

LONDON BOROUGH OF TOWER HAMLETS

MINUTES OF THE TOWER HAMLETS HEALTH AND WELLBEING BOARD

HELD AT 5.00 P.M. ON TUESDAY, 21 JUNE 2016

**MP702, 7TH FLOOR, TOWN HALL, MULBERRY PLACE, 5 CLOVE CRESCENT,
LONDON E14 2BG.**

Members Present:

- Councillor Amy Whitelock Gibbs (Member) – (Cabinet Member for Health & Adult Services)
- Councillor Rachael Saunders (Member) – (Deputy Mayor and Cabinet Member for Education & Children's Services)
- Councillor David Edgar (Member) – (Cabinet Member for Resources)
- Dr Somen Banerjee (Member) – (Director of Public Health, LBTH)
- Jane Ball – -Gateway Housing
- Councillor Danny Hassell (Member) –
- Debbie Jones (Member) – (Corporate Director, Children's Services)
- Denise Radley (Member) – (Director of Adults' Services)

Co-opted Members Present:

- Dr Ian Basnett – (Public Health Director, Barts Health NHS Trust)
- Jane Ball – Tower Hamlets Housing Forum Rep
- Jackie Sullivan – Managing Director of Hospitals, Barts Health NHS

Other Councillors Present:

Apologies:

- Mayor John Biggs – (Executive Mayor)
- Dr Amjad Rahi – (Healthwatch Tower Hamlets Representative)
- Dr Sam Everington – (Chair, Tower Hamlets Clinical Commissioning Group)
- Jane Milligan – (Chief Officer, Tower Hamlets Clinical Commissioning Group)
- DengYan San – (Young Mayor)
- Dr Navina Evans, – (Deputy Chief Executive and Director of Operations)

Others Present:

- Henry Black – Chief Finance Officer, TH Clinical Commissioning Group

Monsur Ali	– (Deputy Young Mayor)
Officers in Attendance:	
Shazia Hussain	– (Service Head Culture, Learning and Leisure, Communities Localities & Culture)
Kevin Kewin	– (Interim Service Head, Corporate Strategy and Equality)
Carrie Kilpatrick	– (Supporting People Manager)
Tim Madelin	– (Senior Public Health Strategist, Adults' Services)
Rachael Sadegh	– (DAAT Manager, Community Safety Service, Communities Localities & Culture)
Esther Trenchard-Mabere	– (Associate Director of Public Health, Commissioning & Strategy)
Sarah Williams	– (Team Leader Social Care, Legal Services, Law Probity & Governance)
Leo Nicholas	– (Strategy, Policy and Performance Officer, Education, Social Care and Wellbeing)

1. STANDING ITEMS OF BUSINESS

1.1 Welcome, Introductions and Apologies for Absence

The Vice-Chair welcomed everybody to the Health and Wellbeing Board. She stated that the meeting would cover the following reports: The Board's terms of reference, a report on the Transforming Care Partnership Plan, a report on Sustainability and Transformation Plans, Substance Misuse and presentations relating to the Health and Wellbeing Strategy.

Apologies for absence were received from Mayor John Biggs, Jane Milligan – Chief Officer for Tower Hamlets Clinical Commissioning Group, Dr Amjad Rahi – Chair of Healthwatch Tower Hamlets, Dr Navina Evans – Director of Operations and Deputy Chief Executive of East London Foundation Trust, Stephen Halsey – Director of Communities, Localities and Culture and Sue Barker – Independent Chair of Local Safeguarding Children's Board.

The Board noted that there were no questions received from members of the public.

1.2 Minutes of the Previous Meeting and Matters Arising

The Vice-Chair referred members of the Board to the supplemental agenda and the minutes from the meeting held on the 15th March 2016. The Board approved these to be an accurate record of the meeting.

Matters arising: The Vice-Chair updated members with regard to item 4.4 of the agenda pertaining to Air Quality. She summed up the discussion relating to this item and stated that the Director of Public Health, Dr Somen Banerjee and herself had met with the lead Member for Environment whereby they discussed the issues and barriers facing the borough in improving air quality.

Councillor Whitelock-Gibbs explained Air Quality was one of the priorities of the Mayor and Cabinet Members were to hold a workshop to discuss this topic in more detail across the portfolios.

Dr Ian Basnett confirmed he would raise the issue of air quality with relevant officers in relation to the commissioning of the Bart's Health Trust's transport contract.

1.3 Declarations of Disclosable Pecuniary Interests

There were no declarations of interest.

