

## Decisions of the Health & Wellbeing Board

10 March 2016

Board Members:-

\*Cllr Helena Hart (Chairman)

\*Dr Debbie Frost (Vice-Chairman)

Dr Charlotte Benjamin  
Councillor Sachin Rajput  
\* Chris Munday  
\* Dr Clare Stephens

\* Councillor Reuben Thompstone  
\* Dawn Wakeling  
Dr Andrew Howe  
John Atherton

\* Michael Rich  
\* Elizabeth James  
\* Chris Miller

Substitute(s) present:

\*Councillor David Longstaff

\* denotes Member Present

Dr Laura Fabunmi (To present Public Health reports)

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

The Chairman of the Health and Wellbeing Board, Councillor Helena Hart welcomed all attendees to the meeting and noted that the actions outstanding from the previous Minutes have been taken forward, many of which were covered in the agenda for this meeting.

**RESOLVED that the Minutes of the previous Meeting of the Health and Wellbeing Board held on 21<sup>st</sup> January 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
- Dr Andrew Howe – Dr Laura Fabunmi was in attendance to present papers (HB Public Law)
- Dr Charlotte Benjamin (Barnet CCG)
- John Atherton (NHS England)

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

Dr Debbie Frost, (Chairman Barnet Clinical Commissioning Group) on behalf of CCG Board Members declared a non-pecuniary interest in relation to Agenda Item 6 (Public Health & Wellbeing Commissioning Plan 2015 – 2020: 2016-17 addendum & targets) and Agenda Item 9 (Joint Health and Wellbeing Strategy Implementation plan 2015 – 2020 progress update) by virtue of being GPs and CCG Board Members – this was noted in light of CCG's responsibilities towards co-commissioning services in primary care and the recent coverage in the press.

Dr Frost also informed the Board that in the interest of transparency and managing conflicts of interest, training and information will continue to be provided internally by Barnet CCG. Elizabeth James, Barnet CCG (Interim) Joint Chief Operating Officer & Director of Clinical Commissioning noted that GPs are not involved with financial aspects of co-commissioning services in primary care.

There were no other interests declared.

**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. PUBLIC HEALTH & WELLBEING COMMISSIONING PLAN 2015 - 2020: 2016-17 ADDENDUM & TARGETS (Agenda Item 6):**

The Chairman welcomed the report which sets out the updated Public Health Commissioning Plan targets and detailed Delivery Plan for 2016/17. She stated that the Board had approved the Public Health Commissioning Plan 2015-2020 in March 2015 and that the Board in common with the other Theme Committees was asked to review the targets for the year ahead.

Dr Laura Fabunmi (HB Public Health) presented the paper and noted the priorities for the 2016/17 period:

- Investing in demand management to put all statutory services on a secure footing for the future
- Ensuring that additional investment in non-statutory but priority services are targeted to achieve the best possible health outcome
- Influencing the priorities of internal and external delivery partners to improve the health of Barnet residents
- Helping residents to engage with their own health and wellbeing

Following a query from the Board about the targets set for sexual health services and obesity for 2016/17 and beyond, Dr Fabunmi stated that targets are flat-lined because it has been difficult to provide a trajectory without an established baseline.

In relation to excess weight and obesity it was noted that this issue will be tackled through a multi-model approach and benchmarks can be set and reviewed at a later stage against the achievements delivered.

The Commissioning Director for Children and Young People requested that clarification is provided in respect of the Smoking Prevalence indicator at p24. **(Action)**

In response to a request to expand on the number of indicators for children and young people from the Board, Dr Fabunmi noted that Public Health would review the indicators to cover issues facing children and young people. **(Action)**

Councillor Reuben Thompstone, Chairman of the Children, Education, Libraries and

Safeguarding Committee welcomed the report and the need to invest in demand management towards services such as Health Checks and National Child Measurement Programme.

It was also noted that the review of the Commissioning Plan targets will continue through the Performance and Contract Management Committee and that progress will be monitored against the Council's Corporate Plan, including the performance of both internal and external Delivery Units.

