

LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE TOWER HAMLETS HEALTH AND WELLBEING BOARD

HELD AT 5.45 P.M. ON TUESDAY, 9 SEPTEMBER 2014

**COMMITTEE ROOM 1, 1ST FLOOR, TOWN HALL, MULBERRY PLACE, TOWN
HALL, 5 CLOVE CRESCENT, LONDON, E14 2BG**

Members Present:

Councillor Abdul Asad (Vice-Chair)	(Cabinet Member for Health and Adult Services)
Councillor Alibor Choudhury	(Cabinet Member for Resources)
Councillor Mahbub Alam	(Executive Advisor on Adult Social Care)
Councillor Denise Jones	(Non-Executive Councillor)
Robert McCulloch-Graham	(Corporate Director, Education Social Care and Wellbeing, LBTH)
Dr Somen Banerjee	(Interim Director of Public Health, LBTH)
John Wardell (Substitute for Jane Milligan)	(Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group)

Co-opted Members Present:

Alastair Camp	(Non-Executive Director Bart's Health and Chair of the Integrated Care Board)
Steve Stride	(Chief Executive, Poplar HARCA)
Mahdi Alam	(Young Mayor)

Other Councillors Present:

Councillor Danny Hassell
Councillor Andrew Wood

Others Present:

Sarah Baker	(Tower Hamlets Independent Local Safeguarding Children's Board Chair)
Roger Clifton	(Chief Executive Officer, East London Vision)
Neil Kennett-Brown	(Programme Director, Transformational Change NEL Commissioning Support Unit)
Dr. Anna Riddell	(Children's Services Clinical Director, Children's Clinical Academic Group)

Officers in Attendance:

Deborah Cohen	(Service Head, Commissioning and Health, Education, Social Care &
---------------	-------------------------------------------------------------------

David Galpin	Wellbeing, LBTH) (Service Head, Legal Services, Law Probity & Governance, LBTH)
Shazia Hussain	(Service Head Culture, Learning and Leisure, Communities Localities & Culture, LBTH)
Jack Kerr	(Strategy Policy & Performance Officer, LBTH)
Zoe Folley	(Committee Officer, Directorate Law, Probity and Governance, LBTH)

Apologies:

Councillor Gulam Robbani, Dr Sam Everington, Jane Milligan, Sharon Hanooman, John Wilkins and James Ross

COUNCILLOR ABDUL ASAD (CHAIR)

Given the need to consider the Better Care Fund report at this meeting, the Chair decided to adjourn the meeting to obtain a quorum.

In the meantime, those present received an informal presentation from Roger Clifton (Chief Operating Officer of the East London Vision) on the Tower Hamlets Plan for Eye Care.

The meeting reconvened when the meeting was quorate and the formal meeting began.

Change in the order of business.

The Board agreed to change the order of business as follows: Item 2.4, 1.1-1.3, 3.1, 3.2 and 2.5. However for ease of reference, the minutes are set out in agenda order.

1. STANDING ITEMS OF BUSINESS

1.1 Welcome, Introductions and Apologies for Absence

Councillor Asad welcomed everyone to the meeting and invited everyone to introduce themselves.

1.2 Declarations of Disclosable Pecuniary Interests

No interests were declared.

1.3 Minutes of the Previous Meeting and Matters Arising

Resolved:

The minutes of the meeting held on 8th July 2014 be approved as a correct record.

Regarding the Presentation on the Expression of Interest for the co-commissioning of Primary Care Services in Tower Hamlets (item 2.4), John Wardell (Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group) reported that it was expected to receive feedback on the application soon.

He also reported that no feedback had been received on the letter to the Secretary of State about GP services and the Minimum Practice Income Guarantee. However, it was understood that short term support would be made available for GP surgeries readjusting to the changes subject to compliance to a criteria. Mr Wardell stated that the CCG could carry out work to identify how many GP surgeries in TH could meet this criteria and were offering surgeries support to meet the criteria.

1.4 Forward Programme

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

1.5 Healthwatch Update

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

2. HEALTH AND WELLBEING STRATEGY

2.1 Health and Wellbeing Strategy 2013/14 Year End Monitoring Report

Report deferred for consideration at the next meeting of the Board in November 2014.

