

# MINUTES OF THE HEALTH AND WELLBEING BOARD

Tuesday, 3 July 2014 at 2.00 pm

## ATTENDANCE

PRESENT: Mayor Sir Steve Bullock (Chair), Cllr Chris Best (Cabinet Member for Community Services), Aileen Buckton (Executive Director for Community Services, LBL), Dr Danny Ruta (Director of Public Health, LBL), Frankie Sulke (Executive Director for Children and Young People, LBL), Elizabeth Butler (Chair, Lewisham and Greenwich Healthcare Trust), Jane Clegg (Delivery, NHS SE England – South London Area, London Region), Tony Nickson (Director, Voluntary Action Lewisham), Peter Ramrayka (Voluntary and Community Sector), Chris Freed (interim representative of Healthwatch Lewisham), Brendan Sarsfield (Family Mosaic).

IN ATTENDANCE: Jade Fairfax (Healthwatch Lewisham), Dr Roger Green (Goldsmith's College, University of London), Laura Harper (Housing, Health and Social Care Integration Project Manager, LBL), Joseph Knappett (Service Manager, Performance, Community Services, LBL), Carmel Langstaff (Service Manager, Strategy and Policy, Community Services, LBL), Genevieve Macklin (Head of Strategic Housing, Customer Services, LBL), Corinne Moocarme (Joint Commissioning Lead, Community Support and Care, CCG/LBL), Nickie Roome (Campaign in Lewisham for Autism Spectrum Housing), Dr Donal O'Sullivan (Consultant in Public Health Medicine, LBL), Simone Riddle (Lewisham Healthwatch), Sarah Wainer (Head of Strategy, Improvement and Partnerships, Community Services, LBL), Martin Wilkinson (Chief Officer, Lewisham Clinical Commissioning Group, for Dr Marc Rowland, Lewisham CCG), Kalyan DasGupta (Clerk to the Board, LBL).

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

- 1.1 The Chair welcomed everyone.
- 1.2 Apologies were received from Dr Marc Rowland (Chair, Lewisham Clinical Commissioning Group and Vice-Chair, Lewisham Health and Wellbeing Board) and Dr Simon Parton (Chair, Lewisham Local Medical Committee).
- 1.3 The minutes of the previous meeting (25 March 2014) were agreed as an accurate record, with the following amendment (under Item 2, "Declarations of Interest"): Cllr John Muldoon's credentials should read, "elected governor of South London and Maudsley (SLaM) NHS Foundation Trust, representing Lambeth, Southwark and Greenwich."
- 1.4 There were no matters arising.

## 2. Declarations of Interest

2.1 There were no declarations of interests.

### **3. South East London Commissioning Strategy**

3.1 The draft strategy was presented by Martin Wilkinson (Chief Officer, Lewisham Clinical Commissioning Group).

3.2 A further version of the strategy, focusing on local implementation, will be submitted to the Board in September 2014.

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

- The key priorities are well aligned to Lewisham's local ones, although there are differences between regional and local implementations of the strategy. Further iterations will ensure alignment with other key strategies. Martin Wilkinson will update the HWB as the local strategy develops.
- The key principles that underpin the HWB strategy, e.g. integration and prevention, are embedded in the SEL strategy.
- The ultimate responsibility for the strategy lies with the Governing Body of the CCG.
- Because there is no 6-borough cluster of local authorities in South-East London to match the CCG cluster, the strategy places particular responsibility on the HWB members across south east London to act collaboratively.

3.4 The Board noted the draft South East London Commissioning Strategy.

### **4. Adult Integrated Care Programme Update**

4.1 Sarah Wainer (Head of Strategy, Improvement and Partnerships, Community Services, LBL) presented the report, and highlighted the following points:

- The Care Act received Royal Assent on 14 May 2014. The Act represents a major reform of the law relating to the care and support of adults and their carers and sets out a number of new duties.
- New guidance on the Better Care Fund is awaited.
- A series of events with respect to the Adult Integrated Care Programme has taken place. The 26 June 2014 workshop to review and further develop the neighbourhood model was very well attended and provided a good platform to take the work forward.

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

- The language in which the various sectors communicate and use in their work is not always shared and fully understood by all.
- Brendan Sarsfield commented that leadership and culture were critical to the success of integration.