2. TERMS OF REFERENCE

Councillor Whitelock-Gibbs referred Board Members to pages 5-13 of the agenda and explained the Board wanted to make several changes to the Membership of the Board.

The proposed changes were outlined in the recommendations (pages 5-6) and were being put forward following the LGA peer review.

Councillor Whitelock-Gibbs assured existing members representing stakeholders – page 12, that these appointments would remain.

The Board **RESOLVED:**

To ratify the proposed changes to the Membership as outlined in pages 5-6 of the agenda pack, namely:-

1. The Board noted the Terms of Reference, Quorum, Membership and Dates of future meetings as set out in Appendix 1 and 2 of the report.
2. The Board **APPROVED** the following changes to the Health and Wellbeing Board:
 - a) That the Cabinet Member for Health and Adult services be the Chair of the Health and Wellbeing Board.
 - b) That the Clinical Commissioning Group nominates a representative as Vice-Chair of the Board
 - c) That the Mayor of Tower Hamlets and Chief Executive of LBTH attend at least one meeting in the municipal year to review

priorities and progress, and as required when key decisions are being considered.

- d) That the Cabinet Member for Housing Management and Performance becomes a voting member of the Board
- e) That the Tower Hamlets Borough Commander of Met Police; Corporate Director of Communities, Localities and Culture (CLC); and Corporate Director of Development & Renewal, LBTH are co-opted members (non-voting members) of the Board
- f) That Council nominate a Councillor from the largest opposition group as a stakeholder (non-voting)
- e) That the regional Managing Director for East London Foundation Trust attends the Board in place of the Chief Executive.

3. TRANSFORMING CARE PARTNERSHIP PLAN

Carrie Kilpatrick, Deputy Director for Mental Health and Joint Commissioning presented this report and explained to Board Members the report set out the progress made to date regarding the formation of the Inner North East London Partnership Board, the development of the plan and next steps.

She stated this was in response to the Winterbourne findings. NHS England had directed CCG's to collaborate in creating Transforming Care Partnerships (TCPs).

NHS England had outlined "what good looks like" for people with learning disabilities and/or autism and the model being adopted is structured around 9 principles (page 18) - seen from the point of view of a person with a learning disability and/or autism.

Carrie stated Tower Hamlets has a good record when it came to commissioning services for those with learning disabilities and/or autism but learning from the mapping exercise showed more work was necessary to understand the reasons why a significant number of users were placed to 'out of borough' facilities.

Denise Radley commented assessment and treatment of those with learning disabilities was good in Tower Hamlets and the care pathways available to users were clear. Although she recognised that 'out of borough' placements were a concern.

Following discussion, the Health and Wellbeing Board **RESOLVED:**

To note the requirements of the Transforming Care Partnership Plan, the progress made to date and that the final plan, would be presented to the Board to authorise in August 2016.

4. SUSTAINABILITY AND TRANSFORMATION PLANS

Henry Black, Chief Finance Officer at Tower Hamlets Clinical Commissioning Group introduced this report.

He stated NHS England had directed CCG's to develop a Sustainability and Transformation Plan. The plan for East London, of which Tower Hamlets is a part, is known as the North East London Sustainability Plan (NEL STP).

While the mandate to sign off the STP development plan lies with health partners, Local Authorities are also required to comment and develop the plan.

The STP involves seven CCG's plus the five main providers in East London. The STP will set out how the NHS Five Year Forward View will be delivered. In other words, how local health and care services will transform and become sustainable, built around the needs of local people.

Henry Black stated that the STP would be developed around 4 themes:

- **Transformation** – focussing on prevention and better care for local people;
- **Productivity** – to ensure providers and local authorities operate in the most effective and efficient way as possible;
- **Infrastructure** – considering the best use of the NHS estate; and
- **Specialised Services** – establishing sustainable specialised services, both for residents and those accessing services in North East London.

He informed the Board that NHS England expected the NEL STP to be submitted by the 30th June but this would be seen as a 'Checkpoint' as the formal submission does not need to be submitted until July.

Discussion ensued and Henry was asked to explain how the NEL STP fitted in with other work streams. Henry responded stating the STP was the five year vision and this was underpinned by the Transforming Services Together (TST) strategy which was the delivery model, followed by Tower Hamlets Together (THT) initiative which is about delivering integrated local services.

