

LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE TOWER HAMLETS HEALTH AND WELLBEING BOARD

HELD AT 5.00 P.M. ON MONDAY, 24 MARCH 2014

**COMMITTEE ROOM MP701, 7TH FLOOR, TOWN HALL, MULBERRY PLACE, 5
CLOVE CRESCENT, LONDON, E14 2B**

Members Present:

Councillor Abdul Asad (Vice-Chair)	(Cabinet Member for Health and Wellbeing)
Robert McCulloch-Graham	(Corporate Director, Education Social Care and Wellbeing, LBTH)
Dr Somen Banerjee	(Interim Director of Public Health, LBTH)
Dr Amjad Rahi	(Healthwatch Tower Hamlets Representative)
Dr Sam Everington	(Chair, Tower Hamlets Clinical Commissioning Group)
John Wardell (Substitute for Jane Milligan)	(Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group)

Co-opted Members Present:

Sharon Hanooman	(Vice-Chair, Tower Hamlets Community Voluntary Sector)
Robert Rose (Substitute for Sue Lewis)	(Hospital Director for Royal London and Mile End)
Steve Stride	(Chief Executive, Poplar HARCA)
John Wilkins	(East London NHS Foundation Trust)

Others Present:

Dr Steve Ryan	(Medical Director, Barts Health NHS Trust)
Brian Parrott	(Independent Chair - Tower Hamlets Safeguarding Adults Board)
Daniel Heller	(Tower Hamlets, Clinical Commissioning Group)
Sarah Castro	(Poplar HARCA)
Mark Gravel	(Barts Health NHS Trust)
Ian Read	(Communications Advisor, Communications, Directorate of Law, Probity and Governance)

Officers in Attendance:

Deborah Cohen	(Service Head, Commissioning and Health, Education, Social Care and Wellbeing, LBTH)
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David Galpin	(Service Head, Legal Services, Directorate Law Probity and Governance, LBTH)
Robert Driver	(Senior Strategy, Policy and Performance Officer, Education, Social Care and Wellbeing LBTH)
Leo Nicholas	(Strategy, Policy and Performance Officer, Education, Social Care and Wellbeing LBTH)
Nishaat Ismail	(Committee Officer, Democratic Services, Directorate Law Probity and Governance LBTH)
Zoe Folley	(Committee Officer, Directorate Law, Probity and Governance LBTH)

Apologies:

Councillors Oliur Rahman, Denise Jones

Jane Milligan, Alistair Camp and Sue Lewis

COUNCILLOR ABDUL ASAD (CHAIR)

The Chair announced that Items 2.3, Health & Housing workshop feedback and 3.3 Reform of Special Educational Needs (SEN) would be deferred for consideration at the next meeting of the Board in July 2014. It was also reported that Robert Rose, (Hospital Director for Royal London and Mile End) would be replacing Sue Lewis (Chief Operating Officer, Barts Health NHS Trust) as a co-opted Member of the Board.

Deborah Cohen (Service Head for Commissioning and Health, Education, Social Care and Wellbeing, LBTH) referred to the postponement of the item on the Commissioning of Primary Care services until the July 2014 meeting of the Board. Members noted the links between this and agenda item 2.2, Clinical Commissioning Group Operating Plan and Quality, Innovation, Productivity and Prevention. The Board should note this when considering item 2.2.

The Board were also advised of the recent submission of an application for a small amount of funding from the Local Government Association. If successful this would help shape the work of the HWB in the future.

1.1 Minutes of the Previous Meeting and Matters Arising

The minutes of the meeting held on 6th February 2014 were approved as a correct record of the proceedings.

1.2 Declarations of Disclosable Pecuniary Interests

No declarations of Disclosable Pecuniary Interest were made.

1.3 Forward Programme

The Board noted the Forward Plan.