#### 4.3 The Board:

1. Noted the updates provided in sections 4 and 5 which are relevant to the Integration Programme;
2. Noted the activity in relation to planning and setting of Commissioning Intentions;
3. Agreed that the Board's work programme should include those priority areas for 2014/15 identified in paragraph 5.1.6 of the report; and
4. Agreed the proposals for enhancing communication and engagement activity (as set out in section 7 of the report).
5. Agreed that a report on Lewisham's progress in relation to the implementation of the Care Act will be presented to the Health and Wellbeing Board at its next meeting.

## 5. Housing and Health in Lewisham

5.1 Genevieve Macklin (Head of Strategic Housing, Customer Services, LBL) presented the report, setting out the wider relationship between housing and health/wellbeing that goes beyond the previously discussed new models of housing for older residents.

5.2 The report highlighted the following points:

- Residents' health and wellbeing are affected by housing issues chiefly in three ways:
  - The quality and condition of homes
  - The provision of new housing, and
  - The management of homelessness.
- Partner agencies should work together to:
  - Expand and further prioritise the current focus on targeted support and prevention;
  - Share intelligence for specialised and other housing;
  - Pilot the provision of a housing advice service in health settings, and
  - Support the Warm Homes Healthy People Project.

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

- Integrated working is key to improving health and wellbeing within the housing agenda.
- Anyone can access the Handyperson Scheme, but this may be more effective if targeted.
- The model required for housing provision in the Borough is one that factors in longer life expectancy.
- Loneliness and lack of accessible information can be addressed through the Information and Advice Workstream of the Adult Integrated Care Programme, as well as through the voluntary sector.
- Brendan Sarsfield suggested that the housing strategy should be driven by health rather than the impact of homelessness on health.
- Martin Wilkinson agreed to explore the case for investment further with Genevieve Macklin and suggested that the recommendations should be considered as part of the Adult Integrated Care Programme and the allocation of Winter Pressures resources.
- The Away Day should consider some of the strategic aspects of the relationship between housing and health.

#### 5.4 The Board:

1. Noted the three main areas in which housing impacts on residents' health and wellbeing, and the work that is currently being carried out in each;
2. Agreed the recommendations made in the report which are intended to further support integrated working across housing, health and social care, namely:
  - a. To further expand the current focus on prevention, in particular on interventions which have the greatest impact;
  - b. For partner agencies to work more closely together to share intelligence;
  - c. To pilot the provision of a housing advice service in health settings;
  - d. To continue to support the Warm Homes Healthy People Project and where possible help to secure greater engagement and buy in from local healthcare providers.

## 6. Health and Wellbeing Performance Dashboard

- 6.1 Dr Danny Ruta (Director of Public Health, LBL) presented the draft Performance Dashboard, designed to assist the Board in monitoring the

progress against its agreed priorities within the Health and Wellbeing Strategy and the integration of health and care for adults.

6.2 The following points were raised or highlighted:

- The dashboard will include those indicators on which BCF activity is focussed.
- The dashboard includes a number of indicators (including those on birth weight, immunisation and excess weight) from the Be Healthy priority of the Children and Young People's Partnership.
- The dashboard is based on 26 national metrics drawn from the Quality and Outcomes (Primary Care), Public Health, NHS and Adult Social Care Outcomes Frameworks.
- The indicators will be used to monitor the health outcomes and the integration of health and social care services on an annual and, where possible, quarterly basis.

6.3 The Board agreed the proposed health and care indicators as set out in the submitted draft dashboard.

## **7. The Annual Public Health Report**

7.1 Dr Danny Ruta (Director of Public Health, LBL) presented the report. Dr Ruta explained that the report is made up of three separate sections. He circulated a copy of the first issue of *Well!*, a magazine aimed at providing information and support to residents to help them improve their health and fitness and which forms the first part of the annual report. Lewisham's Joint Strategic Needs Assessment website provides the second section of the report. The third section is the electronic publication of resources to support weight management by health professionals. These include the Weight Management Care Pathway for both children and adults and a range of other resources.

7.2 The Board:

1. Noted the report, which is targeted at mothers with young families, and has a particular focus on obesity.
2. Endorsed the use of the "Well!" logo to become a trademark for future Public Health reports.

## **8. Healthwatch Lewisham Annual Report**

8.1 Jade Fairfax and Simone Riddle of Healthwatch Lewisham presented the report.

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

- The CCG welcomed the report and explained that many recommendations made had been implemented.
- In response to a query, Jade and Simone clarified that there were enough volunteers for the work being undertaken at the moment.
- Information about Healthwatch's work with Kaleidoscope should be fed into the education and health sectors as well and disseminated more broadly beyond this Board.

