

Decisions of the Health & Wellbeing Board

23 July 2020

Board Members:-

*Cllr Caroline Stock (Chairman)

*Dr Charlotte Benjamin (Vice-Chairman)

* Cllr Sachin Rajput
* Cllr Richard Cornelius
* Dr. Tamara Djuretic
* Chris Munday

* Dawn Wakeling
* Madeline Ellis
* Kay Matthews
* Dr Clare Stephens

* Dr. Nick Dattani
* Caroline Collier
* Fiona Bateman

* denotes Member Present

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

The Chairman of the Health and Wellbeing Board, Councillor Caroline Stock welcomed all attendees to the meeting, which was held virtually.

The Chairman welcomed two new Board members, Madeleine Ellis, the Barnet Healthwatch representative, and Rebecca Sare from Inclusion Barnet, who replaced Rory Cooper and Julie Pal. The Chairman thanked Rory and Julie for all their contributions to the work of the Board.

The Chairman noted that the Board had recently held two webinars and that at the first webinar, a minutes' silence had been held for those who lost lives to Covid-19.

The Chairman noted the work of the Barnet Public Health and put on record her thanks to the team and in particular, to Dr. Tamara Djuretic, for all of the hard work that had been done in relation to the pandemic. The Chairman noted the importance of taking a break during these difficult times.

The Chairman acknowledge the way that the Local Integrated Pathway had worked over the first wave and went on to express her thanks to Barnet CCG.

It was **RESOLVED** that the minutes of the previous meeting of the Health and Wellbeing Board held on 16 January 2020 be agreed as a correct record.

2. ABSENCE OF MEMBERS (Agenda Item 2):

There were none.

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

Dr. Charlotte Benjamin, the Vice Chairman declared a non-pecuniary interest on behalf of herself, Dr Clare Stephens and Dr Nick Dattani as primary care providers via their respective GP Practices. Dr Benjamin advised that it should be to be made clear to the public that this interest is being made on behalf of the three clinicians for transparency.

4. PUBLIC QUESTIONS AND COMMENTS (IF ANY) (Agenda Item 4):

None.

5. REPORT OF THE MONITORING OFFICER (IF ANY) (Agenda Item 5):

None.

6. LIST OF HWBB ABBREVIATIONS (Agenda Item 6):

The Board noted the standing item on the agenda which lists the frequently used acronyms in HWBB reports. Members were encouraged to email any further suggestions to the Governance Service.

7. FORWARD WORK PROGRAMME (Agenda Item 7):

The Board considered the Forward Work Programme as set out in the report.

RESOLVED that the Committee note the Forward Work Programme.

8. BARNET COVID-19 LOCAL OUTBREAK CONTROL PLAN (Agenda Item 8):

The Chairman introduced the report, which noted that NHS Test and Trace commenced on 28 May 2020 and that all local authorities across the country were asked to support the system by developing and publishing Local Outbreak Control Plans by 30 June. The Committee were advised that Barnet had published their plan accordingly and can be accessed here. The Chairman noted that Barnet had also been selected to contribute further as part of the Best Practice Group Network with Camden, Hackney and Newham, representing London.

At the invitation of the Chairman, the Director of Public Health, Dr. Tamara Djuretic, advised the Committee that the plan sought to prevent an outbreak and that if one occurred, to deal with it as quickly as possible. The Board noted that the Plan had been developed with the Barnet Health Protection Board.

Referring to a set of slides contained within the agenda, Dr. Djuretic advised that the purpose of the plan is to support Test and Trace. Dr. Djuretic noted that there was a PHE London Corona Response Cell (LCRC), which is a partnership that set out specific responsibilities for various actions.

Dr. Djuretic noted that the Health Protection Board contained "Category One" responders, which included partners such as the London Ambulance Service and the Police.

The Chairman advised that the Health and Wellbeing Boards' role as recommended by Government is to engage with the public to prevent outbreaks. She further noted that the webinars referred to in her opening comments aimed to engage with a wider audience. The Board noted that the first webinar focused on education, and was attended by school Head Teachers. This webinar included back to school information and mental health wellbeing information. The Board noted that the second webinar was with the local faith forums and local faith groups, and focused on places of worship.

The Board noted that both Webinars were well attended and created a good forum for open and timely engagement in order to prevent potential outbreaks happening within such settings.

Dr. Djuretic noted that for the purposes of data sharing on NHS Test and Trace, an agreement had been signed with Public Health England, and that Barnet was following all guidelines.

During the consideration of this item, the meeting was briefly adjourned due to a technical error which saw an interruption in the broadcasting of this meeting. The connection was restored, and the broadcast of this meeting was resumed.

Dr. Djuretic noted that a communication and engagement plan was in place to promote the prevention of Covid-19. The Board noted that the plan, which had been launched earlier that month, was targeting the areas with the most cases in the first instance. The Board noted that specific engagement would be undertaken with all parts of the community in Barnet.

