

MINUTES OF THE HEALTH AND WELLBEING BOARD Thursday 4th March 2021 at 3.00pm

ATTENDANCE

PRESENT: Cllr Chris Best (Deputy Mayor of Lewisham and Cabinet Member for Health and Adult Social Care); Tom Brown (Executive Director for Community Services, LBL); Val Davison (Chair of Lewisham & Greenwich NHS Trust); Pinaki Ghoshal (Executive Director for Children and Young People, LBL); Philippe Granger (Chief Executive, Rushey Green Time Bank); Donna Hayward-Sussex (Service Director, South London and Maudsley NHS Foundation Trust); Michael Kerin (Healthwatch Lewisham); Faruk Majid (Lewisham Member of South East London CCG) and Dr Catherine Mbema (Director of Public Health, LBL).

APOLOGIES: Damien Egan (Mayor of Lewisham) and Dr Simon Parton (Chair of Lewisham Local Medical Committee).

IN ATTENDANCE: Paul Aladenika (Service Group Manager Policy Development, LBL); Lesley Allen (Community Champion, Diamond Club); Timothy Bradley (Community Champion, Lewisham Wellbeing Map); Miriam Bullock (Public Health Trainee, LBL); Mark Bursnell (Clerk to the Board, LBL); Dee Carlin (Director of Adult Integrated Commissioning); Alexandra Camies (Community Champion, South Lewisham Patient Participation Group Chair); Martin Crow (LSAB Business Manager); Laura Harper (Public Health Commissioning Manager, LBL); Cllr Coral Howard (Vice-Chair, Healthier Communities Select Committee); Sandra Iskander (Strategy Team, Lewisham and Greenwich NHS Trust); Amanda Lloyd (System Transformation and Change Lead, Lewisham Health and Care Partners); Edward Parker Humphreys (Cabinet Executive Officer, LBL); Michael Preston-Shoot (Independent Chair, Lewisham Safeguarding Adults Board); Vicky Scott (Programme Director, Lewisham and Greenwich NHS Trust); Sarah Wainer (Director of Systems Transformation, Lewisham Health and Care Partners); Chamu Mhomwa (Digital Scanning Officer, LBL); Cllr John Muldoon (Chair, Healthier Communities Select Committee); and Martin Wilkinson (Director of Integrated Care and Commissioning, LBL/South East London Clinical Commissioning Group).

Welcome and introductions

The Acting Chair opened the meeting. Apologies were received from Mayor Egan, and Dr Simon Parton.