8.3 The Board noted the Healthwatch Lewisham Annual Report.

## **9. Immunisation in Lewisham**

9.1 Dr Donal O'Sullivan (Consultant in Public Health Medicine, LBL) presented the report, focusing on the universal childhood programme and highlighting the following points:

- Immunisation is the second most important method of preventing diseases and illnesses after ensuring clean water.
- Very few areas within Lewisham have witnessed parental resistance to immunisation.
- A Lewisham immunisation workplan has been developed for 2014/15, with the following actions as priorities:
  - The development of a new Lewisham Immunisation Strategy, based on an agreement as to the relative roles of NHS England, the Clinical Commissioning Group, Public Health England and the local Children's Commissioning team. The existing Lewisham Immunisation Strategy Group, which has representation at a senior level of all of these stakeholders and which reports to the Lewisham Health and Wellbeing Board, would seem to be the best way of overseeing the development of this new strategy.
  - A review of the use of the health visiting services as an alternative to the GP practice immunising children.
  - Further development of immunisation care pathways.
  - Introduction of the new national immunisation programme to ensure that secondary school children and young adults are protected against disease caused by Group C Meningococcus.
  - The immunisation of pregnant women against influenza and pertussis by midwives.

- Opportunistic immunisation of children in settings other than primary care.

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

- The Children’s Partnership Board has observed that the current NHS England system of paying GPs for immunising children at age 6 rather than at age 5 directly delays earlier immunisation. Jane Clegg noted the point and promised to pass it on to the relevant colleagues within the NHS. She added that work was also underway in the NHS to address the discrepancy between actual uptake and reported uptake.
- Collaborative commissioning is due to become operational and will become an important aid to progressing immunisation. The CCG is already commissioning on a more population-based approach than before.
- NHS England manages the contracts for immunisation and monitors performance. It was noted that the improvement in MMR1 was not achieved through performance management alone.

9.3 The Board:

1. Noted the content of the report on immunisation in Lewisham and
2. Endorsed the priorities and Immunisation Workplan for 2014/15.

## **10. Health and Wellbeing Strategy: Progress Update Healthy Weight / Obesity**

10.1 Dr Danny Ruta (Director of Public Health, LBL) provided an update on the progress towards achieving the improvements and outcomes of the HWB Strategy’s priority area 1: achieving a healthy weight in children and adults. The focus of the report was on the objectives and actions identified in the delivery plan of the Health and Wellbeing Strategy, but it also covered the ongoing work of the various strategies and plans supporting this priority.

10.2 In the discussion, it was recommended that the Board seek to help residents achieve and maintain a healthy weight by sign-posting some of the ways in which this could be done—for instance by marking out safe cycling routes.

10.3 The Board noted the content of the report on Health and Wellbeing Strategy: Progress Update Healthy Weight / Obesity.

## **11. Food Poverty in Lewisham**

11.1 Dr Danny Ruta (Director of Public Health, LBL) provided information on the causes, scale, consequences, and current interventions relating to food poverty in Lewisham.

11.2 The following points were highlighted:

- The Greater London Authority report *Child Hunger in London* stated that 21% of parents surveyed reported skipping meals so that their children could eat and 9% of children in London said they sometimes or often go to bed hungry. If these figures were applied to Lewisham it is estimated that 19,000 parents in Lewisham skip meals so their children can eat and 6,000 children in Lewisham sometimes or often go to bed hungry.
- Findings of the report should be used as the foundations for the future development of action plans for Lewisham, modelled on the Greater London Authority report on child hunger and the London Assembly report on food poverty. This will become part of the overall strategy for food and nutrition in the Borough.

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

- The cost of housing contributes to food poverty in London.
- The Whitefoot Nutrition Project was cited as an example of good practice locally.

11.4 The Board :

1. Noted the content of the report Food Poverty in Lewisham and
2. Endorsed the next steps outlined in the report.

## **12. Voluntary and Community Sector Response to Poverty, with a Focus on Food Poverty**

12.1 Tony Nickson (Director, Voluntary Action Lewisham) and Dr Roger Green (Goldsmith's College, University of London) presented the report about independent community responses to poverty in the Borough, with a focus on food poverty. The report included findings from Goldsmith's College researchers on the use and operation of food banks in the Borough. (Please click on this link for the report:

[\*Putting Food On The Table--Understanding Food Poverty: Exploring Food Bank Use In Lewisham\*](#)

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

- Food banks are short-term solutions to food poverty in the Borough.
- People are presenting at food banks with a multitude of issues and are being sign-posted to other services.

- It was suggested that a Lewisham food summit may help address food poverty in the borough.

