

Decisions of the Health & Wellbeing Board

10 November 2016

Board Members:-

*Cllr Helena Hart (Chairman)

*Dr Debbie Frost (Vice-Chairman)

* Dr Charlotte Benjamin
* Cathy Gritzner
* Dr Andrew Howe
Cllr Sachin Rajput

* Chris Munday
* Dr Clare Stephens
* Cllr Reuben Thompstone
Ceri Jacob

* Dawn Wakeling
* Michael Rich
* Chris Miller

Substitute Member(s):

* Councillor David Longstaff

* denotes Member Present

1. **MINUTES OF THE PREVIOUS MEETING (Agenda Item 1):**

Councillor Helena Hart, Chairman of the Health and Wellbeing Board welcomed all attendees to the meeting. She noted that the actions arising from the previous meeting had been taken forward under this agenda.

Subject to the correction that the agreed recommendations be listed under the relevant agenda item, number 7 (CAMHS Transformation) which was corrected on the website, the Board **RESOLVED that the minutes of the previous meeting held on 15th September 2016 be agreed as a correct record.**

2. **ABSENCE OF MEMBERS (Agenda Item 2):**

Apologies for absence were received from Councillor Sachin Rajput who was substituted by Councillor David Longstaff. Apologies for absence were also received from Ms Ceri Jacob (NHS England).

3. **DECLARATION OF MEMBERS' INTERESTS (Agenda Item 3):**

Dr Debbie Frost, Vice-Chairman of the Board and Chair of Barnet CCG made a joint declaration on behalf of CCG Board Members, Dr Clare Stephens and Dr Charlotte Benjamin and herself, in relation to agenda items 8 and 11 by virtue of offering immunisation services to children and a general connection with care homes through their respective GP practices.

Ms Cathy Gritzner made a declaration in relation to agenda item 7 by virtue of being the Senior Responsible Officer in connection with the North Central London Sustainability and Transformation Plan for Barnet Clinical Commissioning Group.

Councillor Helena Hart declared a non-pecuniary interest in relation to agenda item 7 by virtue of her son being a Consultant at the Royal Free Hospital which in future could be affected by any changes.

4. REPORT OF THE MONITORING OFFICER (IF ANY) (Agenda Item 4):

None.

5. PUBLIC QUESTIONS AND COMMENTS (IF ANY) (Agenda Item 5):

None were received.

6. JOINT HEALTH AND WELLBEING STRATEGY IMPLEMENTATION PLAN (2015 - 2020) ANNUAL REPORT (Agenda Item 6):

The Chairman introduced the annual report on the Joint Health and Wellbeing Strategy Implementation Plan (2015-2020). She stated that the JHWBS together with the shared priorities were agreed by the Health and Wellbeing Board in November 2015.

The Chairman also noted that at each meeting the Board has received progress reports on the delivery of the actions set out in the Implementation Plan which have been taken forward by partners. The Board had previously agreed to receive an annual update report each November on the progress against the Strategy.

The Chairman also welcomed the Barnet Health Profile for 2016 which taken together with the annual Joint HWB Strategy report provides an ideal opportunity to refine and agree the Joint HWB Priorities for the coming year.

Ms Dawn Wakeling, the Commissioning Director for Adults and Health briefed the Board about the revised areas of focus, priorities and the progress made against the delivery of the Strategy.

In relation to the Health Profile for Barnet, Ms Wakeling noted that the areas of concerns will be taken forward through discussions and actions with partners. The Chairman, whilst recognising the areas which have improved, raised concerns over childhood obesity, TB and STI levels as well as a reported increase in violent crime.

The Director for Public Health, Dr Andrew Howe, informed the Board that TB incidents have decreased over the past 12 months for Barnet and London overall and that significant progress has been made in relation to the way TB is being addressed. Initiatives include further TB testing in Barnet and across NCL, particularly with high risk groups. Dr Howe noted that efforts will continue to progress and that the direction of travel is positive.

With regard to STIs, Dr Howe informed the Board about how the work towards a new service is progressing. The new service offer includes self-test kits in order to improve take up of services.

With regards to the increase in violent crime, Mr Chris Munday, the Commissioning Director for Children and Young People, stated that Barnet remains one of the safest boroughs in London. Mr Munday went on, however, to raise concerns over the increase in serious youth crime and patterns of gang activity which have prompted a different way of working.

