

LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE TOWER HAMLETS HEALTH AND WELLBEING BOARD

HELD AT 5.00 P.M. ON MONDAY, 8 OCTOBER 2018

ABERFELDY NEIGHBOURHOOD CENTRE, LONDON, E14 0NU

Members

Cllr Denise Jones	Chair and Cabinet Member for Health and Adult Services
Dr Sam Everington	Vice Chair and Chair of the THCCG
Cllr Danny Hassell	Cabinet Member for Children's Services
Cllr Sirajul Islam	Cabinet Member for Housing
Cllr Candida Ronald	Cabinet Member for Resources
Cllr Eve McQuillan	Mayoral Advisor for Tackling Poverty & Inequality
Dr Somen Banerjee	Director of Public Health
Debbie Jones	Corporate Director of Children's Services
Denise Radley	Corporate Director of Health Adults & Community
Simon Hall	Managing Director NHS THCCG
Dianne Barham	Chief Executive of Healthwatch

Co-opted Members:

Chris Banks	Chief Executive GP Care Group
Alison Robert	THCVS Development Manager
Simon Walton	Tower Hamlets Housing Forum
Dr Ian Basnett	Public Health Director – Barts NHS Health Trust
Dr Navina Evans	Chief Executive East London NHS Foundation Trust
Helen Byrne	Director of integration and Strategy Barts Trust

Stakeholders:

Christabel Shawcross	Chair of the Safeguarding Adults Board
Stephen Ashley	Chair of the Safeguarding Childrens Board

Officers and Speakers:

Rushena Miah	Democratic Services - Board Clerk
Jamal Uddin	SPP Officer
Warwick Tomsett	Joint Director of Integrated Commissioning
Nicola Donnelly	Programme Manager Young Adults
Carrie Kilpatrick	Deputy Director Mental Health and Joint Commissioning
David Jones	Interim Divisional Director of Adult Social Care
Andrew Meekel	Representative from Mental Health Partnership Board

Ana Figueiredo

Representative from Mental Health
Partnership Board

Apologies:

Jackie Sullivan – Executive Director of Hospitals Barts
Health
Randal Smith – Chair Healthwatch

- 1. STANDING ITEMS OF BUSINESS:**
- 2. WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE**

Apologies received from Jackie Sullivan, Managing Director of Hospitals-Barts Health Trust. Helen Byrne, Director of Integration & Strategy, attended as her substitute.

Apologies from Randal Smith, Healthwatch Chair, Dianne Barham CE Healthwatch attended as his substitute.

Councillor Danny Hassell sent apologies for lateness.

- 2.1 MINUTES OF THE PREVIOUS MEETING, ACTIONS AND MATTERS ARISING**

The minutes of the meeting on 17 July 2018 were approved as an accurate record and signed by the Chair subject to the following amendment:

- Include Sarah Belgrave to the attendee list as a substitute for Simon Walton- Tower Hamlets Housing Forum Representative.

RESOLVED:

1. To approve the minutes of the meeting held on 17 July 2018.
2. To note the actions list.

- 3. DECLARATIONS OF DISCLOSABLE PECUNIARY INTERESTS**

It was noted that Dr Sam Everington was the Chair of the London Clinical Commissioning Groups and Chair of Tower Hamlets Clinical Commissioning Group.

- 4. MENTAL HEALTH IN TOWER HAMLETS, 2019-2024**

The Chair changed the order of business so that item 7 'Tower Hamlets Together Commissioning Intentions' was brought forward as the first item.

For convenience the minutes will follow the order as published on the agenda.

The Board considered the report of Carrie Kilpatrick, Deputy Director of Mental Health and Joint Commissioning. A presentation was tabled to accompany her report.

Comments from the Board:

- Members requested a breakdown of disorders for the 5-16 year olds experiencing mental health problems? It was noted that the data was estimated based on population surveys.
- It was clarified that the data on dementia was based on the level of need and was not a representation of how good clinicians are at diagnosing.

