

**LONDON BOROUGH OF TOWER HAMLETS**

**MINUTES OF THE TOWER HAMLETS HEALTH AND WELLBEING BOARD**

**HELD AT 6.30 PM ON WEDNESDAY, 26 JULY 2017**

**COMMITTEE ROOM MP702, 7TH FLOOR, MULBERRY PLACE, 5 CLOVE  
CRESCENT, LONDON E14 2BG**

**Members Present:**

Councillor Rachael Saunders (Chair)

Dr Sam Everington (Vice-Chair)

Councillor David Edgar

Councillor Sirajul Islam

Councillor Danny Hassell

Denise Radley

Debbie Jones

Simon Hall

Dr Somen Banerjee

Deputy Mayor for Health and Adult  
Services

Chair of NHS Tower Hamlets Clinical  
Commissioning Group

Cabinet Member for Resources

Statutory Deputy Mayor and Cabinet  
Member for Housing

Non-executive majority group councillor

Corporate Director of Health, Adults and  
Community, LBTH

Corporate Director of Children's Services,  
LBTH

Acting Chief Officer, NHS Tower Hamlets  
Clinical Commissioning Group

Director of Public Health

**Co-opted Members Present:**

Dr Ian Basnett

Dr Navina Evans

Sue Williams

Patrick Goulbourne

Alison Robert

Public Health Director, Barts Health NHS  
Trust

Chief Executive Officer, East London and  
the Foundation Trust

Borough Commander, Metropolitan  
Police

Borough Commander, London Fire  
Brigade

Partnership Manager, Tower Hamlets  
Community and Voluntary Sector

**Others Present:**

Karen Bollan

Karen Sugars

Lonica Vanclay

Dr Hannah Emmett

Healthwatch representative

Interim Service Head of Commissioning  
and Health, LBTH

Interim Project Manager, Learning  
Disability, TH CCG

Speciality Registrar in Public Health,  
LBTH

**1. STANDING ITEMS OF BUSINESS**

**2. WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE**

The Chair, Councillor Rachel Saunders, welcomed everyone to the meeting and then asked for introductions.

Apologies for absence were received from Councillor Amy Whitelock Gibbs, Charlie Ladyman – Co-Chair Healthwatch Tower Hamlets, Jackie Sullivan – Managing Director of Hospitals, Barts Health Trust, Jane Ball – representative from Tower Hamlets Housing Forum, Fahimul Islam – Young Mayor and Stephen Ashley – Independent Chair of the Local Safeguarding Children's Board.

**2.1 MINUTES OF THE PREVIOUS MEETING AND MATTERS ARISING**

The minutes from the Board meeting of 18 April 2017 were agreed and approved as an accurate record of the meeting.

Somen Banerjee, Director of Public Health, referred to the actions from the minutes of the last meeting, namely:

- Page 4 refers to a repository where data and intelligence is collated in one place. Dr Banerjee stated that Healthwatch had confirmed that they have a repository that can be used for this purpose.
- Page 7 refers to Barts NHS Trust sharing findings of their research into sugar reduction and healthier foods with their new catering and facilities provider. Dr Ian Basnett agreed to share useful learning from contract with public health leads involved in implementing the local declaration.

**3. DECLARATIONS OF DISCLOSABLE PECUNIARY INTERESTS**

None.

**3.1 FORWARD PLAN**

Members were asked to note the forward plan for the Health and Wellbeing Board for the 2017/18 municipal year.

Councillor Hassell referred to the 'Physical Activity and Sport Strategy' report, stating that it was agreed at the last Board meeting that the report was brought forward from the 20 December 2017 meeting, to be considered at the 5 September 2017 meeting. Dr Banerjee explained that the intention was to bring the report to the 7 November 2017 meeting, however, stated that the timeline had slipped. He said that if the report came before the board in December, then it would give the Board sufficient time to comment on the consultation document.

Denise Radley, Corporate Director of Health, Adults and Community Services, stated that a report on Tower Hamlets Together governance systems needed to be added to the forward plan.

The Chair and Board Members agreed the amendment.

#### **4. TERMS OF REFERENCE, QUORUM, MEMBERSHIP AND DATES OF MEETINGS**

The Chair explained that the Council had had its Annual General Meeting where she had been appointed Chair of the Health and Wellbeing Board.