Councillor David Longstaff, Chairman of the Community Leadership Committee and Safer Communities Partnership Board, informed the Board that the way in which violent crime is reported has changed since last year. As a result of the different reporting procedure there has been a significant increase in numbers. The figures have been stabilising and gradually decreasing for Barnet. There remains an issue with gang activity and crime in Barnet but relative to other boroughs this is to a lesser extent. It was also noted that this is being tackled through partnership working.

Councillor Reuben Thompstone, Lead Member for Children's Services and Dr Debbie Frost, welcomed the report and also raised issues about the inequalities in life expectancies for Barnet. In connection with this issue, Dr Howe noted concerns over the decreased level of referrals for screening and uptake of preventative services.

The Commissioning Director for Adults and Health welcomed the discussion and suggested it would be appropriate to include an item on the Board's Forward Work Programme on life expectancies. The item would centre around trends with a focus on identifying ways to address inequality in life expectancy. **(Action: FWP)**

The Chairman thanked the Board for the discussion. It was **RESOLVED:**

1. **That the Health and Wellbeing Board had noted and commented as above on the analysis of Barnet's Health profile for 2015 and 2016.**
2. **That the Health and Wellbeing Board had noted and commented as above on progress and performance to deliver the Joint Health and Wellbeing Strategy (2015-2020).**
3. **That the Health and Wellbeing Board had commented as above and agreed the revised areas of priority for the year 2016-2017 (section 1.5 of the report).**
4. **That the Health and Wellbeing Board had agreed to receive progress reports, covering the implementation of the JHWB Strategy, at every other meeting with an annual report in November.**

7. NORTH CENTRAL LONDON SUSTAINABILITY AND TRANSFORMATION PLAN UPDATE (Agenda Item 7):

The Leader, Councillor Richard Cornelius, joined the table for this item. The Chairman invited the Commissioning Director for Adults and Health to introduce the NCL STP update report. Ms Wakeling introduced the report and noted that it will also be considered by the Policy & Resources Committee. It was noted that CCG were not able to comment on the STP item until further notice from NHSE.

The Chairman noted that across London and nationally, other health and care systems have been working to produce a Sustainability and Transformation Plan (STP), showing how it is hoped that local services will become sustainable over the next five years. The Board received an update report in July and September 2016 and the NCL STP was submitted to NHS England on 21 October 2016.

The Board noted the guiding principles as set out on page 21 of the supplemental report, which are designed to support the vision for Barnet as a place with the best possible health and wellbeing.

The Chairman expressed several serious concerns, particularly over the absence of sufficient future financial investment into social care, and the lack of engagement with elected Members and residents in the formulation of the plans. She stated that crucial to the success of these plans – especially in relation to providing care outside of hospital and care closer to home – is that there is proper and adequate investment in social care and that all the extra costs of this provision is not heaped upon already overstretched Local Authority budgets. She also drew attention to the fact that while Prevention was mentioned as one of the guiding principles, there was nothing about maintaining and essentially increasing financial investment into it.

The Chairman highlighted the need to ensure that where any service changes are proposed, the existing services will remain, until their replacements are up and running safely and efficiently. She also noted the importance of ensuring that any new commissioning and delivery models are commissioned on the basis of proven clinical and safety need.

Mr Michael Rich, Head of Barnet Healthwatch, highlighted the importance for an engagement plan with service users and patients. He also suggested that partners continue to promote the importance of wider engagement as part of the STP development. Councillor David Longstaff also expressed the need for a clear programme of engagement to inform any future proposals.

Ms Wakeling commented on the assurance process and publication timeline, which is due to be confirmed. Ms Wakeling noted that once confirmed, further information will be disseminated to Board Members.

Councillor Graham Old, Vice-Chairman of the Health Overview and Scrutiny Committee informed attendees about the two special JHOSC meetings scheduled on Friday 9 December 9.30am-12.30pm and Wednesday 14 December 5pm-7.30pm at Camden Town Hall which will focus on the NCL STP.

In relation to Children' Services, Mr Munday noted that the STP should take into account factors such as housing and education. Mr Munday also queried whether the Thrive Programme was going to be implemented as part of the approach.

The Independent Chairman of the SAB and CSB, Mr Chris Miller noted the importance of the wider strategic overview of the plans and how the proposals potentially relate and impact on other partnership structures.