1. Minutes of the last meeting

1.1 The minutes of the last meeting were agreed with no matters arising.

2. Declarations of interest

2.1 There were no declarations of interest.

3. Local COVID-19 Outbreak Engagement Board

- 3.1 Catherine Mbema presented the latest data on COVID-19 in Lewisham. As of 6th February there had been a total of 20,988 confirmed cases of Covid-19 in Lewisham. There was a surge in cases during late December to early January, closely associated with the identification of a new strain of Covid-19 first detected in England. Since the peak in January the rate of infection had slowed down and continues to do so. The Council has established four COVID-19 rapid testing sites across the borough to identify asymptomatic cases as part of a national initiative.
- 3.2 The Lewisham Covid-19 Community Champions initiative continues to be a key tool to ensure residents are provided with timely communications as part of the wider Covid-19 Communication and Engagement Plan. So far 172 Covid-19 Community Champions have been recruited. In December, Lewisham Council submitted a funding bid to the Ministry for Housing, Communities and Local Government's Community Champion Local Authority Fund for its Community Champion programme. As a result the Council has received £275,917 to deliver the objectives of the Fund. Several work streams are being implemented, including: the further recruitment of Community Champions across the demographic spectrum; campaigning to promote the Covid-19 vaccination programme; and increasing the capacity of the Community Champions to disseminate relevant knowledge within local communities.
- 3.3 John Jibogu, who has been a Community Champion for four months, spoke to the Board about his role and the outreach work he was undertaking in the community to counter anti-vaccine disinformation. John highlighted the webinars he had attended and the collaboration with the Clinical Commissioning Group (CCG) to provide a factual response to queries raised about the safety and efficacy of the vaccine. Partners thanked the Public Health team for all the work they've done behind the scenes to develop the Community Champions initiative and to the champions themselves for their valuable efforts in sharing reliable and accurate information within the community.
- 3.4 Val Davison updated the Board on the number of COVID-19 cases in local hospitals, there were now 38 in-patients in Lewisham and 71 across South-East London. This compares to nearly 500 with Covid-19 at the peak of the pandemic in early January. Around 75% of hospital staff have now received their first dose of the vaccine. Elective pathways for non-COVID-19 illnesses were now starting to slowly get back to normal.
- 3.5 Martin Wilkinson updated the Board on the roll-out of the vaccine across Lewisham and reported good progress was being made. The CCG are looking to identify appropriate pop-up based centres to administer the jab in community settings, to encourage greater take-up across the board. Ongoing conversations are being held with community leaders to identify barriers to the take-up of the vaccine and to stress the jab was still available to those people who had missed a previous appointment, or had not come forward.
- 3.6 Faruk Majid highlighted the experiences of local GP practices and that more surgeries are working together to offer a vaccine service to patients. There are logistical challenges associated with organising the second jab for vulnerable patients and the administration around booking appointments for the younger, more numerous cohorts.
- 3.7 Donna Hayward-Sussex updated the Board on developments around mental health services and the positive response from staff in dealing with a major re-configuration of services, as social distancing means current service delivery pathways are temporarily suspended.
- 3.8 Councillor Barnham referred to the positive spirit to the vaccination programme he had witnessed when he received his first jab and the positive impact the webinars had

achieved in encouraging greater local take-up and countering negative social media opinion. The work of partners in direct community engagement in public settings was also welcomed and more will continue to be done on this front.

3.9 Action:

The Board noted the content of the report

4. Annual Public Health Report

- 4.1 Catherine Mbema introduced the annual report, which is statutory requirement for all public health authorities. The report focused on Health for All policies and adopting a whole system approach which, in light of the pressures thrown up by COVID-19, was vital to address future health challenges and tackle health inequalities. A number of new case studies from both the Council (for example, setting up a locally enhanced COVID-19 contact tracking service and establishing COVID-19 rapid testing sites across the borough) and partners have been included in the report to demonstrate how this approach has helped Lewisham cope with the demands of the crisis.
- 4.2 The report also makes several recommendations around next steps such as formalising a Health for All approach and reinforcing the strategic links between improvements in the health of the population and achieving corporate priorities. The report will shortly be published and will have an accompanying communications plan, to embed the plan as part of the COVID-19 recovery approach.
- 4.3 Next year's report will focus on the differential impacts of Covid-19 on Lewisham's population, both in terms of health and their experiences of the wider determinants of health. The 2020/21 Report will include testimonials from Lewisham residents, combined with statistical analysis of data and the findings from relevant reports and inquiries.
- 4.4 Feedback from the Board was very positive with comments that the report was a compelling read with good examples of the practical improvements that have taken place. The suggestion of adopting the whole system approach as a fresh perspective to tackle the main public health challenges (for example differential health outcomes based on levels of deprivation in different wards, and tackling obesity) in Lewisham as part of the Health and Wellbeing strategy was strongly endorsed.
- 4.5 The mental health challenges facing local people, especially children and young people, as a result of the effects of the pandemic were also highlighted. The importance of promoting CAMHS and the offer from mental health teams in schools was supported in this regard. The Chair also mentioned the work of 'Lewisham Listens'.