The Chair welcomed Patrick Goulbourne, Borough Commander for Tower Hamlets at the London Fire Brigade and Alison Robert – Partnership Manager, Tower Hamlets Community and Voluntary Sector as co-opted Members of the Board. She added that Charlie Ladyman – Chair of Healthwatch was on maternity leave and confirmed that Sebastian Austin Thomas Pisano was born on 3 July at the Royal London Hospital and that both mother and baby were doing well. The Chair welcomed Karen Bollan who attended on behalf of the Health watch Chair.

The Chair pointed out that nothing significant had changed in relation to the Board's Terms of reference, Membership and Quorum for the 2017/18 municipal year.

#### **RESOLVED – That:-**

1. The Terms of Reference, Quorum, Membership and dates of future meetings be noted.
2. It be noted that Councillor Rachel Saunders was the new chair of the Health and Wellbeing Board following the announcement of the Mayor's Executive Team at the Annual Meeting of the Council held on 17 May 2017.
3. Patrick Goulbourne, Borough Commander at the London Fire Brigade was welcomed to the Board as a co-opted member, whilst noting that the appointment would support the Boards' priorities around community safety and health.

#### **5. HEALTH AND WELLBEING BOARD STRATEGY 2017-20 - DELIVERING THE BOARDS PRIORITIES**

##### **5.1 DELIVERING INTEGRATED SYSTEMS - PRESENTATION**

Ms Radley provided a presentation on the Health and Wellbeing Board Strategy 2017-20, specifically on developing an integrated system. In doing so, she explained the intention to deliver better health services through partnership work. In her presentation she noted that the shared vision is to

arrange care around the person, to tackle poverty and deprivation and where possible to provide care closer to home to maximise a person's independence. She also covered the following points:

- Tower Hamlets Together is our integrated health and social care partnership for the borough (in NHS terms an “accountable care system”).
- Tower Hamlets Together Health & Wellbeing Board will be the high level board overseeing the partnership.
- The governance structure under this will be programmed in for discussion at a future board meeting.

Members noted the presentation.

## **5.2 HEALTH AND WELLBEING STRATEGY - DELIVERING THE PRIORITIES: HEALTHY PLACE**

Somen Banerjee, Director of Public Health introduced the report which provided an action plan that set out what will have been achieved by March 2018, the overall plan for the year, what will be done in the next three months and how success would be measured for each of the actions within the 'healthier place' priority.

Mr Banerjee referred to page 32 of the report and explained that previously the Board had agreed on areas that would need improvement.

Councillor Edgar referred to Action 2.1 and pointed out that prioritising planning application for Health Impact Assessment was important as every application submitted could not be assessed. Councillor Hassell impressed the importance of selecting the right applications.

Councillor Edgar stated that it was important to change people's views with regard to children playing outside. He referred to certain signs (for example – no ball games allowed) that restricted children playing. He pointed out that many people considered children playing in green spaces to be anti-social behaviour. Ms Radley explained that the Council had been specific in saying that they did not consider such activity to be anti-social behaviour.

Dr Ian Basnett, Public Health Director of Barts Health NHS Trust, stated that it was important to consider what could be done collectively. He suggested that initiatives such as supporting cycle to work schemes and bans on idling vehicles would be advantageous and said that it would be beneficial to ask membership organisations to sign up to the initiatives. Dr Banerjee agreed that there were many existing frameworks which could be turned into local pledges.

Patrick Goulbourne, Borough Commander for London Fire Brigade (LFB), explained that the LFB had committed to change their fleet to electric vehicles. He made the point that it would be beneficial if other organisations made a similar commitment.

### **5.3 SHARED OUTCOMES FRAMEWORK**

Dr Banerjee introduced the report and explained that the foundation of the Health and Wellbeing Strategy was a shared outcomes framework that articulated the partnership aspiration for improvement of health and wellbeing in the borough.

Dr Banerjee stated that the work commissioned by Tower Hamlets Together in 2016/17 involved working with partners and the public to identify a set of primary outcomes and primary and secondary indicators to track progress against primary outcomes. He then explained that the report outlined the plans for 2017/18 to establish the Outcomes Framework as a foundation and central point of reference and logic modelling for driving improvement in health outcomes.

Dr Navina Evans, Director of Operations and Deputy Chief Executive of East London NHS and the Foundation, stated that she was interested in patient reported outcome measures. She explained that if they worked well, what was discovered could be a reflection on the whole system.

Dr Basnett described the content of the report as being excellent. He asked that, in setting the system up, could a capability be created to analyse the information from an equality perspective.

