

# MINUTES OF THE HEALTH AND WELLBEING BOARD

Tuesday, 24 March 2015 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 NHS Trust), Jane Clegg (Director of Nursing, South London, NHS England), Dr Danny Ruta (Director of Public Health, LBL), Tony Nickson (Director, Voluntary Action Lewisham), Peter Ramrayka (Voluntary and Community Sector representative), Dr Marc Rowland (Chair of Lewisham Clinical Commissioning Group and Vice-Chair of the Health and Wellbeing Board), Brendan Sarsfield (Family Mosaic).

IN ATTENDANCE: Carmel Langstaff (Service Manager, Strategy and Policy, Community Services, LBL), James Lee (Service Manager, Prevention and Inclusion, LBL), Kalyan DasGupta (Clerk to the Board, LBL).

ALSO PRESENT: Cathy Ashley (Lewisham Pensioners' Forum).

APOLOGIES: Apologies were received from Dr Simon Parton (Chair of Lewisham Local Medical Committee), Rosemarie Ramsay (Healthwatch Lewisham), and Frankie Sulke (Executive Director for Children and Young People, LBL).

## Welcome and Introductions

The Chair welcomed everyone.

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

- 1.1 The minutes of the last meeting (20 January 2015) were agreed as an accurate record.
- 1.2 There were no matters arising.

### 2. Declarations of Interest

There were no declarations of interest.

### 3. Revised Joint Strategic Needs Assessment Process (Dr Danny Ruta)

- 3.1 Dr Danny Ruta (Director of Public Health, LBL) presented the report. He explained that the purpose of the report was to inform the Health and

Wellbeing Board of the revised process to oversee the development of the JSNA and to propose that the Health and Wellbeing Strategy Implementation Group take responsibility for reviewing and assessing recommendations from completed JSNA topics.

3.2 The following issues were raised or highlighted in the discussion:

- The HWB Strategy Implementation Group periodically needs to review its membership, marketing strategy, and engagement strategy.
- Public Health to engage with a wider group of organisations, to ensure that priorities are relevant.
- Undertake more focussed work on selected topics. Currently, only one or two deep dives are feasible out of the five or six topics addressed each year.

3.3 The Board:

1. Agreed the revised process for the development of the Joint Strategic Needs Assessment (JSNA);
2. Suggested that the Health and Wellbeing Strategy Implementation Group should regularly review its membership to ensure full and appropriate representation.
3. Suggested that Public Health explore the potential to align engagement activity with existing Borough events..
4. Agreed that relevant experts should be engaged to support the development of specific needs assessments.

#### **4. Lewisham's Pharmaceutical Needs Assessment (Dr Danny Ruta)**

4.1 Dr Danny Ruta (Director of Public Health, LBL) presented the report on the revised Lewisham Pharmaceutical Needs Assessment (PNA).

4.2 Dr Ruta apologised for the length and complex format of the report and explained that the publication of a PNA is a statutory responsibility for the London Borough of Lewisham and that the document needed to be submitted to NHS England by 1 April 2015. He added that the revised PNA had been designed to meet this statutory responsibility and to further inform Lewisham's priorities for the future.

- 4.3 In the discussion, it was agreed that members required additional time to read the assessment as they had been unable to access it through the link provided.
- 4.4 Jane Clegg (Director of Nursing, South London, NHS England) confirmed that the task of reading the document could also be delegated.
- 4.5 The Board asked that the link to the revised Lewisham PNA and a PDF version of the PNA consultation report be circulated after the meeting, for members to feed their comments back to the Board's Chair or Vice-Chair by 30 March 2015.

**5. St Mungo's Broadway's Charter for Homeless Health (James Lee)**

- 5.1 The Chair introduced the item by noting that St Mungo's Broadway Assessment and Recovery Centre has a significant presence in Lewisham and that the Board's proposed subscription to the Charter for Homeless Health reflected the known link between issues relating to homelessness and those relating to health.
- 5.2 James Lee (Service Manager, Prevention and Inclusion, LBL) presented the report detailing the current activity designed to address the health needs of homeless people in Lewisham.

The following points were highlighted:

- St Mungo's is encouraging all Health and Wellbeing Boards in the country to sign up to the charter.
- To date, four more boroughs (Hounslow, Hammersmith and Fulham, Waltham Forest, and Greenwich), in addition to the ones listed in the report, had signed up to the charter.
- The count of Lewisham homeless included in the report was based on a street count conducted in November 2014. This could be updated.
- Consideration should be given to incorporating Homeless Health into Lewisham's JSNA and to indicators of homelessness within the Health and Wellbeing dashboard.

5.3 The Board:

1. Noted the current activity to address homeless health needs in Lewisham;
2. Agreed to become signatories to the St. Mungo's Broadway's *Charter for Homeless Health*; and

3. Agreed that Lewisham should seek to create a needs assessment for homelessness. In the meantime, a specific section on homelessness should be created within Lewisham's JSNA.

## **6. Health and Wellbeing Board Work Programme (Carmel Langstaff)**

6.1 Carmel Langstaff (Service Manager, Strategy and Policy, Community Services, LBL) presented the draft work programme for discussion and approval.

6.2 In addition to the listed items and changes to their scheduled appearance, the following recommendations were highlighted:

- The Board was invited to agree the frequency of Health and Wellbeing Board meetings for the forthcoming year, with a suggestion that an increasingly effective agenda planning process may enable the Board to meet less frequently in future;
- The Board was requested to propose items to be scheduled for the forthcoming year; and
- The Board was asked to agree the proposed process for agenda planning and the distribution of reports.

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

- The current frequency of six Board meetings per year should be retained. This will be reviewed in the event that Task and Finish groups are developed.
- Dr Danny Ruta to add the JSNA priorities, based on the discussion under Item 3, above;
- Key priorities for the work programme require further discussion;
- A draft agenda for the next HWB meeting should be circulated to members following the Board Agenda Planning Group meeting.
- All embedded links should be available in the form of PDF attachments.
- Officers agreed to explore whether reports could be packaged as PDF documents before being circulated to members for comment.

6.4 The Board:

1. Agreed the recommendation that papers be distributed to HWB members 5 days before the public despatch.

2. Approved the draft Work Programme.
3. Asked Dr Danny Ruta to add JSNA priorities to the Work Programme.
4. Asked that a draft agenda for the next HWB meeting should be circulated to members following the Board Agenda Planning Group meeting.

**7. Information items**

- 7.1 The items were noted.

**8. Any Other Business**

- 8.1 Cathy Ashley (Lewisham Pensioners' Forum) asked the Board to consider the reduction in the number of clinical beds for people with severe mental health problems in Lewisham, specifically the closure of the Inglemere facility. Ms Ashley asked the HWB to evaluate the time and resources spent in implementing the reduction and the impact of the closure.
- 8.2 In response, Aileen Buckton thanked Ms Ashley for her comments and explained that consultation was being undertaken by SLaM. The Healthier Communities Select Committee would be consulted as part of that process. Aileen highlighted the limited resources available to commission research on this scheme but suggested that lessons learnt could usefully inform the Adult Integrated Care Programme, specifically work to improve information and advice.

The meeting ended at 17:00 hrs.