Chris Munday, Executive Director for Children and Young People advised of an issue that he had been working on with Dr. Djuretic in relation to NHS Test and Trace in obtaining information on three young patient within the Borough. Dr. Djuretic expressed the need to close the loop on this data.

Responding to a question from the Chairman, Dr. Djuretic commented that schools in the Borough had been working very closely with the Local Authority. She noted that the Health and Safety Team work with Education department and had developed an extensive risk assessment for schools, all of which had been received back. She further noted that from the Covid-secure point of view, she was confident everything was in place for the anticipated return of schools in September. Dr. Djuretic noted the importance of children being in school.

Responding to a question from the Chairman, Mr. Munday advised the Committee that approximately 9000 pupils had been attending schools since the pandemic. He further noted that approximately 40% of vulnerable children were now in school, which was a big increase from the start of the pandemic and was also in line with national data. Mr. Munday reinforced the importance of children being back in school. He advised that he had been working closely with the Public Health and Health and Safety to develop the Risk Assessments. He commented that he hoped that parents would feel confident in sending their children back to school.

Responding to a question from the Chairman, Mr. Munday advised that he had undertaken a very strong "Back to School" campaign.

A Board Member expressed concern about the ability of those who are not digitally enabled to receive testing if they do not have an e-mail address. Dr. Djuretic advised that she believed that testing could be requested via the telephone. She undertook to research this and report back to the Board (**Action: Dr. Djuretic**) Dr. Djuretic subsequently confirmed that tests can be requested via 119 as well as via national portal.

Following the consideration of the report, it was RESOLVED:

1. That the Health and Wellbeing Board note Barnet's COVID-19 Local Outbreak Control Plan and the Board's role in management of local outbreaks.

9. BARNET INTEGRATED CARE PARTNERSHIP: UPDATE (Agenda Item 9):

The Chairman introduced the report, and noted that the Pandemic has had devastating effects on our communities locally as well worldwide however it also brought some different ways of working and brought local partnerships between Local Authority, NHS and Voluntary and Community sector much closer which will have legacy for local Integrated Partnership.

The Chairman invited Daniel Morgan, the Interim Director of Commissioning at North Central London CCG Barnet Directorate to introduce the report.

Mr. Morgan advised the Committee that the partnership had been in place since the beginning of the year, with the following aims:

- A Population health management approach that takes into consideration the wider determinants of health and improves the health outcomes for residents of Barnet;
- Addressing the challenging commissioning issues so that as a system we develop integrated solutions;
- Addressing performance issues where Barnet is an outlier (e.g. by reducing the number of avoidable unplanned hospital visits and admissions)
- Support residents in self-care and prevention;

Mr. Morgan advised the Board of the following progress to date:

Developed strong, collaborative leadership:

- The partnership had identified system leaders across multi-organisation's in Barnet
- Held workshops and informal meetings last year to build relationships
- Held detailed discussions about vision, outcomes, governance and financial management of the Barnet ICP to develop shared understanding

Developed Joint Governance:

- The partnership had developed interim governance arrangements
- Established the Barnet ICP Board and Barnet Integrated Care Delivery Board
- Agreed Terms of References and Memorandum of Understanding
- Established workstreams to progress ICP development

Developed High Level Outcome Domains:

- The partnership had developed five high-level outcome domains around access, workforce, population health, wider determinants and community resilience
- Agreed an approach to develop detailed outcomes based on priority pathways

Identified Areas to Progress Local Integration:

- Developed five high-level outcome domains around access, workforce, population health, wider determinants and community resilience
- Agreed an approach to develop detailed outcomes based on priority pathways

Mr. Morgan advised the Committee that pre-Covid, in January 2020, a paper setting out proposals to address system wide issues was presented at the Royal Free London A&E Delivery Board, Integrated Care Partnership (ICP) Delivery Board and the Health and Wellbeing Board. He noted that since then and following Covid, the pace and scale of changes had meant that the local system have worked together on a longer list of priority areas, which had included significant changes to:

- **Same day access**
- **Primary care networks (PCN)**
- **Care homes**

Commenting on care homes, Mr. Morgan noted that GP care for care home residents had been bolstered as part of the response to Covid.

The Board noted the new Governance Structure for the ICP Development Model.

Responding to a question from a Member, Dr. Djuretic commented that whilst Barnet had a long-life expectancy, there was prevention work to be done to ensure a long healthy life expectancy. Dr Djuretic noted that many of the mentioned conditions such as cardiovascular disease and diabetes were preventable through lifestyle

Dr. Djuretic advised the Board on a piece of work that the NCL Directors of Public Health had started on regarding HWBB strategy commonalities to inform North Central London Population Health Plan. She advised that this piece of work had been interrupted by Covid, and stressed the importance of now considering it through the Covid prism. She advised that she hoped to be able to bring this piece of work to the Board in due course
(Action Dr. Djuretic)

Dawn Wakeling, the Executive Director for Adults and Health advised the Board that the ICP Executive Board had met the previous day. She advised that a key conversation from the meeting was an agreement about taking quick action as a local system to think about how health partners and the council address Black, Asian and other Minority Ethnic groups (BAME) issues in advance of second wave of Covid/winter flu. She stressed the desire to work as a system and partnership with “no wrong door” and ensure that the right information and messages were communicated. She stressed the importance of supporting and targeting people around matters such as preventative methods like underlying health conditions, particularly around winter. She acknowledged that the focus on care homes very timely and noted a significant emphasis from central Government on Care Homes. Ms. Wakeling also commented on the new publishing system directly into the Minister of State for Care on status of care homes in relation to Covid-19.