## **6. INITIAL DRAFT OF THE ADULT LEARNING DISABILITY STRATEGY**

Lonica Vanclay, Interim Project Manager, Joint Commissioning, Clinical Commissioning Group, introduced the report and explained that the report presented a near final draft of the annual learning disability Strategy with information about the process and timescales for completion. She stated that the aim was to provide the Board with an opportunity to input to and guide the Strategy.

Ms Vanclay explained that in drafting the Strategy, they had sought views from those with learning disabilities, partners and carers. She stated that those with learning difficulties had lower life expectancies and lower employment levels than the rest of the population.

Ms Vanclay said that the Strategy set out key actions for the next few years and confirmed that it would be brought back to the Board for final sign off.

The Chair asked that it was made clear in the Strategy how people with learning difficulties have gained employment and that case studies were used to highlight the point.

Ms Radley said that this was a big issue and asked if there was more that could be done in this Council to improve the number of people employed with learning difficulties.

Dr Banerjee asked where the drive would come from in Primary Care for this to happen and whether GPs were being championed.

**RESOLVED** – That the Health and Wellbeing Board:

1. Agrees that the Strategy does use Health and Wellbeing branding
2. Agrees that the joint Chairs of the Board do wish to have a foreword under their signature in the Strategy.
3. Notes that the final designed version will come to the Board for approval on 5 September 2017 (then to CCG Governing Body on 6 September and Cabinet on 19 September).
4. Agrees that the Learning Disability Partnership Board report to the Board through the Joint Commissioning Executive.

## **7. SUICIDE PREVENTION PLAN - DRAFT FOR CONSULTATION**

Dr Hannah Emmett, Speciality Registrar in Public Health, gave a short introduction on the report and provided a presentation on creating a Suicide Prevention Plan for Tower Hamlets. She explained that all Local Authorities as part of the Five Year Forward View for Mental Health to have a 'suicide prevention plan' in place by 2017. Public England has provided guidance outlining risk factors and possible areas of action.

In her presentation Dr Hannah Emmett noted that the numbers are relatively small locally but the strategy will be developed to ensure services will improve support for those in crisis and address specific local concerns.

She further explained that that the strategy will need to take in to account where possible long term circumstances that can affect a person's mental health and wellbeing i.e. history of drug or alcohol abuse and also acute life events such as loss of employment or debt.

Dr Emmett explained that they were committed to undertake public consultation in the next few weeks as final approval of the Suicide Prevention Plan was required in September 2017. The focus of the consultation will be to ensure the priorities are right for the local community and that monitoring arrangements are sufficient. They will want to understand from the community and local services whether a zero suicide option should be adopted. They have identified a wide range of stakeholders to engage and will ensure a wide range of views are taken into consideration.

Debbie Jones, Director of Children's Services, pointed out that in relation to suicide, under reporting was a big issue. She asked if there was anything further that could be done to flag up the risks. Chris Lovitt, Associate Director of Public Health, explained that it was important to know when a death was

being considered as a suicide. He pointed out the importance of organisations such as the Metropolitan Police sharing information as the plan required cooperation. Sue Williams, Borough Commander for the Metropolitan Police, stated that her staff attended every suicide call in the borough and confirmed that they would have a lot of relevant information that could be shared. She also added that deaths from high rise buildings were not treated as suicides.

Dr Evans welcomed the plan and explained that after suicides, the NHS looked into the care that that person had received. She confirmed that there was a lot more that could be done.

Mr Goulbourne referred to the responsibility that employers have to provide support to staff and stated that it was important that this was included in the Strategy.

Ms Bollan suggested seeking the views of those that have attempted suicide and relatives of those who had committed suicide as a way of obtaining relevant and meaningful information. Mr Lovitt confirmed that they were identifying sites where suicides often occur with the intention of strengthening their knowledge on the subject. He confirmed that he was happy to amend the consultation document, subject to agreement by CCG representatives.

Councillor Islam referred to the communication and awareness section of the draft consultation document and suggested including some information on how different religions respond to and view suicide.

Ms Williams stated that, as a result of suicides of Police Constables (PCs), the Metropolitan Police Service had produced a strategy on suicide. She referred to the importance of giving appropriate advice and guidance to employers, colleagues and peers.

The Chair gave the view that a significant barrier is resources as support perhaps cannot be offered to everyone who was at risk of suicide. She stated that if the target was zero suicides, then there would be pressure to reach that target and it may be considered as failure if zero was not reached. She confirmed that the ambition should be that suicide did not happen.

