







## **Health & Wellbeing Board**

## Minutes of the meeting held 9.30 am on 19 January 2023 Edgware Primary School

#### **Board Members present:**

Councillor Alison Moore	Chair, Health and Wellbeing Board
Councillor Paul Edwards	Chair, Adults and Safeguarding Committee
Councillor Pauline	Chair, Children, Education & Safeguarding Committee
Coakley Webb	
Dr Tamara Djuretic	London Borough of Barnet
Chris Munday	London Borough of Barnet
Debbie Sanders	Chief Executive Officer, Barnet Hospital, Royal Free
	London NHS Foundation Trust
Dawn Wakeling	London Borough of Barnet
Michael Whitworth	Chief Executive Officer, Barnet Federation of GPs and
	Primary Care Networks
Fiona Bateman	Chair, Barnet Adult Safeguarding Board
Debbie Bezalel	Head of Community Services, Inclusion Barnet
Kathleen Isaac	Central London Community Healthcare NHS Trust
Kelly Poole	North Central London Integrated Care Board
Michael Whitworth  Fiona Bateman  Debbie Bezalel  Kathleen Isaac	London Borough of Barnet Chief Executive Officer, Barnet Federation of GPs and Primary Care Networks Chair, Barnet Adult Safeguarding Board Head of Community Services, Inclusion Barnet Central London Community Healthcare NHS Trust

#### Others in attendance:

Claire O'Callaghan	Public Health, London Borough of Barnet
Laxmi Mistry	
Tara Mooney	North Central London Integrated Care Board
Allan Siao Ming Witherick	

#### 1. Minutes of the Previous Meeting

RESOLVED that the minutes of the meeting held on 29 September 2022 be agreed as a correct record.

#### 2. Absence of Members

Apologies were received from Dr Nikesh Dattani - North Central London Integrated Care Board and Sarah McDonnell-Davies, Executive Director of Places Designate, NHS North Central London ICB.

Apologies were received from Collette Wood, North Central London Integrated Care Board who was substituted by Kelly Poole.

Apologies were received from Anne Whateley, Central London Community Healthcare NHS Trust who was substituted by Kathleen Issac.

#### 3. Declaration of Members' Interests

There were none.

## 4. Public Questions and Comments (if any)

There were none.

## 5. Report of the Monitoring Officer (if any)

There was none.

### 6. List of Health and Wellbeing Board (HWBB) Abbreviations

RESOLVED – that the Board noted the standing item on the agenda which lists the frequently used acronyms in Health and Wellbeing Board (HWBB) reports.

# 7. Neighbourhood Conversation - Edgware Primary School and Saracens High School Superzones

The Chair introduced the item and handed over to the Deputy Director of Public Health who highlighted the work being done in the area.

The developers, Ballymore, gave a presentation on the developments that they had been undertaken in the Edgware area and support that they had given to the local community.

This was followed by a brief presentation by pupils from Saracens High School supported by their teacher. Members of the Board asked questions on a range of issues including how easy it was to learn how to cycle, what sports were popular (basketball). The pupils spoke about their interest in doing activities but that they did have concerns about bad influences and the fear of crime.

The pupils from Edgware Primary School spoke eloquently about their activities. They highlighted the changes that they would like to see, for example that they wanted more green spaces to enjoy. The Board thanked them for the presentation and asked what changes they would like, their responses included asking for bigger playgrounds and things to use in the playgrounds. The Chair asked if there was one thing in the town centre they would like to see. Pupils highlighted that they'd like more playgrounds, greenery and open space with less pollution and the safety to walk to school.

After the final presentation the Board asked questions of the developers Ballymore and noted the issues experienced by people with regards to traffic and parking. This highlighted that they were looking to electrify bus routes and support infrastructure improvements. It was recognised that Barnet was heavily car centric and that some of the changes would need to be addressed structurally to bring about behavioural change. The Board noted that areas such as greenspaces needed to be more accessible which supported those with mobility issues and for multi-generational use. The Chair raised a question as to whether more could be done with cross generational discussions as well as across borders with Hertfordshire and Harrow.

