

# MINUTES OF THE HEALTH AND WELLBEING BOARD

Thursday, 7 March 2019 at 3.00 pm

PRESENT: Mayor Damien Egan (Chair to the Board); Faruk Majid (Vice Chair to the Board and Chair, Lewisham Clinical Commissioning Group); Cllr Chris Best (Deputy Mayor of Lewisham and Cabinet Member for Health and Adult Social Care); Aileen Buckton (Executive Director for Community Services, LBL); Val Davison (Chair of Lewisham & Greenwich Healthcare NHS Trust); Mark Drinkwater (Policy and Communications Coordinator, Voluntary Action Lewisham); Roz Hardie (Voluntary and Community Sector Representative); Michael Kerin (Healthwatch Lewisham); Dr Danny Ruta (Director of Public Health, LBL); and Sara Williams (Executive Director for Children & Young People, LBL).

APOLOGIES: Roger Paffard (Chair, South London and Maudsley NHS Foundation Trust); Dr Simon Parton (Chair of Lewisham Local Medical Committee) and Gwen Kennedy (NHS England Representative).

IN ATTENDANCE: Martin Wilkinson (Managing Director, Lewisham Clinical Commissioning Group); Catherine Mbema (Consultant in Public Health); Kenneth Gregory (Joint Commissioning Lead for Adult Mental Health, LCCG & LBL); Donna Hayward-Sussex (Deputy Director, South London and Maudsley NHS Foundation Trust); Trish Duffy (Health Intelligence Manager, Public Health, LBL); Salena Mulhere (SGM Inter-agency, Service Development and Integration) and Stewart Weaver-Snellgrove (Clerk to the Board, LBL).

## **Welcome and introductions**

The Chair welcomed Mark Drinkwater (Voluntary Action Lewisham) and Roz Hardie (Voluntary and Community Sector Representative) to their first meeting as new members of the Health and Wellbeing Board.

The Chair and Cllr Best thanked departing members of the Board, Aileen Buckton and Danny Ruta, for their commitment, dedication and years of service to the Board.

Apologies were received from Roger Paffard, who was represented at the Board by Donna Hayward-Sussex.

## **1. Minutes of last meeting and matters arising**

1.1 The minutes of the last meeting were agreed as an accurate record.

## **2. Declarations of Interest**

2.1 There were no declarations of interest.

### **3. Healthier Communities Select Committee Referral - Lewisham and Greenwich NHS Trust Changes to Opening Hours of Sexual and Reproductive Health Services in the Borough**

- 3.1 This referral from the Healthier Communities Select Committee is regarding changes by Lewisham and Greenwich NHS Trust to the opening hours of Sexual and Reproductive Health Services in the borough.
- 3.2 Salena Mulhere apologised to the Board that due to a previous error in the dispatch of papers this referral had not been presented at the November 2018 meeting of the Board.
- 3.3 Action: The Board noted the contents of the report.

### **4. BAME Health Inequalities Update**

- 4.1 Kenny Gregory updated the Board with progress on the community-led approach to addressing BAME health inequalities.
- 4.2 A meeting between representatives from Public Health, Adults Joint Commissioning, Corporate Policy and the Lewisham BME Network took place on 19<sup>th</sup> December 2018.
- 4.3 The purpose of this meeting was to discuss how best to set up an informal workshop session to set the tone for co-production going forward and begin to build relationships between members of the Board and Lewisham BME Network.
- 4.4 At a follow-up planning meeting on 17<sup>th</sup> January 2019 it was agreed that experienced and independent third-party facilitation was key to the success of the initial workshop session.
- 4.5 Following a tendering exercise, Michael Hamilton, a Programme Director at the Ubele Initiative was appointed to design and facilitate the workshop, to take place on the 7<sup>th</sup> March 2019 at the Health and Social Care Leader's Forum.
- 4.6 A written report is to be produced by Michael Hamilton with observations and outcomes from the workshop session. It should be noted that this is an embryonic piece of work. Organisational priorities will need to be aligned with actions that the community feels are important.
- 4.7 It is likely that there will be a call for resource from the organisations represented on the Board in the delivery of key priorities. This will come to a future meeting of the Board for review.
- 4.8 Members of the Board made the following comments regarding the report:

- Priorities around BAME health inequalities were welcomed. The three priority areas of mental health, obesity and cancer need to be underpinned by key targets driving improvement in outcomes.
- There needs to be a cultural shift in workplace behaviours across the current system (e.g. friendly and helpful staff as a first point of contact for service users who may feel untrusting, confused or outside of the system).
- Lessons to be learned from initiatives elsewhere that involve faith leaders in the delivery of BAME health interventions.