4.6 Actions:

The Board endorsed the annual report and supported its recommendations

More details of the programmed work Public Health and health partners are undertaking in tackling obesity and mental health issues affecting both adults and children and young people, will be reported upon at the next meeting of the Board

5. Better Care Fund Plan 2020/21

5.1 Martin Wilkinson introduced the report which provided an update on the activity that is being funded through the Better Care Fund (BCF) in 2020/21 and the arrangements for the Council and the CCG for developing the BCF Plan for 2021/22. In December the Government advised that the Plan would not need to be submitted to NHS England and NHS Improvement for approval in 2020/21. Local areas were instead required to submit an end of year reconciliation to confirm compliance with national conditions and metrics. The BCF 2021/22 Plan will be jointly developed by the Council and CCG following publication of the policy framework and planning guidance. It was highlighted the draft BCF for 2021/22 will be presented to this Board for final approval before submission.

5.2 Some of the services that have been funded through the Better Care Fund over the last year included:

Enablement Service

5.3 The Service has worked closely with Discharge to Assess to increase the numbers of people able to return home from hospital with support, thus reducing the number of people delayed in an acute bed. The number of patient discharges supported by the service has increased from 20 per week at the start of 2020 to around 30-35 patients per week currently supported to leave hospital. The service is looking at ways to increase the number of complex discharges supported through enablement to reduce the need for long term care home placements.

Community Connections Lewisham (CCL)

5.4 From the beginning of the pandemic the service worked with voluntary and community sector partners on the COVID-19 support phone line, organising food deliveries, telephone befriending and volunteering across the borough. In September 2020 CCL was redesigned to be a public facing service for people aged 18+ looking for help with their health and wellbeing. A new phone line staffed Monday-Friday 9:30am-4pm provides callers with signposts to local services, referrals to key partners (Voluntary Services Lewisham, Lewisham Foodbank, Good Gym, the Dementia Hub, Lewisham Carers, etc.) or person-centred planning to empower people to achieve their health and wellbeing goals. CCL continues to support people during COVID-19, in particular providing help with shopping and accessing food and assisting people whose health prevents them from leaving their homes.

Health Navigator Pilot

5.5 Lewisham Health and Care Partnership (LHCP) have collaborated with healthcare company, Health Navigator and partner L2S2 Ltd to launch a home monitoring solution for patients with diabetes and respiratory disease which supports early, safe discharge by providing clinical coaching and virtual ward oversight. Developed specifically for LHCP and run by registered nurses, this home monitoring solution helps ease the pressure caused by COVID-19, as patients supported through the service have ongoing access to healthcare professionals who promote home self-care.

Lewisham Medication Optimisation Service (LIMOS)

5.6 Following a request from NHSE, the LIMOS Care Home team adapted its service model to deliver clinical pharmacy support to care homes as part of the pandemic response. LIMOS adapted its service model to continue to review patients with adherence issues using telephone/video consultations and carried out home visits to enable vulnerable patients to remain at home safely. The service reviewed patients and supported care home staff to implement the national free supply of vitamin D supplementation to appropriate residents. LIMOS is currently working with care

homes and associated GP practices to implement Proxy Ordering in care homes, a system which enables care home staff to order medicines electronically through the GP system directly.

Population Health

5.7 The COVID-19 vaccine dashboard is being used by PCNs and Public Health to track vaccine uptake and understand the trends around poor uptake. The dashboard is used to see if Local Super Output Area, ethnicity and Index of Multiple Deprivation are linked in any way to poor uptake and how partners can tailor the approach to how these cohorts are reached to encourage vaccine uptake. For diabetes, there are several tools available that track undiagnosed diabetics, for example women that had gestational diabetes but have missed follow up checks so could have undiagnosed type 2 diabetes, and catching blood pressure checks carried out in secondary care. The CCG are also working with partners to support getting Lewisham patients onto the National Diabetic Prevention Programme using the pre-diabetes case finding tool.