2. HEALTH AND WELLBEING STRATEGY

2.1 The Care Quality Commission feedback on Barts Health Inspection and Action Plan

The Board welcomed to the meeting Dr Steve Ryan (Barts Health's Medical Director) to present the outcome of the Care Quality Commission (CQC) inspection of Barts Trust hospital sites in November 2013 and the Trust response to this.

Dr Ryan explained the nature of the inspection and the findings for each hospital site. He highlighted the positive findings regarding the quality of staff and particular services. The inspectorate identified specific area of service excellence. He also highlighted the areas identified for improvement around: complaint handling, staff engagement and morale, amongst other issues.

He explained the scope of the action plans, developed in response to the inspection. This included a single high level action plan and five site specific plans for the individual hospitals. The Trust wide actions included: ensuring staffing levels reflected patient needs in wards; ensuring equipment was readily available, providing 24/7 consultant cover, ensuring the risk registers were managed well; improving staff morale, engagement and visible leadership and learning from experience.

Work was underway to facilitate staff engagement through online surveys; to improve integrated care; to improve staff training; to enhance the visibility of and engagement with senior managers and to remedy the staff culture issues.

It was also reported that the Trust placed a lot of importance on the feedback from Heathwatch in monitoring and delivering services.

The Board asked questions about the reasons for the issues and the perceptions around staff culture, given the feedback.

Dr Ryan commented that certain issues were long term issues and were legacies from before the merger. Nevertheless this was now an opportunity to address these issues. Dr Ryan noted the issues around staff culture that, in his opinion, were mainly due to the pressures from the working environment. The Trust had carried out a lot of work to address such issues. However, it

was noted that more needed to be done. Such issues were prevalent across the NHS generally.

In response to further questions, Mr Ryan noted the need for a flow chart highlighting the complaints procedure. There was a great deal of work in progress with the Complaints Team to address complaints at an early stage to avoid going through the formal process that was very lengthy. Dr Ryan also clarified the meaning of a 'never event' and the measures to prevent such instances.

Dr Ryan confirmed that the Healthwatch feedback would be incorporated into the CQC inspection action plan.

Resolved:

That the contents of the report and Barts Health's response to the CQC inspection and Healthwatch feedback be noted.

2.2 Tower Hamlets Clinical Commissioning Group Operating Plan and Quality, Innovation, Productivity and Prevention

John Wardell (Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group THCCG) presented the report. The report outlined the CCG's final Operating Plan due for submission to the NHS England on 4th April 2014, following consideration of the draft plan at HWB in February. The operating plan outlined the key actions and outcomes the CCG expected to achieve in relation to the NHS England's key priorities.

Mr Wardell explained the main sections of the Operating Plan. He also drew attention to the summary of the CCG's improvement plans focusing on Quality, Innovation, Productivity and Prevention (QIPP) and the alignment of these plans to the Health and Wellbeing Strategy.

He also highlighted the summary of the CCG's planned expenditure over the next two years. The report also contained a summary of the draft Better Care Fund submission.

The Board sought clarity on some of the terminology in the report and the expected outcomes. In particular, the amount of patients experiencing poor experience of GP and community care. Mr Wardell advised that this figure was expected to decrease in the long term as shown in the committee report. He outlined the remit of the CCG in respect of GP performance. Whilst the CCG lacked any contractual measures to directly address this issue, it was working with relevant colleagues and took action within its remit to secure improvements.

Dr Sam Everington stressed the need for the feedback to be kept in perspective given the pressures on staff and budgets and that the results compared well to others. It was anticipated that the work on intergraded care should make a key difference.

Resolved:

That the report be noted.

2.3 Health and housing: workshop feedback- Item Deferred

Item deferred for consideration at the next meeting of the Board in July 2014.

Action: Leo Nicholas (Strategy and Performance Officer, LBTH) to add to the Board's Forward Plan.

2.4 Transforming services, changing lives in east London

Dr Sam Everington (Chair, Tower Hamlets Clinical Commissioning Group) presented the report regarding the East London CCG's plans to develop a new 'Hospital Care workstream'. Dr Everington considered that this was a really important area of work.