Councillor David Longstaff, Chairman of the Community Leadership Committee requested that a change be made to the wording of the appendix at p23, under the first bullet point, 'Healthy and Sustainable places and communities', to reflect the relevance to all Barnet residents and to read:

*The Council is investing £30 million in redeveloping two leisure centres at New Barnet and Cophall, and implementing our Sport and Physical Activity strategy, to ensure that all Barnet residents have access to high quality health and fitness facilities, particularly in areas where the local population is projected to grow*  
(Action)

#### **RESOLVED:**

**That the Health and Wellbeing Board reviewed and approved with comments as set out above, the addendum to the Public Health & Wellbeing Commissioning Plan for 2016/17 (Appendix A).**

#### **7. THE GROWING ISSUE OF SHISHA SMOKING IN BARNET (Agenda Item 7):**

The Chairman welcomed this Report which followed a referral to the Health & Wellbeing Board of her Motion to Full Council on 8<sup>th</sup> December 2015 and a request from the Board at its last meeting in January for a substantive item for discussion on the Growing Issue of Shisha Smoking in Barnet. She noted that the Report had been informed by local intelligence, research and best practice in other areas to suggest a plan of action to tackle the issue.

Upon invitation from the Chairman, James Gould (Senior Planning Enforcement Officer) Emma Phasey (Group Manager, Development and Regulatory Services) and James Armitage (Service Director, Development and Regulatory Service) joined the meeting for this item.

Dr Laura Fabunmi (Public Health) introduced the report and briefed the Board about the health effects of shisha smoking and noted the evidence which shows that there has been a significant increase in shisha uptake, particularly among young people and university students.

The Board noted that research had shown that enforcement actions towards shisha has been limited and that therefore a multi-pronged partnership approach is required to address the compliance and enforceability issues more effectively. Councillor Reuben Thompstone welcomed the report and noted the need for an effective education campaign.

In relation to the misconceptions about the health effects of shisha smoking in comparison to cigarette smoking, Dr Fabunmi also highlighted the importance of the health promotion and education campaign.

She also noted the aims of the campaign, particularly to raise awareness of the negative health impacts of shisha among users and young people. To ensure that a wide audience is reached, Elizabeth James, Barnet CCG (Interim) Joint Chief Operating Officer & Director of Clinical Commissioning expressed interest in linking with Public Health to discuss inclusion of further clients groups and patients. **(Action)**

Mr Armitage briefed the Board about the current enforcement issues that regulatory services are faced with when prosecutions are brought under the Health Act 2006. He noted that prosecutions for non-compliance by virtue of the Health Act 2006 are costly and time consuming and that the penalties imposed by courts are usually of a small-scale.

Ms Phasey elaborated on the points raised and informed the Board that warnings issued by Regulatory Services are often only implemented over a long period of time and that this also adds to the delay towards enforcement.

A suggestion was put forward by Mr Armitage that subject to review and approval by the local authority, the possibility of issuing fixed penalty notices could be considered.

Subject to the Board's approval of the recommendations, Dr Fabunmi noted that a Task and Finish Group will be established, which will aim to coordinate visits with partners including HMRC and share intelligence with regulatory services to tackle illegal structures related to shisha and other areas of non-compliance.

Mr Chris Miller welcomed the report and noted that section 2.7 of the report states that the prevalence of shisha smoking may be influenced by the proximity between shisha premises and schools.

In light of this, he queried the penalty options available and possible measures to prevent underage shisha tobacco usage at shisha establishments. In response, Ms Phasey expressed concerns about penalties, which would potentially be higher fines but not significantly higher.

The Chairman thanked the speakers and Board Members for the discussion and noted that a report will be brought to a future meeting of the Health and Wellbeing Board with further findings, including issues that can be lobbied nationally and enforceability options which can be carried out by key partners.