The Chairman put on record her thanks to Dawn Wakeling and her Department for their excellent work on Covid-19.

Following the consideration of the report, the Board RESOLVED:

To note the update of the Barnet Integrated Care Partnership.

10. NORTH CENTRAL LONDON CCG MERGER (Agenda Item 10):

The Chairman introduced the item and noted that since the Board had last met, CCGs across the country and in North Central London have restructured. Kay Matthews, Executive Managing Director, Barnet Borough, NCL CCG will briefly update us on the changes and what does this mean for Barnet's population.

Ms. Matthews commented that it was appropriate that this item be considered following the ICP paper, noting the work that would be undertaken by the partnership.

Ms. Matthews advised the Board of the following actions in relation to the merger:

- The merger proposal was approved by all five Governing Bodies in September 2019 and by NHS England in November 2019.
- Member practices were invited to vote on a new NCL CCG Constitution in November, with a majority of votes received in favour of the new Constitution (and a majority in each borough also achieved).
- The five CCGs merged to form North Central London CCG on 1 April 2020.

The Committee noted that the single CCG continues to work closely with Councils, Providers, General Practices, Voluntary, Community Organisations, and Unions, to achieve shared aims. Ms. Mathews advised on the importance of working with local Councils. She provided assurance that the CCG will continue to work in the normal way, supporting both the HWBB and HOSCs, as well as local Councillors.

Ms. Matthew expressed the need to engage with the public in the Borough on their local services and what they want to see improved, as well as providing an integrated Covid response. She further commented that the Local Integrated Partnership would be a priority going forwards.

A Member noted the benefits as a clinician of working at scale with the merger. The Member commented on the progress of the ICP Executive Board.

Ms. Wakeling requested an item be brought to a future meeting on the emerging ICS Governance structure, which is currently being refreshed. **(Action: Governance to add to work programme)**

A Member asked if the above item could provide information on responsibilities in relation to safeguarding and the Board can influence and support that. It was agreed that this would be included within the report. Ms. Matthews also advised the Board that as Director of Quality, she was currently responsible for both Adults and Children's safeguarding, and noted how seriously she took the role.

Following the discussion of the above item, the Board **RESOLVED:**

To note the update on the North Central London CCG merger.

11. JOINT HEALTH AND WELLBEING STRATEGY 2021-2025 DEVELOPMENT: UPDATE (Agenda Item 11):

At the invitation of the Chairman, Dr. Djuretic introduced the paper. Dr. Djuretic advised the Board that the Health and Wellbeing Strategy was due to be renewed from March 2020. Prior to Covid, a piece of work was embarked upon through which engagement with stakeholders, including commissioners and the community was undertaken, including a Health and Wellbeing workshop.

Dr. Djuretic noted the five guiding principles as set out in the report which were:

- Integrating health and social care and providing support for those with mental health problems and complex needs
- Encouraging residents to lead active and healthy lifestyles and maintain their mental wellbeing
- Improving services for children and young people and ensuring the needs of children are considered in everything
- Creating a healthy environment
- Continuing improvements on preventative intervention

Dr. Djuretic advised the Board that due to Covid, it had not been possible to prepare a document to present to the Board, and that the Board was therefore being asked to approve the extension of the Joint Health and Wellbeing Strategy 2015-2020 until March 2021.

Ms. Wakeling commented that it made sense to extend the strategy, and observed that as the budget consultation and potentially the new corporate plan consultation would be undertaken, it might have greater impact (particularly if other consultations from a health perspective were being done) to combine consultations.

Dr. Charlotte Benjamin advised that she wished to declare a non-pecuniary interest on behalf of herself, and the other clinicians present (Dr. Clare Stephens and Dr. Nick Dattani) by virtue of being Primary Care Providers within the Borough via their respective GP Practices.

Following the consideration of the agenda item, the Board RESOLVED:

- 1. That the Health and Wellbeing Board review and agree the JHWS revised development process, including the delegation of responsibility to sign off the draft JHWS prior to the public consultation.**
- 2. That the Health and Wellbeing Board supports JHWS development process.**
- 3. That the Health and Wellbeing Board approve extension of the JHWS 2015-2020 until March 2021.**

12. ANY ITEMS THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 12):

There were none.

The meeting finished at 10.15 am