4.9 Action: The Board noted the contents of the report.

## 5. Joint Strategic Needs Assessment (JSNA) Update

5.1 Trish Duffy reported the latest progress on our Joint Strategic Needs Assessments (JSNAs) to the Board.

5.2 To undertake its responsibilities the Board needs to be periodically updated on the local population and its health needs. Individual JSNA topics provide in-depth analysis and recommendations for that specific service/population group.

5.3 The JSNA Steering Group is now well-established and meets bi-monthly. The group has representation from Public Health, Lewisham CCG, Voluntary Action Lewisham, Children and Young People's Commissioning, the Local Medical Committee and Lewisham and Greenwich Trust. South London and Maudsley have also been identified as a membership need.

5.4 The group have approved the following JSNA Topic Assessments and refreshes to be signed off by the board:

- **Parenting** - The Parenting JSNA looks at the breadth of services provided in the borough and more in-depth at Domestic Violence, Mental Health and Substance misuse, the so called toxic trio.
- **Refresh of Tobacco Control** - The refresh of the Tobacco Control JSNA Topic Assessment updates data on smoking prevalence within the borough but also considers key groups such as pregnant women and people with mental health conditions. Furthermore the assessment outlines current stop-smoking services within Lewisham.
- **Refresh of Immunisations** - An Immunisations JSNA Refresh has also been completed. This now incorporates adult vaccinations such as flu for pregnant women and those aged 65+ and the Shingles vaccine.

5.5 The new JSNA process is progressing and aims to become further embedded in strategic planning.

5.6 In addition, *The Picture of Lewisham* has been refreshed with up-to-date data. Of note, life expectancy for females has continued to improve but for males has decreased fractionally.

5.7 Members of the Board raised the following comments/questions regarding the report:

- JSNA's are only as robust as the underpinning data. All Board members need to commit to the collection of better equalities monitoring on behalf of their respective organisations.
- Although vast majority of data collection is voluntary, all parties need to focus on doing this locally – quality of JSNAs is dependent on it (e.g. nothing about same-sex parents in Parenting JSNA as Public Health doesn't have this info).
- It might be helpful if data categories (e.g. ethnicity) were consistent across partner organisations so that it can be shared more easily.
- Sub-categories of Protected Characteristics are necessary for targeted work in some areas e.g. BAME mental health.
- Public Health England guidance to be published re vaping. E-cigarettes are not currently included as approved nicotine replacement therapy. However, evidence has not shown vaping to be a stepping stone to smoking.
- LGT welcomed the refreshed immunisations JSNA as concerns prevail regarding the number of children attending A&E who are very ill from non-vaccination.

5.8 Actions:

- The Board noted progress on the Parenting JSNA and the refreshed Tobacco Control and Immunisations JSNAs.
- All Board members to take immediate action towards improving equalities data monitoring within their respective organisations.

## **6. Lambeth, Southwark and Lewisham Sexual and Reproductive Health Strategy 2019-2024**

6.1 Danny Ruta provided the Board with an overview of the Lambeth, Southwark and Lewisham Sexual and Reproductive Health Strategy 2019-2024. The strategy has already been approved by Lambeth and Southwark's Health and Wellbeing Boards.

6.2 It is proposed that the three Cabinet members and Directors of Public Health for Lambeth, Southwark and Lewisham publicly launch the strategy on 12 March 2019.

6.3 Sexual health services are jointly commissioned across the three boroughs, with Lambeth acting as the lead commissioner. The service has been redesigned in the last five years with a push towards prevention, a shift of activities online, and the introduction of new models of integrated care.