**RESOLVED that:**

1. **The Health and Wellbeing Board confirmed its commitment to reducing the use of shisha in the borough on health grounds.**
  2. **The Health and Wellbeing Board approved the multi-pronged approach outlined in the report, of health education and promotion, regulation, and exploration of local Planning Policy, with the following actions:**
    - **Educate and Engage.** A health education and promotion campaign in partnership with the Council's communications department that is aimed at users of shisha, with a particular focus on young people but also including shisha premises.
    - **Regulate Activity.** A partnership approach to be taken to non-compliant premises, focusing on agreed hotspots identified through local intelligence, including the Community Safety Team and Partnership, HMRC, the Police and London Fire Brigade.
    - **Explore current Planning and Enforcement Policy.** To include health and wellbeing considerations, so that local businesses such as shisha establishments, do not adversely impact on neighbouring residential amenity.
  3. **The Health and Wellbeing Board supported a partnership problem solving approach to non-compliance in shisha premises which actively and fairly applies all relevant legislative powers available to the Council.**
  4. **The Health and Wellbeing Board noted and approved a Task and Finish group to develop and implement an action plan for reduction in the use of shisha in Barnet. The remit of this group will include:**
    - **Cross council representation from Public Health, Environmental Health, Trading Standards/licensing, Planning, Community Safety and regeneration**
    - **Working with key partners such as the police, fire and the CCG**
    - **Being jointly chaired by Public Health and Client Commissioning lead for Enforcement services to ensure actions from both the public health and enforcement perspective are driven forward**
    - **Reporting back to the Health and Wellbeing Board on how the powers and functions available across the Council, which may lie within the scope of other Council Committees, can be harnessed to reduce shisha use, such as the Safer Communities Partnership, Area Committees, Licensing Committees and Planning Committees.**
8. **HEALTH REPORT - CHILDREN IN CARE (Agenda Item 8):**

The Council's Corporate Parenting Advisory Board considered this Report on 9 February 2016 (Appendix 1 of the report) and the Chairman noted that this item had been submitted to the Board for consideration following a request from the Lead Member for Children, Councillor Reuben Thompstone. The Chairman stated that the health and wellbeing of children in general but especially of looked after children had always been a primary concern both for all members of the HWB Board as well as of all members and officers of the Council. The Commissioning Director for Children and Young People

introduced the paper and welcomed comments from the Board in relation to the recommendations.

The Chairman noted that the Board had been asked to consider a number of key issues which were highlighted within the Report as requiring further work to ensure that the best possible service and care is being provided to children in care, as well as measures to improve their health and wellbeing as much as possible. It was also noted that safeguarding of children has always been an important factor of the work of the Council and the CCG.

The Chairman invited Siobhan McGovern (Designated Nurse for Safeguarding Barnet CCG) to join the table.

Following a query from the Board about health assessments, Ms McGovern explained that when children are placed in care both a designated doctor and a designated nurse are appointed and that going forward measures have been put in place to ensure that initial health assessments are carried out within the specified time frame. The Board also noted the role of the designated nurse and designated doctor in assisting commissioners of health services to improve the health of looked after children.

The Chairman thanked the Board for the discussion. The Board requested that officers and report authors implement arrangements to ensure timely escalation of health issues to partner organisations. **(Action)**

**RESOLVED:**

1. **That the Health and Wellbeing Board noted and commented as above on the Health of Children in Care Annual Report (Appendix 2).**
  2. **The Board noted the poor compliance with statutory timescales for initial health assessments for looked after children and recommended that further information is urgently sought from the CCG in terms of the capacity to undertake assessments and that a report on timescales for initial health assessments is brought back to the May meeting of the Corporate Parenting Advisory Board.**
9. **JOINT HEALTH AND WELLBEING STRATEGY IMPLEMENTATION PLAN (2015 - 2020) PROGRESS UPDATE (Agenda Item 9):**

The Commissioning Director for Adults and Health, Dawn Wakeling introduced the Report which provides the Board with an update on the progress of the Implementation Plan reported to the Board at its meeting in January, following approval of the final Joint Health and Wellbeing Strategy 2015-2020 in November 2015.

Ms Wakeling informed the Board that upon request from the Board, update reports on specific topics and areas of concern can be included on the forward work programme for reporting at a future meeting.

