ATTENDANCE
PRESENT: Mayor Sir Steve Bullock, Chair, Dr Marc Rowland, Chair (Chair of Lewisham Clinical Commissioning Group and Vice-Chair of the Health and Wellbeing Board), Tony Nickson (Director, Voluntary Action Lewisham), Peter Ramrayka (Voluntary and Community Sector representative), Brendan Sarsfield (Family Mosaic), Cllr Chris Best (Cabinet Member for Health, Wellbeing and Older People), Aileen Buckton (Executive Director for Community Services, LBL) Sara Williams (Executive Director for Children & Young People, LBL), Elizabeth Butler (Chair of Lewisham & Greenwich Healthcare NHS Trust),

IN ATTENDANCE: Jane Miller (Consultant in Public Health), Carmel Langstaff (Service Manager, Interagency Development and Integration, LBL), Andy Thomas (Clerk to the Board, LBL), Robert Mellors (Group Finance Manager, LBL)

APOLOGIES: Dr Danny Ruta (Director of Public Health, LBL), Dr Simon Parton (Chair of Lewisham Local Medical Committee), Magna Aidoo (Healthwatch Bromley and Lewisham)

Welcome and Introductions
The Chair welcomed everyone to the meeting and invited Board members to introduce themselves

1. Minutes of the last meeting and matters arising

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

1.2 There were no matters arising.

2. Declarations of Interest

There were no declarations of interest.

3 Adult Integrated Care Programme and the Better Care Fund

3.1 Robert Mellors presented a report highlighting the priority areas for action within the 16/17 Adult Integrated Care Programme. The Board noted that a more detailed programme plan was being developed and will be monitored by the adult integrated care programme board. The report also highlighted the high level expenditure plans for the Better Care Fund for 16/17. Robert explained that the deadline for final submission of the Better Care Fund plan is 25 April. As there is no formal meeting of the Board before that date, Robert requested that the Board agree to receive a copy of the plan electronically for comment and that final sign off of the plan be delegated to the Chair and Vice Chair of the Health and Wellbeing Board.

Liz Butler noted that the report states that a first submission of the Better
3.2 Care Fund submission would take place by 21 March and asked if a copy of this was available. Aileen Buckton agreed to circulate the information to the board.

3.3 Peter Ramrayka asked what is meant when the report refers to 'home wards'? Aileen Buckton replied that this is where people are supported to be cared for in more appropriate settings, in their own homes for example. Aileen explained that the idea is to break down the barriers between hospital care and caring for people in the community in order to ensure that care takes place wherever is most appropriate. This might involve such support as provision of equipment or night time visiting.

3.4 The Board approved the priority areas for the Adult Integrated Care Programme 2016/17. Members agreed that final sign off of the BCF plan be delegated to the Chair and Vice Chair on behalf of the Health and Wellbeing Board but requested that a copy of the submission be circulated for comment.

4. Neighbourhood Care Networks

4.1 Carmel Langstaff presented a report which provided an update on the development of Lewisham’s neighbourhood care networks. She invited the Board to comment on connections that need further developing or gaps that need addressing within neighbourhoods to better meet people’s needs and to identify any specific action that could be taken to further develop the networks within Lewisham.

4.2 Brendan Sarsfield asked whether any links had been made with housing. Carmel said that links had been made but that ideas on how this could be strengthened would be welcomed. Brendan said that one way to do this would be to share the report with the Housing Association Group facilitated by Genevieve Macklin.

4.3 Liz Butler commented that GPs feature heavily in the case studies and given the current pressures on GPs wondered how this would work going forward. Marc Rowland responded to say that it is true that GPs are under a lot of pressure but are very supportive of NCNs. He was keen to ensure that other partners are fully involved including housing, pharmacists, Children’s Centres etc. as this would increase the effectiveness of the model. He commented that this is a very positive development.

4.4 Chris Best said that it was a very helpful update and she was keen to ensure that all services were included in the programme such as ‘Be Active’ and ‘Healthy Walks’ as well as voluntary sector opportunities. In order to do this, information needed to be made available digitally so that it is was easily accessible. Carmel confirmed that work is being done to develop the on line information offer.

4.5 Chris Best commented that it was important to make sure people were well networked, particularly older people at risk of becoming socially isolated. Jane Miller agreed and said that there were some good models that we could learn from such as the North Lewisham Partnership and the Well Bellingham initiative.
5. Devolution Pilot Update

5.1 Aileen Buckton presented a report updating the board on the health and social care devolution pilot. Aileen explained that the pilot supports the current integration programme and seeks to accelerate change and remove barriers. There are three elements to the pilot:

A. Workforce: developing new workforce models and enhanced roles to support new models of care.
B. Estates: using buildings more flexibly and developing local agreements around the shared use.
C. Funding: aligning budgets to support transformation.

5.2 Aileen reported that the timetable is currently being agreed but that it is likely that the outline business case will need to be submitted by the end of July. She proposed that as the Health and Wellbeing Board is scheduled before the end of July 2016, the outline business case be circulated to board members in advance of the deadline for submission for comment.

5.3 Marc Rowland said that he thought that it was important to be clear that what is being proposed is not devolution as it is in Manchester but simply extends the work of the integration programme.

5.4 Liz Butler said that it is important that use of technology is also considered as part of the pilot, particularly mobile working. Aileen agreed that this was the case and said that mobile working is one of the issues being explored.

6. Health and Wellbeing Board Work Programme

6.1 Andy Thomas presented the report and highlighted the fact that this is the first work programme report that has come to the Board since the change in the pattern of meetings. Given the lower frequency of meetings, he invited the Board to give some consideration to programming of reports to ensure that any necessary deadlines would be met. He also invited the Board to put forward agenda items for future.

6.2 The following potential agenda items were put forward:
- Lewisham pilot on obesity
- Better Care Fund – report on what has been achieved
- Winter / system resilience
- Milestones for the Our Healthier SE London programme

7 Any Other Business

7.1 The Chair reminded the meeting that a Health and Wellbeing Strategy Refresh 2015-18 had been presented to the Board at its September meeting and that after discussion it had been agreed that some minor amendments should be made. The Chair asked the Board to formally approve the Health and Wellbeing Strategy Refresh 2015-18. The Board approved the Strategy.

The meeting ended at 16:00 hrs.