeast London, into how digital apps could be more accessible and user-friendly should be considered.

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

13. FINALISED CITY OF LONDON AIR QUALITY STRATEGY 2025-2030

The Board received a report of the Executive Director, Environment in respect of the Finalised City of London Air Quality Strategy 2025-2030.

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

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

There were no questions.

15. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

The Chair thanked officers and Members of the Board for all their work in support of the Health and Wellbeing Board.

Members of the Board thanked the Chair for her work undertaken as Chair of the Health and Wellbeing Board.

16. EXCLUSION OF PUBLIC

17. NON PUBLIC MINUTES

RESOLVED, that – the non- public minutes of the previous meeting held on 15 November 2024 were approved as a correct record.

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

There were no non-public questions.

19. 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 urgent items of business.

The meeting ende	d at 12.50 pm		
Chairman			

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