The Chair thanked all of the presenters for the work and contribution.

## **RESOLVED** unanimously that the Health and Wellbeing Board:

1. Noted the progress on School Superzones projects at Edgware Primary School and Saracens High School

At this point of the meeting, the Chair adjourned the meeting.

#### 8. Enhanced Health in Care Homes

The Chair resumed the meeting.

The Head of Joint Commissioning, Older Adults and Integrated Care, supported by a GP as Clinical Lead, gave further feedback to the board to supplement the presentation provided with the agenda. They noted the potential benefits of access to the health data on individuals, but that the services were under pressure and thus unable to make full use of it.

A Board Member queried why North Central London appeared to have a low level of nursing homes per head of population and whether this had had a consequential impact on discharging from hospital. The Head of Joint Commissioning, Older Adults and Integrated Care responded that a number of providers had exited due to pressures and inadequate CQC ratings and that this had led to a loss of beds.

The leadership in the home and the quality of the registered manager and owner had often been highlighted as part of the issue. Overall, the North Central London CQC ratings were going up compared to other authorities and the Council was doing what it could to support the sector. This included looking at how to support talent and develop the area as several of the providers were sole proprietors and succession planning needed to be encouraged.

The Chair noted that not all care homes had been engaged. Officers responded that some were part of larger organisations and partnerships which posed issues with regards to the incompatibility of digital systems thus resulting in barriers. There were also concerns about the ongoing support for the project as experienced in other parts of the country as it had initially been pump primed by NHS Digital.

A question was raised about how care homes and hospitals worked together. The Head of Joint Commissioning, Older Adults and Integrated Care responded that there was a multi-disciplinary team involving partners that met weekly but with people increasingly living longer those in care homes were becoming older, frailer and with more complex high-level needs.

When challenged as to how the Board could support adoption in more care homes the Officers responded that they needed more support from GP Practices so that they made use of the information and were able to support the care homes. This required upskilling and improved confidence in staff.

#### **RESOLVED** unanimously that the Health and Wellbeing Board:

1. Noted the workplan and progress to date.

# 2. Agreed to receive future reports on action plans and progress on implementation.

## 9. Migrant Health Needs Assessment

The Chair reported that a motion was due to be submitted to Barnet Full Council in support of becoming a Borough of Sanctuary. This was important to show the Council's support for those in need and that health needs needed to be assessed both on arrival but also over a period of time.

Officers noted that this was a snapshot in time and that there had been further updates. A number of the recommendations had already been implemented where viable and that the next stage would be to look at the action plan. The recommendations covered not just the Council but the NHS and community and voluntary sectors that all worked together to provide support.

There were concerns about the impact on mental health for young people who were initially classified as adults by the Home Office but had to wait to be reclassified. It was recognised that age classification was an important safeguarding process to ensure that children and families were placed appropriately and although the process could feel unpleasant and unhelpful it was needed. The Chair noted that this might be an area to look at and the support provided as the individuals would already be suffering from a plethora of stress and anxieties.

With regards to schooling a Board Member reported that the targets to integrate children into schools were being met and that although there were pressures the lower birth rate in the borough in recent years had meant that there was capacity overall.

Issues were raised around the different levels of support with some hotels seemingly not providing food which was culturally or religiously inappropriate. This could potentially lead to additional strains on local foodbanks. In some cases, the hotel managers had been supportive of changes and had also looked to ensure that migrants had access to schooling and health care support.

It was noted that London wide working was being undertaken to look at the level of risk faced by migrants and how this could be reduced. Critically there issues around how the UK was being portrayed and that in the same way that issues in care homes needed to be challenged, issues around migration also needed to be challenged at a national level.

#### **RESOLVED** unanimously that the Health and Wellbeing Board:

- 1. Noted the needs, health issues and barriers faced by refugees and undocumented migrants as identified in the Barnet Migrant Health Needs Assessment 2022.
- 2. Noted the key recommendations in the Barnet Migrant Health Needs Assessment 2022 and endorse initial developments of work in this area.
- 10. Cost of Living Impact on Health and Wellbeing

Deputy Director of Public Health presented the report and Members queried how the grouping of "Economically Inactive – Long Term Sick" was derived. Officers confirmed that this data was supplied by the Department for Works and Pensions and was three months behind. The information was used alongside other sources to help provide more targeted support and to spot those who had had a change of circumstances to access services.