- 6.4 The strategy outlines the key sexual health challenges facing our boroughs and identifies four key priority areas for action:
- a) **Healthy and fulfilling relationships** – People have healthy, safe and fulfilling sexual relationships.
  - b) **Good reproductive health across the life course** – People effectively manage their fertility and reproductive health, understand what impacts on it, and have knowledge of and access to contraceptives.
  - c) **High quality and innovative STI testing and treatment** – The local burden of STIs is reduced, in particular among those who are disproportionately affected.
  - d) **Living well with HIV** – We move towards achievement of 0-0-0: zero HIV-related stigma, zero HIV transmissions, and zero HIV-related deaths
- 6.5 The Elton John Foundation awarded £2.5m to Lambeth, Southwark and Lewisham to increase HIV testing. HIV is still terminal where interventions occur at a later stage. Routine HIV testing has now been implemented in Lewisham A&E.
- 6.6 The Chair raised a question regarding the extension of the pilot for PrEP (pre-exposure prophylaxis) as a protection against HIV. Danny Ruta advised that the PrEP Programme Board had offered to double the number of treatment places available but this was not backed-up by any additional funding. Recommendation to undertake more online management of PrEP has been rejected as it has the potential to contaminate the results of the pilot study by introducing a new process. At the last meeting of the Council a motion was passed that there should be universal treatment for PrEP but that this needed to be adequately funded by the Government.
- 6.7 Action: The Board noted the content of the report and approved the publication and joint launch of the strategy on 12th March by all three boroughs.

## 7. Update on NHS Long Term Plan

- 7.1 Martin Wilkinson provided members of the Board with an update on the NHS Long Term Plan (The Plan).
- 7.2 In June 2018, the Prime Minister made a commitment that the Government would provide more funding for the NHS over the next five years, with an average increase of 3.4% a year.
- 7.3 In return, the NHS was tasked with detailing its ambitions for improvement over the next decade and its plans to meet them over the five years of the funding settlement. That Long Term Plan has now been published, covering all three life stages:
- Making sure everyone gets the best start in life

- Developing world-class care for major health problems
  - Supporting people to age well
- 7.4 The Plan also sets out actions to overcome the challenges that the NHS faces, such as staff shortages and growing demand for services by:
- Doing things differently
  - Preventing illness and tackling health inequalities
  - Backing the workforce
  - Making better use of data and digital technology
  - Getting the most out of taxpayer's investment in the NHS
- 7.5 Sustainability and Transformation Partnerships (STPs) and Integrated Care Systems (ICSs) now need to develop and implement their own strategies for the next five years.
- 7.6 These strategies will set out how they intend to take the ambitions that the NHS Long Term Plan details and work together to turn them into local action to improve services and the health and wellbeing of the communities they serve.
- 7.7 Operational plans for the next year are being developed now, with a refresh of the STP due in autumn 2019. Lewisham has a clear vision but it needs to influence the delivery of services across the South East London region.
- 7.8 Health and care partners are working on different commissioning arrangements and helping providers to work together more effectively. The challenge is freeing up the time and energy to think about tomorrow rather than today. Refreshing the HWB strategy collectively may help the Board collectively focus on this.
- 7.9 Members of the Board raised the following comments regarding the report:
- This is a large and complex undertaking involving numerous stakeholders. The gap between practitioners and community leaders needs to be bridged.
  - Careful consideration needs to be given to prevent divergence between the STP and 'the system'. Information must be effectively shared.
  - Many service users have feelings of being outside 'the system'. Although certain things are done better at scale, our approach must also empower the shaping of health and wellbeing services at a local level.
  - This is an opportunity to shape what local health and wellbeing means, but we need to move fast to grab this opportunity and secure the best value for money for Lewisham.
- 7.10 Martin Wilkinson thanked the Board for their recent positive feedback to NHS England re the contribution of Lewisham CCG to the delivery of Lewisham's Joint Health and Wellbeing Strategy
- 7.11 Action: The Board noted the contents of the report.

**The meeting ended at 16:15 hours**