Both Dr Frost and Mr Munday noted the importance of receiving updates on the issue of childhood immunisation. Following discussion the Board considered two further recommendations which were seconded:

*Additional recommendation: That the Health and Wellbeing Board agrees to include the Health of Looked After Children as an area of focus within the Joint Health and Wellbeing Strategy Implementation Plan and track the progress made in delivering improvements.*

*Additional recommendation: That the Health and Wellbeing Board requests that a joint letter from the Commissioning Director for Children and Young People, Lead Member for Children's Service and Barnet CCG is submitted to NHS England about childhood immunisation, seeking urgent action and clarification on the issue and requests that the Lead NHSE representative attends the HWBB meeting where this item is reported.*

Following approval of the two motions which were carried, it was

**RESOLVED:**

- 1. That the Health and Wellbeing Board noted progress to deliver the Joint Health and Wellbeing Strategy (2015-2020) and agreed further action where necessary.**
- 2. That the Health and Wellbeing Board agreed to include the health of Looked After Children as an area of focus within the Joint Health and Wellbeing Strategy Implementation Plan and track the progress made in delivering improvements.**

**That the Health and Wellbeing Board requested that a joint letter from the Commissioning Director for Children and Young People, Lead Member for Children's Service and Barnet CCG is submitted to NHS England about childhood immunisation, seeking urgent action and clarification on the issue and requested that the Lead NHSE representative attend the HWBB meeting where this item is reported.**

**10. MINUTES OF THE JOINT COMMISSIONING EXECUTIVE GROUP (Agenda Item 10):**

The Chairman received the standing item on the agenda and the Board considered the minutes of the Joint Commissioning Executive Group meeting held on 22<sup>nd</sup> January 2016.

**RESOLVED:**

- 1. That the Health and Wellbeing Board noted the minutes of the Joint Commissioning Executive Group meeting of 22 February 2016.**

**11. FORWARD WORK PROGRAMME (Agenda Item 11):**

The Commissioning Director for Adults and Health, Ms Wakeling introduced the standing item on the agenda and invited the Board to make suggestions for future items for consideration.

The following changes to the Forward Work Programme were agreed:

- That the item under the May meeting 'Family Friendly Barnet' be reported to the HWBB meeting on July 2016
- To include Commissioning Director for Children and Young People under Report Of, for the 'Mental health services – CAMHS, Reimagining Mental Health and Mental Health Social Work' item
- To change the 'Health checks' report which is currently listed under the May Forward Work Programme to be included in the Public Health report on activity 2015/16 in July 2016.

## **RESOLVED**

- 1. That the Health and Wellbeing Board noted the Forward Work Programme and proposed any necessary additions and amendments as set out 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).**
- 12. SERVICES FOR PEOPLE WITH LEARNING DISABILITIES INCLUDING WINTERBOURNE VIEW (Agenda Item 12):**

The Chairman welcomed the public report and invited Sue Tomlin Joint Commissioning Manager Learning Disabilities who joined the meeting and presented the paper. The Board received a briefing on the content of the report which provides an overview of the work carried out by NCL Transforming Care Partnership and the alternative services to meet health and support needs outside hospital settings.

Ms Tomlin informed the Board that work will continue in order to ensure that patients receive support services outside hospital settings particularly in light of the partnership's commitment in relation to the Winterbourne View concordat. The HWBB will continue to receive updates on progress every six months.

**RESOLVED:**

**That the Board noted the contents of the report including the draft plan to deliver the Assuring Transformation programme through the North Central London Transforming Care Partnership, progress made on patient discharges and the update on patients subject to the Winterbourne View Concordat.**

**13. ANY ITEMS THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 13):**

The Chairman noted that a workshop session will be held 9am -10am on 12<sup>th</sup> May 2016 prior to start of the Health and Wellbeing Board meeting at 10am.

**14. MOTION TO EXCLUDE THE PRESS AND PUBLIC (Agenda Item 14):**

The Chairman informed the Board and the public gallery that the meeting would now be held in private to hear exempt papers.

**RESOLVED - that by virtue of paragraphs 1, 2 of Part 1 of Schedule 12A of the Local Government Act 1972 the public and press 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 1 and 2 of Part 1 of Schedule 12A of the Act (as amended)**

**15. WINTERBOURNE VIEW COHORT – UPDATE ON PATIENT DISCHARGES AND COURT OF PROTECTION (EXEMPT) (Agenda Item 15):**

**It was RESOLVED that the Health and Wellbeing Board noted the contents of the exempt report and the update information contained in the exempt report.**

The meeting finished at 11.20 am