He explained the need for the initiative driven by developments in the local health economy. For example: population changes, the need to deliver integrated services; to utilise new technology and more effective ways of working to provide better outcomes for patients.

The Tower Hamlets CGG would be engaging with key stakeholders such as Local Authorities and HWBs to develop and test ideas. It was planned to establish a number of clinical working groups to take forward the programme. These would focus on: unplanned care/planned care, clinical support services, paediatrics, maternity and neonatal care. Once completed, the case for change would be subject to far reaching consultation.

The Board noted the proposed timescale for the initiative and the next steps in the process as detailed in the report.

In response, Dr Steve Ryan (Barts Health's Medical Director) welcomed the proposals. He advised that the plans had been taken to Healthwatch for feedback. There was much support for the use of new technologies such as "skype" consultations. He stressed the need for ongoing consultation with Healthwatch over these plans and with secondary care providers.

The Board also requested that representatives from the voluntary sector should be invited to the event on 4th April 2014.

Resolved:

1. That the date of the case for change stakeholder event (4 April 2014) be noted.
2. That the case for change be discussed at the 9th September 2014 meeting of the Health and Wellbeing Board

Action: Leo Nicholas to add to the Board's Forward Plan.

2.5 Memorandum of Understanding

Deborah Cohen (Service Head for Commissioning and Health, Education, Social Care and Wellbeing) presented an update on the Memorandum of Understanding (MOU) between Barts Health, Tower Hamlets Clinical Commissioning Group (CCG) and the Council. The Board noted the aim of the agreement to reduce health inequalities and improve the health of local people in respect of a number of health and social care factors. It also had a focus on providing employment opportunities for local people.

Ms Cohen welcomed the creation of the Barts Health Learning Hub (as detailed in Appendix 2 of the report). The parties should be congratulated on championing this work.

Ms Cohen also drew attention to the recommendations in the report. If agreed, it would be necessary to work with the Public Health at the Council and at Barts Health Trust

Sharon Hanoonman (Vice-Chair, Tower Hamlets, Community Voluntary Sector) urged that the MOU should be widely promoted so that organisations were aware of the agreement. John Wardell (Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group THCCG) expressed support for the MOU targets to be broadened to include the aims in the Mental Health Strategy and relevant aspect of the CCG plans.

Resolved:

That the Board note:

- Progress made on the MOU (Appendix 2 and Appendix 3)
- The ongoing work between LBTH and Barts Health NHS Trust around employment
- The overlap between the MOU (especially paragraphs 7 and 8) and the work on the BCF and integration and that the MOU may be a duplication of this area of the Board's work. This will be reflected in the update referred to in the Committee Report
- That the MOU can be used as a way to maximise social value (in the sense of the Public Values (Social Value) Act 2012) and that officers will look at how to measure this more formally as a way of evaluating the success of the MOU.

That it be Agreed that:

- That the MOU be reviewed in early 2014-15 and an update be taken to the Health and Wellbeing Board not later than July 2014 that reflects the above comments.

Action:

Deborah Cohen and Leo Nicholas

3. REGULATORY OVERSIGHT

3.1 Oral Health of Children

Dr Somen Banerjee (Interim Director of Public Health, LBTH) gave an update on the oral health of children in the Borough. The findings were derived from the national survey of 5 year olds carried out in 2012 and access figures from 2013 published by the Health and Social Care Information Centre.

He drew attention to the proportion of 5 year old children with decay experience in TH that was above the London and national average. The survey also showed that the proportion of local children accessing dental services had increased due to the investment in dental services. Nevertheless, both figures were below the target.

The Council was implementing a number of programmes targeted at children including school fluoride programmes and teeth brushing advice. It had also taken the issues around capacity to the NHS.

In response, the Board expressed concern about the level of tooth decay in local children. The Board stressed the need to work closely with schools and families to improve dental care and address the underlying issues.