User Group representatives from the Mental Health Partnership Board were invited to speak about their experiences. Their comments were noted below:

- There is an assumption you recover – we don't, it's a long term condition for most people.
- Recovery is a nuanced process, you need to start over with a new perspective on life and this may take longer for some than others.
- Access to direct and continuous support would be helpful such as a direct line to a psychiatrist.
- Mental health should be considered in the same way as long term physical conditions.
- It sometimes takes up to 9 months to access the appropriate support and by that time the issue may have alleviated.
- Poor mental health is linked to poor housing and employment. The bigger picture needs to be looked at.
- Friends should be allowed to accompany you to an appointment. Sometimes patients are told this isn't allowed. Clearer guidance was welcomed.
- There needs to be a commitment to improving housing for those with mental health issues.

The Chair thanked the representatives for their insight and speaking about their experiences.

Further comments from the Board:

- Social prescribing and web consultation should be further developed. There was approximately 10% take up for online GP.
- Web consultation with GP could provide for richer consultation as notes could be written by the individual in greater depth.
- The Board welcomed the Mental Health Strategy. They advised commissioners to consider group talking therapies and services for LGBT people as there was a high rate of suicide amongst gay men.
- Commissioners were cautioned against compartmentalising services into 'young people' and 'adult' mental health. There was a transitional period that should be considered.
- Commissioners said that that there was sophisticated work planned for children and young people that addressed the transitional period. The Lead Member for Children and Chair of Safeguarding Board wished to receive further information about this.

ACTION: For Carrie Kilpatrick to provide Councillor Danny Hassell and Stephen Ashley with more detailed information on children and young people's mental health commissioning during the transition from child to adult.

ACTION: Carrie Kilpatrick to provide a breakdown of data to ascertain whether there are hotspots in the borough where childhood mental health issues are prevalent.

RESOLVED:

1. To agree the proposal to develop a 2019-24 Mental Health Strategy using the timescale outlined in section 3.2.10 of the report.
2. To agree to the following proposed aspects of the strategy in particular:
 - Having a mental health strategy as a higher level 'plan on page' document as oppose to a full detailed strategy.
 - Keeping the focus of this work on adults, recognising that work on children and young people is being picked up through CAMHS transformation work and the Tower Hamlets Together Workstream work plan.
 - Ensuring consistency with the Aging Well Strategy in relation to dementia, noting that the issue is covered in-depth in this document.
 - Using the Mental Health Strategy as a vehicle for articulating our local approach to Thrive London and the NHS Five Year Forward View for Mental Health.
 - That development of the mental health strategy be overseen by the Mental Health Partnership Board.

5. SAFEGUARDING CHILDREN'S BOARD ANNUAL REPORT 2017-18

The Board considered the report of Stephen Ashley, Chair of the Safeguarding Children Board. The key points were as follow:

- An improvement board was established following the Ofsted inspection. This was chaired by Simon Wood.
- There had been a steady improvement in safeguarding across the board and this was confirmed in a published letter by Ofsted.
- The Children's and Social Care Act 2017 has come into force. Key implications of the Act were that local safeguarding children boards were to be dissolved and replaced by 'safeguarding partnerships'. Named responsible authorities in the partnership were the chief executive of the local authority, borough police commander and chief executive of the local clinical commissioning group.
- It was noted the partners were jointly responsible for resourcing the new arrangement.
- Local authorities will have until the 29 June 2019 to publish a plan outlining their governing arrangements.

Comments from the Board:

- Partners on the Board should set the example in supporting access to employment for care leavers.
- The new arrangements were recognised as a huge change in accountability because they clearly named the responsible authorities.
- **ACTION: Stephen Ashley to provide the names of the three responsible officers in the new safeguarding partnership arrangement.**
- **ACTION: for the Board to receive a progress update on the new local safeguarding arrangements in six months' time.**

RESOLVED:

1. To note the content of the Safeguarding Children Annual Report 2017-18.
2. To receive a progress update on new safeguarding arrangements in April 2019.

6. SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2017-18

The Board considered the report of Christabel Shawcross, Chair of the Safeguarding Adults Board. Key points of discussion:

- There had been no change to the arrangements for Safeguarding Adults Boards further to the Care Act 2014.
- The focus for the year was to improve outcomes and work better together.
- Emphasis on 'life courses' looking at needs of people at different stages of life.
- Data has indicated higher reporting rates of adult safeguarding. 61% of safeguarding issues occurred at home. Issues included neglect, financial abuse and self-neglect.
- The Adults Safeguarding Board was working with the Community Safety Partnership.
- Disability hate crime was underreported but known to be a key issue. Other areas of concern included poor housing, domestic violence and mental health issues.
- The Safeguarding Strategy is to expire in April this year.
- **ACTION: Christabel Shawcross to advise on how to involve the Health and Wellbeing Board in the new safeguarding adults' strategy.**

RESOLVED:

1. To note the Safeguarding Adults Board Report 2017-18.

7. SUICIDE PREVENTION STRATEGY

The Board received an update from Dr Somen Banerjee, Director of Public Health, and Nicola Donnelly, Programme Manager Young Adults, on the Suicide Prevention Strategy. Presentation slides were tabled at the meeting to accompany the report.