It was **RESOLVED:**

- 1. That the Health and Wellbeing Board had noted and commented as above on the North Central London Sustainability and Transformation Plan.**
- 2. That the Health and Wellbeing Board had noted that the document has been published on the Council's website and residents will be able to comment via the Consultation Hub on Engage Barnet.**

8. UPDATE ON CHILDHOOD IMMUNISATIONS 0-5 YEARS (Agenda Item 8):

For this item, the Chairman invited Catherine Heffernan - Principal Advisor Public Health England, Amanda Goulden - Population Health Practitioner Manager NHS England and Natalia Clifford - Senior Consultant in Public Health to the table.

Following discussions at the Board meetings in May and July, the Chairman welcomed the update report on Childhood Immunisations which has been a matter of concern to the Board and an area of particular importance - as set out in the JHWP Strategy - due to continual reporting of low immunisation rates.

Dr Debbie Frost welcomed the update and informed the Board that significant work has been carried out by GP practices to input data. She requested that assurances are provided that the updated information will be incorporated into the data system. Ms Heffernan noted the contributions made to the data system. She also stated that in partnership with practices, reminders will be escalated to parents about immunisation.

Dr Clare Stephens raised a query about reminders for immunisation for teenagers and adolescents. Ms Heffernan stated that similar technique is adopted as that for children and that the 3-in-1 teenage booster vaccine is utilised.

The Commissioning Director for Children and Young People, Mr Chris Munday asked why the immunisation rates for Barnet were lower than national average rates and stated that this puts Barnet at risk if levels required for herd immunity are not being met.

Ms Heffernan noted that immunisation rates as a percentage would be difficult to influence on a short term basis due to the large population in Barnet. Ms Heffernan stated that it was difficult to say if Barnet was below the herd immunity. This was due to the denominator showing that there were more children to vaccinate than the number of children actually living in Barnet. Ms Heffernan also noted that children move in from other areas. Ms Heffernan stated that if Barnet was under herd immunity there would be more outbreaks. She further stated that going forward, utilising NHS Digital platform could provide a more accurate overview in terms of immunisation rates.

The targets in the action plan were brought to the attention of the Board by Mr Munday who requested that these be updated following visits to GP practices. Ms Heffernan welcomed the comment and noted that the action will be updated. Dr Charlotte Benjamin briefed the Board about the community team who provide other vaccination services from a community base - she also queried whether data from other settings was taken into account.

Ms Dawn Wakeling, Commissioning Director for Adults and Health, expressed serious concerns over the lack of clear evidenced assurances over immunisation rates and noted that the lack of an outbreak would not constitute sufficient assurance. Ms Wakeling raised a query about the timeline to resolving the data reporting issues and complexities that have been on going.

Ms Heffernan noted that the technology used for data reporting is outdated and that it is gradually but slowly being updated to reflect a full picture of actual rates. She also noted that work is on-going to remind and encourage parents to come back at certain stages for vaccinations.

In relation to a query from the Chairman about reminders - Ms Heffernan stated that in order to address this issue various streams of work will be carried out through partnership working with NHSE regional and Public Health, London Councils and other partners.

Dr Stephens highlighted the importance of utilising communication channels such as smart phones and digital communication technology.

Councillor Reuben Thompstone noted the need for a further update on the matter to be brought to the Board's attention in due course. Ms Amanda Gouldon noted that sourcing the root problems of the data reporting issues may take time and that going forward there will be a great deal of focus on updating and implementing the action plan.

The Chairman welcomed the comments and highlighted the need for accurate data on actual immunisation uptake and importance of communicating reminders to parents.

It was **RESOLVED:**

1. **That the Health and Wellbeing Board had noted the work done by NHS England, since the HWBB in July on childhood immunisation in Barnet.**
2. **That the HWBB had noted that the levels of coverage of childhood immunisations in Barnet are comparable to London although noting that this is below the threshold for herd immunity and requests a further action plan from NHS England in six months.**

9. BARNET SAFEGUARDING CHILDREN BOARD (BSCB) AND SAFEGUARDING ADULTS BOARD (SAB) ANNUAL REPORTS (Agenda Item 9):

The Chairman introduced the BSCB and SAB annual reports and welcomed Mr Chris Miller, Chairman of BSCB and SAB to present the report. The Chairman noted that having Mr Miller as a member of the Board, with speaking rights, shows the importance of this issue for the Board. The Chairman went on to commend Mr Miller's contribution to the work of the Board.