It was noted by Healthwatch that there were increasing concerns around those not using prescriptions for medication, due to rising costs. The Board Member from Safeguarding noted that their Board had heard from Officers about the work that was being undertaken to signpost those in need to support services.

The Chair commented that the richness of the data available provided additional opportunities to identify gaps in delivery and support that could be addressed.

# RESOLVED unanimously that the Health and Wellbeing Board noted the report.

#### 11. Barnet Food Plan 2022-2027

The Deputy Director of Public Health reported that the feedback on the consultation had shown that the proposed Barnet Food Plan 2022-2027 was inline with what respondents had wanted. The work would be ongoing, with the steering group continuing to meet to ensure that they could address emerging issues when required.

The Chair thanked the Officers for their presentation.

#### **RESOLVED** unanimously that the Health and Wellbeing Board:

- 1. Approved the Barnet Food Plan 2022-2027.
- 2. Note the feedback and comments for the Food steering group who will be responsible for implementation of the Food plan.

#### 12. Better Care Fund

The Executive Director Adults and Health reported that over the past few years the dates for Government timings had been challenging. This had meant that deadlines that did not line up with Health and Wellbeing Board meetings. As a result the report proposed that delegated authority was officially given by the Health and Wellbeing Board to support the timescales.

In response to a query around reporting requirements it was reported that action associated with the Better Care Fund was reported fortnightly. This compared to the NHS Stepdown Care Funding which had a daily reporting requirement.

The Chair queried whether the NHS Stepdown Care Funding represented a risk in terms of the impact on local provision. The Executive Director said that it was a worthy initiative but the complexity of wrap around care, re-enablement and support presented a pressure on the system even with the additional funding.

**RESOLVED** unanimously that the Health and Wellbeing Board:

- 1. Noted the contents of the Barnet Adult Social Care Discharge Better Care Fund Plan 2022/23.
- 2. Delegated the approval and submission of Barnet Better Care Fund plans to the Executive Director Communities, Adults and Health in consultation with the Chair of the Health and Wellbeing Board.

### 13. Communicable Disease Update

The Deputy Director of Public Health gave an update on Communicable Diseases in Barnet supported by the Chief Executive Officer, Barnet Hospital Royal Free London NHS Foundation Trust and the Chief Executive Officer, Barnet Federation of GPs and Primary Care Networks.

Cases of COVID-19 were still being monitored through the ONS study. Whilst there was a slight increase, this was from a far lower position than the equivalent time last year. More of this had been related to people coming in to the health system with other symptoms and being identified as having COVID-19 with a large number of the cases in the older ages. The variant seen in the USA had not been identified as a variant of concern in the UK although numbers were rising and it would be monitored.

There was a significant increase in seasonal flu which had impacted both older and younger age groups. The peak appeared to have been reached and passed earlier than experienced in previous years.

There had been an increase in the number of Streptococcus A cases and there have been a number of deaths amongst young children due to invasive Streptococcus A infection across the country but none in Barnet. There had been a spike in people presenting children with concerns due to media coverage and awareness in the community. Additional support had been provided for the more deprived areas to support respiratory disease concerns for both adults and young people.

## 14. Forward Work Programme

The Board noted the items due to be reported to future Health and Wellbeing Board meetings.

### **RESOLVED** that the Board noted the Forward Work Programme.

#### 15. Any Items the Chair decides are urgent

The Chair reported that responses were being prepared for a number of consultations that were being undertaken, including with Barnet Carers Strategy, the Barnet Dementia Strategy. Work was also being done to respond to the consultation the London Ambulance Strategy and that input should be sent to the Health and Wellbeing Policy Manager.

Finally on behalf of the Health and Wellbeing Board the Chair thanked the Governance Officer, Allan Siao Ming Witherick, as this was his final meeting with Barnet Council.

The meeting finished at 12.27 pm