5.8 Action: The report was noted and its recommendations agreed

6. BAME Health Inequalities Update

6.1 Catherine Mbema provided an update to the Board on work undertaken to address BAME health inequalities in Lewisham during the COVID-19 pandemic, the work of the BAME working group - which had been set up to address health inequalities in Lewisham - and to note the updated action plan. In July 2018 the Board agreed the main focus of its work should be tackling health inequalities, with an initial focus on health inequalities for BAME communities in Lewisham. Three priority areas were identified, through which the Board will play a significant role: mental health; obesity and cancer.

6.2 A draft action plan covering all three areas was developed and at the 20th March 2020 Board meeting it was agreed that the action plan should be augmented with monitoring metrics to capture progress and the impact of completing actions within the plan. A Health Inequalities Working Group has met since March 2020 to oversee implementation of the plan and for 2021 the Group will review the actions within each section of the action plan each quarter. So for the first quarter (January-March 2021) the Working Group has focussed on the Covid-19 section, reviewing the communications/engagement and data sections of the plan.

6.3 Two actions for Covid-19 communications and engagement that are in progress are 1. To develop culturally appropriate communications around Covid-19; and 2. To engage with BAME communities and provide culturally appropriate mental health support. An external provider has been commissioned to provide mental wellbeing support and resilience sessions to the Black community and Lewisham staff. For data, the action is to analyse Covid-19 mortality rates by ethnicity/country of birth and to include ethnicity as a separate field in death certificates. The BAME Ethnic Health Inequalities Toolkit continues to be finalised, with support from Board partners to provide health related ethnicity data. Different frameworks are being looked at to use the Toolkit including 'Build Back Fairer'. The Toolkit will then be presented and discussed by the health leads at the Lewisham Black and Minority Ethnic Network.

6.4 Action:

The Board noted the contents of the report and the updated action plan and that progress in finalising the Toolkit will be reported to the next meeting of the Board before publication. The Board will also discuss priority areas in the action plan and consider how to best use the baseline school data which should be available

7. Joint Strategic Needs Assessment

7.1 The report set out the revised timescale for further work on the Joint Strategic Needs Assessment (JSNA). The Board was recommended to approve the revised timelines for developing the JSNA and review the most recently published topic assessments. It was proposed to undertake this work in September when resources should be available.

7.2 When work on the JSNA recommences it was proposed it includes a topic assessment examining the wider Covid-19 impacts to support recovery planning and commissioning, with a further topic assessment refresh on Air Quality. The 'Picture of Lewisham' element of the JSNA it was proposed, be updated in spring 2021 to help commissioners and other professionals in planning and decision-making.

7.3 The Board agreed that assessing the health need impact of 'long Covid-19' needed to be added to the JSNA work as well as the younger age cohorts, who may have had COVID-19 but were not hospitalised, especially where there is a link to deprivation.

7.4 Action:

The Board agreed to a pause in the work on the JSNA and including a topic assessment to explore the wider COVID-19 risks to support recovery planning

8. Lewisham Safeguarding Adult Partnership Annual Report 2019/20

8.1 The report sets out the work carried out by the Board over the year and is for the Board's information. Key outcomes delivered included organising the first of four Networking and Safeguarding Champions events to coincide with National Hate Crime Awareness Week, supported by the Council and Metropolitan Police and delivering two Hoarding Awareness workshops. The Board approved the creation of a local Modern Slavery Network supported by the Lewisham Safeguarding Adult Partnership business unit.

8.2 The Board commended the report, the excellent examples of partnership working contained within and the fact so much continues to be done despite the restrictions imposed by the pandemic. Lessons drawn from the lockdowns will be applied to future practice for example, around dealing with the impact of loneliness and isolation. The Board were informed that a poster promoting the service offer was now ready for distribution, once it was signed off by the Chair.

8.3 Action:

The Board noted the contents of the report

9. For Information items

9.1 Michael Kerin updated the Board on the recent public engagement activities of HealthWatch Lewisham and attention was drawn to the Patient Experience Quarter 2 feedback and the Snapshot Feedback Forums with BAME communities during the pandemic. The conclusions drawn from these consultations was set out in the reports included in the agenda for the meeting.

The meeting ended at 16:22 hours