

MINUTES OF THE HEALTH AND WELLBEING BOARD

Tuesday, 23 September 2014 at 3.00 pm

ATTENDANCE

PRESENT: Mayor Sir Steve Bullock (Chair), Cllr Chris Best (Cabinet Member for Community Services), Aileen Buckton (Executive Director for Community Services, LBL), Elizabeth Butler (Chair, Lewisham and Greenwich Healthcare Trust), Dr Danny Ruta (Director of Public Health, LBL), Tony Nickson (Director, Voluntary Action Lewisham), Peter Ramrayka (Voluntary and Community Sector), Rosemarie Ramsay (Healthwatch Lewisham), Dr Marc Rowland (Chair of Lewisham Clinical Commissioning Group and Vice-Chair of the Health and Wellbeing Board), Brendan Sarsfield (Family Mosaic).

IN ATTENDANCE: Catherine Bunten (Policy Manager, Commissioning, Performance & Strategy, Children and Young People, LBL, representing Frankie Sulke), Carmel Langstaff (Service Manager, Strategy and Policy, Community Services, LBL), Susanna Masters (Corporate Director, Lewisham Clinical Commissioning Group), Mike Salter (Head of Medicine Management, Lewisham Clinical Commissioning Group), Sarah Wainer (Head of Strategy, Improvement and Partnerships, Community Services, LBL), Martin Wilkinson (Chief Officer, Lewisham Clinical Commissioning Group), Kalyan DasGupta (Clerk to the Board, LBL).

APOLOGIES: Apologies were received from Dr Simon Parton (Chair of Lewisham Local Medical Committee), Frankie Sulke (Executive Director for Children and Young People, LBL), Jane Clegg (Delivery, NHS SE England – South London Area, London Region).

1. Minutes of the last meeting and matters arising

- 1.1 The minutes of the last meeting (3 July 2014) were agreed as an accurate record.
- 1.2 The Board
 1. Agreed that an Action Tracker would be tabled at future meetings.
 2. Agreed that Food Poverty would continue to be on the Board's Work Programme.

2. Declarations of Interest

- 2.1 There were no declarations of interest.

3. Update on Revision of Lewisham Pharmaceutical Needs Assessment

3.1 Dr Danny Ruta (Director of Public Health, LBL) updated the Board on progress and planned timetable for revision of the Lewisham Pharmaceutical Needs Assessment (PNA).

3.2 The following points were highlighted:

- In order to fulfil its statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services in Lewisham, the Director of Public Health has convened a PNA steering group with representation from Lewisham Clinical Commissioning Group and the Local Pharmaceutical Committee (LPC).
- The group is in the process of updating the data collected for the previous PNA, and reviewing recent policy guidance and evidence.
- A visioning/stakeholder event is planned for late September/early October, after which priorities for the future development of pharmaceutical services will be generated, and these will inform the first draft revised PNA. This will be followed by a 60-day consultation between October and December 2014, and a final draft PNA will be produced for consideration by the Board in January 2015.

3.3 The following points were raised or highlighted in the discussion:

- GPs will be invited to the event.
- Pharmacists may wish to address loneliness as part of their overall remit because, as frontline service providers, they are likely to be directly aware of people experiencing such issues.
- HWB members expressed interest in visiting a community pharmacy.
DR to action.
- Lewisham should also explore out-of-borough pharmaceutical services for examples of best practice.
- Public Health, the CCG, and the LPC should be invited, in addition to Healthwatch, to help the Board decide on the best model for pharmaceutical services in the borough.

3.4 The Board:

1. Noted the progress made and the planned timetable for completion of a revised PNA.
2. Agreed that the timetable should incorporate an optional visit to a community pharmacy.

4. Adult Integrated Care Programme update

4.1 Susanna Masters (Corporate Director, Lewisham Clinical Commissioning Group) provided the Board with an update on Lewisham's Adult Integrated Care Programme (AICP) and in particular on the Better Care Fund (BCF) and Joint Commissioning Intentions.