2.2 Tower Hamlets Plan for Eye Care

Discussed informally before meeting.

2.3 Integrated Care Update

Report deferred for consideration at the next meeting of the Board in November 2014.

2.4 Resubmission of the Better Care Fund Planning Template

Special reasons for urgency.

- The report was unavailable within the standard timescales set out in the Authority's Constitution because of continuing work to review the new NHS criteria for Better Care Fund applications and to finalise the Tower Hamlets Council and CCG submission.
- One of the terms of the Better Care Fund for 2015/16, is the requirement that HWBBs approve for submission to the Department of Health the updated template document which sets out the CCG and Council's joint plans for the application of those monies. The HWBB approved the Local Authority and CCGs BCF Planning Template on the 24th March 2014. However, following on from this the Department of Health and Local Government Association has asked all Local Authorities and CCGs to resubmit their Better Care Fund Planning Templates for 2015/16 with more narrative and detail on the proposed expenditure of the fund. Local Authorities and Clinical Commissioning Groups (CCGs) are now required to resubmit their jointly agreed Better Care Fund Planning Template for 2015-16 to the Local Government Association (LGA) and NHS England by 19th September 2014.

Deborah Cohen (Service Head, Commissioning and Strategy, Education, Social Care and Wellbeing, LBTH) invited the Board to consider the revised Better Care Fund (BCF) Planning template following consideration of the original BCF by the Board on 24th March 2014.

She explained the need for the resubmission of the template to reflect the reinstatement of the 'payment for performance' aspect for emergency admissions. As a result, greater narrative on the budget plans were required. The general thrust was the same as the original BCF plans signed off by the Board in March 2014.

Members were reminded of the aims of the BCF to deliver better integrated services, shared by the NHS and Local Authorities, in community settings for older and disabled people. Members were also advised of the key features of the BCF including the implementation plans.

It was anticipated that in future, a BCF model could be developed for Children's Services. A Member sought clarity about this.

It was noted that steps were being taken to ensure the BCF plans fitted into other health strategies – such as the CCG plans and the transforming lives agenda. John Wardell (Deputy Chief Officer, Tower Hamlets Clinical Commissioning Group) assured Members that the plans fully complied with the government requirements and highlighted the significant amount of

consultation with service users on the plan. He welcomed the true partnership approach to the BCF.

The Chair thanked the Council and the CCG staff for all their work in the BCF initiative and making it a success.

Subject to Mayoral approval

1. That the resubmitted version of the Better Care Fund Planning Template (Appendix 1) be agreed before final submission to NHS England on 19 September 2014
2. That it be noted that the resubmitted Better Care Fund Planning Template does not deviate from the original submission in April, but provides more detail on the agreed budget lines; risk mitigation and outcomes.

2.5 Liver Disease in Tower Hamlets - What are the issues, why does it need to be a priority and what are we doing?

Dr Somen Banerjee, (Interim Director of Public Health, LBTH) presented the report on Liver Disease in Tower Hamlets. He drew attention to the relatively high levels of liver disease in the Borough, based on a needs assessment, and the actions underway to address this. The aims for the future included: to increase awareness of liver disease, reduce incidence and improve early identification of hepatitis eg through immunisation and case finding, better linking of services, such as the drugs and alcohol services with liver disease treatment pathways. The priorities were fully set out in the paper.

In response to questions, the Board heard about the risk factors for liver disease such as diabetes and lifestyle factors. The Board felt that it was important to increase awareness of liver disease and the causes amongst younger people and teenagers given experience. It was suggested that the use of social marketing could help raise awareness amongst young people. The Board also noted the need to raise awareness in schools.

Members also noted the proposed timescale for these plans that reflected the service procurement timescale.

Resolved:

1. That the report and Board comments on the report be noted.
2. That an update on progress be brought to the Board in 9 months.

3. REGULATORY OVERSIGHT

3.1 Transforming Services, Changing Lives

Neil Kennett-Brown (Programme Director, Transformational Change NEL Commissioning Support Unit) and Dr Anna Riddell (Children's Services Clinical Director Children's Clinical Academic Group Barts Health NHS Trust), presented the progress report on the Transforming Services, Changing Lives initiative.