Dr Frost welcomed the comprehensive report. The Independent Chair of BSCB and SAB, Mr Chris Miller presented his report to the Board. Mr Miller highlighted the importance of the safeguarding duty for Referrals. Mr Miller briefed the Board about the refreshed priorities and noted the focus on tackling mental ill health.

Ms Wakeling welcomed the focus which together with lessons learnt could inform the refresh of the JHWBS. Mr Miller noted the training delivered as part of the IRIS project and the importance of the need for a strategic partnership response to the Alan Wood report.

RESOLVED:

That the Health and Wellbeing Board had noted and commented as above on the Annual Reports of the Barnet Safeguarding Children Board (BSCB) and Safeguarding Adults Board (BSAB) attached at Appendix 1 and 2.

10. ADULTS AND COMMUNITIES ENGAGEMENT STRATEGY UPDATE (Agenda

Item 10):

The Chairman introduced the item which is an important consideration for the Board as it outlines and shapes how the Board will engage with adult residents in the Borough.

She welcomed Mr James Mass, Assistant Director for Community & Wellbeing, Hannah Ufland Engagement Lead (LBB) who presented the report and the programme to improve the way the council engages with residents (over 18) through working groups.

Mr Mass summarised the findings of the report including the programme of the working groups and noted that next year's annual report will include recommendations and areas of improvement.

The Chairman commended all the sterling work undertaken by the former Partnership Boards and noted the success of the previous Adults and Communities Annual Engagement Summit held on 11th August 2016. Dr Debbie Frost added her thanks and stated that the summit was very well received.

RESOLVED:

- 1. That the Health and Wellbeing Board had noted the final Adults and Communities Engagement Strategy (Appendix 1) and the progress made to date.**
- 2. That the Health and Wellbeing Board had agreed the Annual Engagement Summit report (Appendix 2) for publication on London Borough of Barnet website and for circulation to all members of the Health and Wellbeing Board.**
- 3. That the Health and Wellbeing Board had agreed to receive a further report on the progress every 6 months.**

11. CARE HOMES PROJECT PROGRESS REPORT (Agenda Item 11):

The Chairman welcomed the progress report and noted the importance of the Board being sighted on work that aims to improve the quality and safety of Care Homes in Barnet, which has the largest number of Care Home beds in London.

The Chairman invited Muyi Adekoya, Joint Commissioner Integrated Care and Marsha Jones, Darzi Fellow to join the meeting and present the item.

The Board raised a query about staff retention, training and development of workforce. Ms Adekoya informed the Board about the tools used to monitor quality and outcome of training programmes for staff. It was agreed that an update report would be brought back next year. **(Action FWP)**

RESOLVED:

That the Health and Wellbeing Board had noted the progress made by Barnet CCG in improving quality in Care Homes through collaborative working with key stakeholders.

12. HEALTH AND SOCIAL CARE INTEGRATION BOARD MINUTES (Agenda Item 12):

The Board noted the appendix to the report and it was **RESOLVED:**

That the Health and Wellbeing Board had noted the minutes of the Health and Social Care Integration Board meeting of 20 September 2016.

13. FORWARD WORK PROGRAMME (Agenda Item 13):

The Board noted the Forward Work Programme which is a standing item on the agenda and lists the business items for the period 2016-2017.

The Board noted the additions made to the Forward Work Programme under Agenda Items 6 (JHWBS Implementation Plan update) 8 (Update on Childhood Immunisations 0-5 Years) and 11 (Care Homes Project Progress Report) at this meeting.

RESOLVED:

- 1. That the Health and Wellbeing Board had noted the Forward Work Programme and proposed any necessary additions and amendments as above to the forward work programme (see Appendix 1).**
- 2. That Health and Wellbeing Board Members continue to propose updates to the forward work programme before the first day in each calendar month, so that the work programme can be published on the Council's website more efficiently, with the most up to date information available.**
- 3. That the Health and Wellbeing Board continues to align its work programme with the work programmes of the Council Committees (namely the Adults and Safeguarding Committee, and the Children's, Education, Libraries and Safeguarding Committee), Health Overview and Scrutiny Committee, and Barnet CCG's Board (see Appendix 2).**

14. ANY ITEMS THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 14):

None.

The meeting finished at 11.40 am