The Health and Wellbeing Board were recommended to:

1. Consider whether these are the correct priorities
2. Consider whether the action plan addresses the priorities
3. Consider whether the monitoring arrangements are sufficient
4. Request the Suicide Prevention Plan to return, post consultation, to the September Board for adoption.

Members of the Board agreed the above recommendations and asked that the final strategy be brought back to the next Health and Wellbeing Board meeting for formal adoption.

The meeting then became inquorate due to the two representatives from the NHS Tower Hamlets Clinical Commissioning Group (CCG) leaving the meeting. The Chair agreed that the Board would make 'shadow decisions' and would have them formally ratified at the next meeting of the Health and Wellbeing Board.

## **8. IMPROVED BETTER CARE FUND 2017-19 - NEW ADULT SOCIAL CARE MONIES**

Karen Sugars, Interim Service Head of Commissioning and Health, introduced the report and in doing so, explained that in June 2013, the Government Spending Round set out plans for new funding arrangements, now referred to as the Better Care Fund (BCF). She confirmed that the aim of the BCF was to deliver better outcomes and secure greater efficiency in health and social care services through better integration of provision and to accelerate health and social care integration across the country.

Councillor Hassell stated that he was pleased to see planned work around anti-social behaviour and mental health. The Chair asked for a note setting out the work being done in those areas.

It was noted that the following recommendations have been fully endorsed by the Joint Commissioning Executive in attendance of co-chairs Denise Radley, Director of Health and Adults and Community, LBTH and Simon Hall, Acting Chief Officer of CCG.

The Health and Wellbeing Board were recommended to:

- 1.1 Note the current position concerning the development of the Improved Better Care Fund programme for 2017-19.
- 1.2 Approve the approach being followed and the proposed programme summarised in Appendix 2.
- 1.3 Agree that oversight of the final programme should be delegated to the Joint Commissioning Executive.
- 1.4 Agree that, subject to agreement by the Joint Commissioning Executive, the proposed contingency provision should be allocated to further initiatives.
- 1.5 Agree that, subject to the finalisation of the proposals, schemes should be initiated with immediate effect.

The remaining Members of the Board agreed to the recommendations and accepted that formal adoption of this can be taken at the next board meeting on 5 September 2017.



**9. RE-COMMISSIONING OF THE SCHOOL OF THE SCHOOL HEALTH SERVICE AND CHILD AND FAMILY WEIGHT MANAGEMENT SERVICE**

Abigail Knight, Associate Director of Public Health for Children and Families, introduced the report. She explained that the School Health service and the Children and Family Weight Management service were funded from the local authority public health grant and were moving into the final year of three year contracts and, as a result, would need to be re-commissioned.

The Chair stated that child obesity was a priority for the Board and explained that there was a sub-group charged with reviewing the issue. She stated that the subject needed a more detailed conversation and Councillor Hassell requested an update on what pressures there were.

The Health and Wellbeing Board was recommended to review the briefing and comment on the proposed new model.

The remaining Members of the Board agreed to the proposed new model and will agreed to ratify at the next Health and Wellbeing Board on 5 September 2017.

**10. ANY OTHER BUSINESS**

Health and Wellbeing Development Session

The Chair explained that the Board was trying to schedule a Health and Wellbeing development session to focus on shared vision and governance. The Chair proposed setting a date in September to continue discussions. She asked that colleagues provide details of their availability to Jamal Uddin – Strategy, Policy and Performance Officer.

The Chair also suggested the Board could consider extending the start of the next Board meeting by an hour to facilitate the development session (i.e. 5<sup>th</sup> September at 4.30pm).

Physical Activity and Sport Strategy

The Chair explained that a previous meeting of the Health and Wellbeing Board, Members had shown interest in engaging with the Physical Activity and Sport Strategy. She stated that it would not be possible to bring an update to the Board at the September 2017 meeting but confirmed that she would like to hold a consultation session with Board members.

Healthwatch Community Event

The Chair confirmed that Healthwatch was holding a community event with Health and Wellbeing Board partners on Wednesday 9 August at 11.30am – 3.30pm. She stated that the event would take place in Victoria Park next to the large children's playground. She confirmed that:

- Board Members were encouraged to attend and spread the word; and
- An e-flier would be circulated to Board Members for information.

**11. DATE OF NEXT MEETING**

The meeting ended at 8.34pm

Chair, Councillor Rachael Saunders  
Tower Hamlets Health and Wellbeing Board