Concern was also expressed about the perceived links between tooth decay and a range of other health issues seen in young children such as obesity. It was considered that a holistic approach needed to be taken to these problems and that the lessons learnt from the adult integrated care services could be applied to the services for this age group.

One idea might be to undertake out reach work with families in addressing these problems or possibly to reintroduce mobile dental units to provide education on young children's oral health. There might also be opportunities to address these matters in the Child Health Review and through the changes in school nursing.

As a result, the Board **Agreed** to set up a working group to investigate the issues around dental decay in 0-5 year olds in TH and other linked health problems. It was agreed that the working group would report back to the Board in three months time.

Resolved:

1. That it be agreed to promote the Council's engagement with NHS England to increase the capacity within general dental practice including the resolution of issues delaying the opening of the new dental practice at the Harford Health Centre.
2. That the importance of oral health improvement programmes for children including the school fluoride varnish programme in addressing trends in dental decay be noted.
3. That it be agreed to explore the possibility of including figures from the dental school primary care service in monitoring the dental access indicator.
4. That a working group be set up to investigate the issues around dental decay in 0-5 year olds in Tower Hamlets and other linked health problems and report back to the Health and Wellbeing Board in three months time.

Action: Robert McCulloch-Graham (Corporate Director, Education Social Care and Wellbeing, LBTH), and Somen Banerjee, (Interim Director of Public Health).

3.2 Better Care Fund Planning Template

The report was printed separately from the main agenda pack but was circulated by the statutory deadline.

Deborah Cohen (Service Head for Commissioning and Health, Education, Social Care and Wellbeing) introduced the final draft of the Better Care Fund planning template following consideration of the draft template at the last Board meeting in February 2014.

Ms Cohen highlighted the changes to the template following that meeting. If approved the proposals would be submitted to the Council's Cabinet for agreement.

A question was asked about the process for patient access to the care pathway. It was confirmed that access would be through GP referral.

John Wardell explained the nature of the consultation in developing the template with services providers, users and the public. This included the use of focus groups to gain feedback on services.

Resolved:

That the final version of the Better Care Fund Planning Template (Appendix 1) be agreed for final submission to NHS England on 4 April 2014

3.3 Reform of Special Educational Needs (SEN): The Children and Families Bill 2013 & the Draft SEN Code of Practice

Item deferred for consideration at the next meeting of the Board in July

Action: Leo Nicholas to add to the Board's Forward Plan.

3.4 Protocol in support of the relationship between the Tower Hamlets Health and Wellbeing Board, the Tower Hamlets Local Safeguarding Children Board and the Tower Hamlets Local Safeguarding Adults Board

Brian Parrott (Independent Chair of the Tower Hamlets Safeguarding Adults Board) presented the protocol following consideration of the draft proposals at the Shadow Health and Wellbeing Board in September 2013.

The protocol sets out the role and responsibilities of each Board and the interrelations between them in terms of safeguarding and the effective coordination of work.

It was intended that the relationship between the Boards should be reciprocal in nature in terms of reporting and accountability.

Resolved:

1. That the Protocol, attached to the Committee report, be agreed in support of the relationship between the Tower Hamlets Health and Wellbeing Board, the Tower Hamlets Local Safeguarding Children Board and the Tower Hamlets Local Safeguarding Adults Board
2. That the timescales for sharing for plans and priorities set out in the protocol and Committee report be noted.

Action: Louse Russell, Brian Parrott, and Sarah Baker, (Strategy - Partnerships and Performance, LBTH).

4. ANY OTHER BUSINESS

Dr Amjad Rahi (Healthwatch Tower Hamlets Representative) drew attention to a recent presentation by Dr Sam Everington on social prescribing. He asked whether this presentation should be given to the Board. Deborah Cohen agreed to look into this.

Action: Deborah Cohen.

The meeting ended at 6.30 p.m.

Vice Chair, Abdul Asad
Tower Hamlets Health and Wellbeing Board