### 12.3 The Board:

1. Acknowledged the issue of food poverty in the Borough, as indicated by the experiences of local voluntary and community organisations and initial research findings presented, and
2. Endorsed a discussion, to be initiated by VAL and partners, with all key stakeholders, including food bank users, to discuss approaches towards solutions to food poverty and to further investigate why people are increasingly accessing food banks and other food distribution points, with the aim of improving co-ordination and effective support for voluntary action locally in addressing food poverty in the Borough.

## 13. **Progress Report on Implementing the National Autism Strategy “Fulfilling and Rewarding Lives” in Lewisham**

- 13.1 Corinne Moocarme (Joint Commissioning Lead, Community Support and Care, CCG/LBL) and Laura Harper (Housing, Health and Social Care Integration Project Manager, LBL) presented a six-monthly update on the local implementation of the National Autism Strategy, focusing on the main areas of the Self Assessment where Lewisham had rated itself amber.
- 13.2 In particular, there was an emphasis on the specific identification of adults with autism in the local housing strategy and more detail on how Lewisham Housing is working to identify a range of housing to support residents with particular needs.
- 13.3 The following points were raised or highlighted in the discussion:
  - Lewisham is looking to establish a community that accepts and understands autism and which has an infrastructure that provides opportunities for adults with autism/Asperger’s syndrome to live fulfilling and rewarding lives.
  - The Self Assessment Framework (SAF—for 2013) provided an opportunity to recognise Lewisham’s achievements, take stock of the Borough’s current position, and understand where further work was required.
  - There were 17 questions in the Self Assessment Framework (SAF). Lewisham rated itself green on 6 questions and amber on the remaining 11. There were no red ratings. Some of the main areas rated amber requiring further work to progress were:
    - The inclusion of autism in the local Joint Strategic Needs Assessment

- Improving the data collected regarding numbers of adults with autism in the borough
  - The level of information about local support in the area being accessible to people with autism
  - Promotion of employment of people with autism.
  - Specific identification of adults with Autism in the local housing strategy
- Presentation and discussion of the SAF in November 2013 provided an opportunity to ensure autism was on the Health and Wellbeing Board agenda, and the request to provide regular updates was welcomed.
  - This update coincided with the publication of Think Autism and the launch of the Autism Innovation Fund. Further updates will be provided as work progresses in these areas.
  - Autism has now been included in the local Joint Strategic Needs Assessment (JSNA) and data collected regarding numbers of adults in the Lewisham is being improved.
  - The Housing and Autism Project Group has been reinstated and met twice in 2014. Meetings are planned for the remainder of the year at six-weekly intervals.

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

- Some of the amber-rated areas had been amalgamated within in the report.
- In response to a query from Nickie Roome (Campaign in Lewisham for Autism Spectrum Housing—CLASH) about the possible creation of an Autism Partnership Board in the Borough, the following observations were offered:
  - Corinne Moocarme currently corresponds informally with a pool of people who support the work on autism. A group could be convened to support this area of work.
  - There is a need for caution regarding the possible proliferation of partnership boards, appreciating that specific arrangements around particular tasks or agendas may not always require the oversight of a formal board.

13.5 The Board:

1. Noted the content of the Progress Report on Implementing the National Autism Strategy “Fulfilling and Rewarding Lives” in Lewisham;
2. Approved the local implementation work, and
3. Agreed for another update to be submitted in January 2015.

## **14. Health and Wellbeing Board Work Programme**

14.1 Carmel Langstaff (Service Manager, Strategy and Policy, Community Services, LBL) presented the draft programme for discussion and approval, highlighting the following points:

4. The following items were agreed during the course of the meeting and will be added to the draft Work Programme:
  - Lewisham’s progress in relation to the implementation of the Care Act
  - Joint Commissioning Intentions
  - CCG South East London Commissioning Strategy update
  - Update on Winter Pressures planning
  - Progress in relation to the Performance Dashboard
  - Update on the Autism Strategy in January 2015
  - Evaluation of the Community Connections Project
  - Update on the Food Strategy and work in relation to food poverty. (January 2015).

14.2 The Board:

1. Agreed the draft Work Programme and the additional items.
2. Agreed that items “For Noting” only should in future be circulated to HWB members for information and not presented at the HWB meeting.
3. Agreed that the report writing guidance will be amended so that the report pathway is clearly highlighted.

## **15. Information Item: NHS Lewisham CCG Annual Report 2013-14**

15.1 The Board noted the contents of the NHS Lewisham CCG Annual Report 2013-14.

The meeting ended at 17:00 hrs.