The Board were reminded of the background to the programme, established by local health care providers to provide the best possible health services for local people. They also explained the drivers for change including: population growth and changes, the need to improve services to meet the challenges and to make better use of technology and resources.

They reminded Members of the continuing work to gain feedback on the plans including engagement with the patient group Health watch. Further consultation was planned. They also explained the key milestones. The interim Case for Change was published in July 2014. It was planned that the final plans would be published in the Autumn. The initiative covered a number of key areas including adolescent services, community services and urgent care. It did not at this stage outline any recommendations for change

With the permission of the Chair, the Board heard from Councillor Andrew Wood. Whilst noting the involvement of patients groups in the process, it was felt that the initiative had moved too quickly and that more effort should be made so that patients were on board.

A Board Member also stressed that the programme was about the benefits of collaboration across the North East London health economy and London as whole. It was not clear that this came across strongly in the public report.

The Chair of the Children's Safeguarding Board stressed the need for the Board to be fully involved in and consulted on the initiative.

It was also reported that LB Newham were considering setting up a joint HWB with other Authorities.

Resolved:

1. That the feedback from the Board be reported to the programme team based on their review of the Interim Case for Change. This will be used in the development of the final case for change, which is due to be published in October.
2. That the requirements and timings for future updates and presentations be agreed about the final Case for Change and any future work programmes.

3.2 Memorandum of Understanding

Deborah Cohen (Service Head, Commissioning and Strategy, Education, Social Care and Wellbeing, LBTH) presented the report on progress with the Memorandum of Understanding (MOU). The MOU was a non legally binding agreement between LBTH, the CCG and Barts Health to reduce inequalities in respect of health and social care.

Most of the actions in the MOU had now been completed or superseded by the Better Care Fund. However, there was still a need to focus on the employment aspects in the MOU. These actions (points 5 and 6 in Appendix 1) would be taken forward by the Council's Development and Renewal Directorate.

It was noted that Bart's Health worked closely with the Council in creating local employment opportunities and skills as part of the initiative. (Appendix 3 of the report provided a breakdown of Bart's Health staff at 31st March 2014). Alistair Camp (Non-Executive Director, Barts Health and Chair of the Integrated Care Board) commented on the success of the placement scheme in terms of securing job offers for participants. It remained one of Bart's Health key ways of tackling unemployment.

Resolved:

That the Board note:

1. Progress made on the MOU, contained within the table within this report
2. The need for ongoing working between the Council and Barts Health on employment which exists in a number of different parts of the One Tower Hamlets Partnership but specifically lead by the One Tower Hamlets Prosperous Community theme which drives the work on employment and skills.
3. That the majority of the MOU's actions are being carried forward by existing work programmes connected to the HWBB such as the Better Care Fund, Public Health's Healthy Lives work programme and HWBB's subgroups.
4. The recommendations laid out in the table outlining the original MOU actions.
5. That the work on employment, enterprise and young people's careers be better carried out through the work of the Economic Task Force and that the decision to put in place a new MOU between the Council and Barts Health on skills development and local employment is facilitated by the Councils Economic Development Team.

3.3 Community Plan Refresh - Presentation

Report deferred for consideration at the next meeting of the Board in November 2014.

4. ANY OTHER BUSINESS

4.1 Deborah Cohen (Service Head, Commissioning and Strategy, Education, Social Care and Wellbeing, LBTH) - Last Meeting of the Board.

The Chair reported that this would be the last meeting of the Board that Deborah Cohen (Service Head, Commissioning and Strategy, Education, Social Care and Wellbeing, LBTH) would be attending as she would be leaving the Authority for a position with the NHS. The Board thanked Ms Cohen for all her work for the Board and Tower Hamlets and wished her well for the future.

4.2 Care Act Workshop 22nd September 3pm - 5pm, Jack Dash House, Council Chambers

Noted.

The meeting ended at 7.00 p.m.

Vice Chair,
Tower Hamlets Health and Wellbeing Board