The Strategy identified five priority areas for action:

- Early intervention and prevention
- Improving help for those in crisis
- Identifying the needs of vulnerable people
- Addressing training needs
- Communications and awareness

Comments from the Board:

- Access to reliable data seemed to be a key barrier for all partners on this Board. Members queried what they could do to get better data. It was suggested THRIVE London could help as it collected and shared London wide health data. The British Transport Police also generate reliable data and share this with health stakeholders.
- It was predicted that there would be a 40% increase in children and young people accessing CAMHS by 2020. Members asked whether the capacity of the service would increase at the same rate.
- Members suggested there should be a roll out of a Mental Health First Aid programme where young people could act as advocates for other young people.
- Members said there should be a priority around miscarriage and mental health. Commissioners said this was being considered.

RESOLVED:

1. To note the progress made on the original themes.
2. To provide comment on areas requiring additional actions or a different approach.
3. For metrics to be developed to enable progress to be tracked in the second year.

8. CONNECTING LIVES - DEVELOPING A TASKFORCE TO ADDRESS LONELINESS IN TOWER HAMLETS

The Board considered the report of Dr Somen Banerjee, Director of Public Health, on the development of a Loneliness Taskforce in Tower Hamlets.

At the Health and Wellbeing Board on 17 July 2018 it was agreed that a Loneliness Taskforce should be formed as part of the Communities Driving Change priority in the Health and Wellbeing Strategy.

The idea stemmed from the Campaign to End Loneliness established by the Jo Cox Foundation.

Since Board discussions a Joint Strategic Needs Assessment on loneliness had been completed. The experiences of 600 local residents was published in 2016 and there had been two pilots in care homes where volunteers were paired with residents. The research culminated in a stakeholder event in November 2017 bringing the findings together.

Further to recommendations a Loneliness Taskforce had been established. The first meeting of the Taskforce was due to be held in December with a summit in January/February 2019.

Representation on the taskforce was sought from Members of the Board for the first meeting in December. It was noted that voluntary sector networks would be critical in the development of the workstreams.

A Member advised that the council's existing projects on older people tackling poverty should feed into the Taskforce.

Members agreed that the Taskforce should include representation from housing providers and schools.

ACTION: Somen Banerjee to contact Board Members for a named delegate to the Loneliness Taskforce meeting in December 2018.

RESOLVED:

1. To note the approach set out for 2018/19.
2. For Board Members to provide advice on who could represent their organisation as the Taskforce Steering Group.

9. TOWER HAMLETS TOGETHER (THT) - COMMISSIONING INTENTIONS UPDATE

The Board received an update from Warwick Tomsett, Joint Director of Integrated Commissioning, on Tower Hamlets Together Commissioning Intentions.

Comments from Members:

- There was a discussion on the success of preventative care. The CCG provided an example of a renal contract where in patient admission fell by 80%.
- How does the community voice (THCVS/Healthwatch) fit into commissioning? Officers explained that THCVS is a member of the Tower Hamlets Together Board and so provided a community perspective.
- There was a suggestion to utilise the voluntary sector's health and wellbeing forum better in commissioning engagement.

RESOLVED:

1. To note the presentation.

10. ANY OTHER BUSINESS

It was noted that it was World Mental Health Day on Wednesday 10 October 2018. A series of events have been planned around the borough, Members were asked to keep an eye on Council social media for updates.

RESOLVED:

1. To note world Mental Health Day on 10 October 2018.

11. DATE OF NEXT MEETING

Monday 14 January 2018, 5pm, C3 – Town Hall Mulberry Place.

The meeting ended at 7.33 p.m.

Chair, Councillor Denise Jones
Tower Hamlets Health and Wellbeing Board