

MINUTES OF THE HEALTH AND WELLBEING BOARD

Thursday, 11 July 2013 at 1.00 pm

PRESENT: Sir Steve Bullock (Chair), Councillor Chris Best, Aileen Buckton (Executive Director for Community Services), Elizabeth Butler (Chair of Lewisham Healthcare NHS Trust), Tony Nickson (Director, Voluntary Action Lewisham), Simon Parton (GP), Danny Ruta (Director, Public Health), Elaine Sammarco (Chair of Lewisham Healthwatch), David Sturgeon (NHS SE England, representing Jane Clegg), Warwick Tomsett (representing Frankie Sulke), and Helen Tattersfield (Chair of Lewisham CCG).

IN ATTENDANCE: Mark Drinkwater (Health Inequalities and Social Care Officer, Voluntary Action Lewisham), Brid Nicholson (Health Protection Programme Manager), Ian Smith (Director, Children and Young People), Katrina McCormick (Joint Deputy Director, Public Health), Donal O'Sullivan (Consultant in Public Health Medicine), Sarah Wainer (Head of Strategy, Improvement and Partnerships) and Kalyan DasGupta (Assistant Policy Officer and Clerk to the Board).

Apologies for absence were received from Jane Clegg (NHS SE England) and Frankie Sulke (Executive Director for Children & Young People).

1. Minutes of the meeting held on 30 May 2013

RESOLVED: That the minutes of the meeting of 30 May 2013 be agreed as an accurate record.

2. Declarations of Interest

There were no declarations of interest.

3. Disabled Children's Charter for Health and Wellbeing Boards

Ian Smith, Director of Children's Services, presented the report summarising the key points in the Disabled Children's Charter. He recommended that the Board sign up to the Charter, delegating responsibility for implementation as appropriate to the Children and Young People's Strategic Partnership Board (CYPSPB).

It was noted that the Charter would not lead to any unplanned or unanticipated financial commitments and that the Children and Young

People's Directorate has a good understanding of the future demand for disability services and support. Future plans have been developed based on analysis of robust data.

RESOLVED that:

- i) The Health and Wellbeing Board agrees to sign the Disabled Children's Charter;
- ii) The Health and Wellbeing Board delegates the production and sign-off of the implementation plan to the CYPSPB;
- iii) Regular updates on the Charter will be scheduled and included in the Health and Wellbeing Board work programme.

4. Clinical Commissioning Group Commissioning (CCG) Strategy

Dr Helen Tattersfield, Chair of Lewisham Clinical Commissioning Group, presented the report, which provided an update on the development of Lewisham CCG's five-year commissioning strategy. She advised that the document will be further refined.

The discussion highlighted the following points:

The priorities fit well with the strategic priority areas identified by the Health and Wellbeing Board.

As with the priorities of the Health and Wellbeing Strategy, it would be important for all members to support the CCG's strategic direction. Members of the Board will play a key role in monitoring progress against the identified priorities.

RESOLVED that:

- i) The Board agrees that consideration and review of the CCG Strategy should remain on the Board's work programme.

5. Health Protection in Lewisham and proposed future arrangements

Dr Donal O'Sullivan, Consultant in Public Health Medicine, presented a report to brief the Health and Wellbeing Board and to seek its support on the recommended actions to address health protection issues in Lewisham.

Members noted:

- A Lewisham Health Protection Strategy Group would be established, reporting to the Health & Wellbeing Board. The terms of reference should be consistent with the outline provided in Appendix A of the submitted papers and agreed by the group.
- A workshop will be arranged for September 2013 on the issues covered in the report. Membership of the Health Protection Strategy Group will be finalised at that workshop.
- Top challenges within health protection include Tuberculosis and Sexual Health.
- Health Protection is a crucial area that offers an opportunity for further synergy between Health and the Local Authority.
- Where appropriate, other groups will be set up to address specific issues. For example, the Immunisation Group, which already exists, will be reporting to the Health Protection Group.
- Duplication of work across groups needs to be pre-empted and avoided.
- The first key task of the new Health Protection Strategy Group would be to review health protection plans already in place locally and identify any additional plans needed.
- A TB action plan for Lewisham would be developed, based on recommendations in the TB Joint Strategic Needs Assessment (Autumn 2013).

RESOLVED that:

- i) To schedule further discussion on Health Protection at a future Board meeting.
- ii) Public Health to be invited to present an item on Resilience at a future Board meeting.

6. Recruitment of additional member from the voluntary Sector

Tony Nickson, Director of Voluntary Action Lewisham, presented a report demonstrating that Voluntary Action Lewisham (VAL) has given consideration to the methods of recruitment for an additional member from the voluntary sector to the Health & Wellbeing Board. It was proposed that the additional member would:

- represent the voluntary and community sector and have a leadership role, such as that of a trustee or a director, in an organisation that is a member of VAL;

- have an active interest in health and social care provision in Lewisham and be able to represent a wide and diverse range of communities at the Health & Wellbeing Board;
- be responsible for liaising with, and feeding back to, the Health and Social Care Forum (which is co-ordinated by VAL);
- serve a term of one (1) year.

In discussing the proposal, members of the Board raised the following points:

- On the term to be served, it would be preferable to have continuity of the member, since annual membership might disrupt their cycle of work and contribution.
- On appointment through VAL, it would be more democratic to include non-VAL members, though any nominated person would require the endorsement of their organisation.
- On representation, the specification should be clear that the person should not simply represent their own organisation, but be able to bring a wider Third-Sector perspective to the table.

RESOLVED that:

- i) VAL be requested to run an election process to secure a representative of the Third Sector for the Health & Wellbeing Board, being mindful of the points raised by the Board during their discussions.
- ii) To schedule an agenda item for further update of Health and Wellbeing Board membership for the 19 September Board.

7. Work Programme

Sarah Wainer, Head of Strategy, Improvement and Partnerships, introduced the Work Programme for comments.

RESOLVED that

- The item on Smoking should be taken to the 19 September Board.
- The Evaluation of Warm Homes should come for information to the 19 September Board.
- To postpone the item on CCG Commissioning to the 21 November Board.
- To postpone the item on the Public Health Budget to the 21 November Board.
- The Integrated Health & Care item should include information and guidance on what the Board needs to do, and by when.
- The Forward Plan needs to indicate, where possible, the progression path of each item by stating, briefly, where each report has been presented and where it will be presented next.

8. Membership changes

Helen Tattersfield, Chair of Lewisham CCG, informed the Board that, owing to the pressure of her professional duties, she intended to stand down as the Chair of the CCG (and, therefore, also as the Board's Vice-Chair). The Chair thanked Helen for her significant contribution during her involvement with the Health and Wellbeing Board, as well as with the CCG and the former Shadow Health and Wellbeing Board.

Helen responded with thanks and reassured the Board that the election of her replacement would take place as soon as possible and that the CCG would continue to support the work of the Board.