4.2 The following points were highlighted:

- Susanna explained that, because of the Department of Health deadline, the BCF application had to be submitted before the 23 September 2014 HWB meeting. It was approved by the Health and Wellbeing Board's Chair and Vice-Chair.
- In developing the plan, Board members will ensure that it takes account of the Care Act and adequately addresses the needs of carers and the mental and physical health of service users. Members will also ensure that activity to reduce acute emergency admissions is feasible and realistic.

This activity is currently underway and is being undertaken alongside the development of Lewisham's Joint Commissioning Intentions for health and care.

- Following the 19 September submission, it is now anticipated that feedback on Lewisham's revised plans will be provided by NHS England and the LGA by the end of October 2014.

4.3 The following points were raised or highlighted in the discussion:

- Elizabeth Butler requested sight of future bids in advance of submission to ensure full engagement of the Trust.
- The Performance Dashboard agreed at the last meeting will help monitor progress and offer reassurance, particularly with respect to reducing Emergency Admissions. Updates will be provided twice a year, with supplementary reports as required.
- It was confirmed that Lewisham had submitted plans for a 1.8% reduction in emergency admission for 2014-15.
- Lewisham will continue to learn from best practice models.

4.4 The Board:

1. Noted the activity in relation to the Better Care Fund.
2. Noted the updates provided on the Adult Integrated Care Programme.
3. Noted the work in progress in relation to the Joint Commissioning Intentions.

4. Agreed that supplementary performance reports may need to be submitted over and above the twice-yearly presentation of the Dashboard, to help the Board monitor progress in relation to the Adult Integrated Care Programme.

5. System Resilience Plans 2014-15 and Winter Funds

- 5.1 Martin Wilkinson (Chief Officer, Lewisham Clinical Commissioning Group) provided an update on progress of the development of the System Resilience plans for Lewisham, Greenwich and Bexley, in line with the System Resilience Guidance published by NHS England on 13 June 2014.
- 5.2 The report highlighted the following points:
 - The key initiatives contained within the unscheduled care section of the plan cover demand and capacity analysis and action plans, enhancement of 7-day working, the development and implementation of a real-time data and predictive modelling tool, closer working with LAS to drive higher utilisation of Appropriate Care Pathways (ACPs), and the development of a standardised approach for rapid response / Joint Emergency Teams.
 - System resilience plans are being refined following initial feedback from NHS England. Plans will be reviewed in September and October to ensure they are joined up across the system.
- 5.3 The Board noted the update on the development of the system resilience plans.

6. Voluntary and Community Sector Representative update

- 6.1 Peter Ramrayka (Voluntary and Community Sector representative) provided a summary of a consultation with a range of Lewisham's voluntary and community organisations regarding their needs and the work of the HWB, and conveyed their views on how they might contribute to the Board's ongoing activities.
- 6.2 The following issues were highlighted:
 - The report focused on the organisations' responses to the nine priorities identified in the Board's Joint Strategic Needs Assessment and, in particular, on hard-to-reach groups who might not be represented elsewhere in the system.
 - The report discussed the steps being taken to involve the community and voluntary sector in issues discussed or due to be discussed by the HWB, to obtain its input.

6.3 The following points were raised or highlighted in the discussion:

- Reducing re-offending is a priority of the Safer Lewisham Board; this further highlights the need for joined-up working.
- Organisations had highlighted issues relating to their specific areas of work rather than broader strategic issues.
- There is a need to work with VAL's Health and Social Care Forum, to understand the issues and needs of the voluntary and community sector better.
- The HWB could improve communications on its activities. Loneliness could be used as a theme to reflect the strategic work undertaken by the HWB. A campaign on loneliness would make the issues and the provisions concrete.

6.4 The Board noted the Voluntary and Community Sector Representative update.

6.5 Work Programme for the next meeting: 25 November 2014

- Carmel Langstaff (Service Manager, Strategy and Policy, Strategy, Improvement and Partnerships, Community Services, LBL) distributed the Work Programme and members agreed to feed back any comments and suggestions.
- Carmel explained that future agendas could be smaller, given the new process, by which meetings will focus on strategic items requiring the input of members.
- It was suggested that the Work Programme feature as a standing item at the end of all future Board meeting agendas. This was agreed.

The Board agreed to include the Work Programme report and discussion as a standing final item in all future Board meeting agendas.

The meeting ended at 16:00 hrs.