Dr Somen Banerjee also pointed out that the NHSE commissioned work (Optimity) had highlighted the high return on investment on smoking cessation and that as well as behavioural change in the public there was an important theme of behavioural change in clinicians and that this was particularly important in relation to them seeing 'smoking as treatment'

Board Members commented the NEL STP should take into consideration the following:

- The use of the Estate

- Facilities for Mental Health Care
- Ensuring the Plan involves local people; and
- It's interface with the voluntary sector.

The Health and Wellbeing Board **RESOLVED**

To note the approach as set out in Appendix A, covering the vision, draft priorities and enablers for the NEL STP and hoped the comments from Board Members were helpful to the team developing the plan.

5. **SUBSTANCE MISUSE STRATEGY 2016-19**

Rachael Sadegh, the DAAT Co-ordinator updated members with regard to the Substance Misuse Strategy.

A new strategy had been developed by Tower Hamlets and its partners, which is part of the Crime and Disorder Reduction Strategy – i.e. the Community Safety Plan.

Rachael referred members to points 3.6-3.10 in the report (pages 38-39) which set out the detail of the work undertaken.

She stated the action plan was being developed and the appendices gave more detail on this.

Cllr Hassell commented he was pleased the Strategy made reference to Safeguarding but was concerned about gaps such as how substance misuse in BME and LBG T communities was being tackled.

Rachael reassured the Board the Strategy would aim to tackle substance misuse in minority communities especially as old structures and contracts were coming to an end. The DAAT team was commissioning new services which would provide a more tailored service.

Board members also raised the following points:

- The DAAT teams interface with Bart's Health Trust.
- The collation of data from A&E
- The Strategy to state what its desired outcomes were; and
- How DAAT services link with other services – i.e. in terms of prevention and behaviour change.

The Health and Wellbeing Board **RESOLVED**

To note the report and recommendations:

1. That the Substance Misuse Strategy 2016-2019 is part of the Crime and Disorder Reduction Strategy in Tower Hamlets;

2. That the Substance Misuse Strategy 2016-2019 is part of the Crime and Disorder Reduction Strategy then pursuant to the Council's Budget and Policy Framework Procedure Rules, the Mayor as the Executive has responsibility for preparing the draft strategy for submission to the full Council to adopt;
3. That the Action Plan was due to go to the DAAT Board on the 11th July 2016 to be further developed;
4. That the draft Substance Misuse Strategy 2016-2019 and Action Plan will be referred to the strategic partners for approval that the Strategy be adopted by their respective organisations;
5. Having given careful analysis to the consultation response, review and comment upon the draft Substance Misuse Strategy 2016-2019 as drafted;
6. That if any further changes are made to the draft Substance Misuse Strategy 2016-2019 or if, for any reason, any of the strategic partners do not approve the Strategy then a further report must be submitted to Cabinet for the Mayor to consider and make a fresh recommendation to Full Council.

6. HEALTH AND WELLBEING STRATEGY 2016-2020, DEVELOPING A STRATEGY THAT WILL MAKE A DIFFERENCE- NEXT STEPS

Cllr Amy Whitelock-Gibbs, Vice-Chair of the Health and Wellbeing Board introduced this item.

She reminded members that the Board had previously held discussions about the Health and Wellbeing Strategy and following workshops held in March, there was consensus that the Strategy should be "a strategy with a small number of core, widely owned, accountable objectives, but that is adaptive and responds to feedback."

The Board had identified five areas for transformation:

- Addressing the health impacts of deprivation
- Helping communities lead change around health
- Healthy place
- Tackling childhood obesity; and
- Developing a truly integrated system to support health.

To explore these areas, Board Members were assigned to each transformation area and were asked to give presentations as to their initial thoughts and findings.

Dr Somen Banerjee, presented slides on the next steps for the strategy. The plan is to bring a draft document to the meeting on the 9th August and a final version for sign off at the October meeting.

Presentation 1 – Health Impacts of Deprivation, Employment and Health
Presentation given by Dr Somen Banerjee

- Does this strand refer to those living in Tower Hamlets and/or people who also visit /work in the borough?
- Consideration should be given to health impacts on carers and those with learning disabilities.
- Consider developing an interface with private businesses
- Matrix required showing how the Health and Wellbeing Strategy can influence other strategies/ organisations.
- Consider as partner organisation how we can improve the health of our employees. Should have a minimum standard for health and wellbeing.

Presentation 2 – Helping Communities lead change around Health

Presentation given by Dianne Barham and John Gillespie

- Consider if this should be a separate strand or a theme which runs through the other strands. Should it be underpinning/ overarching?
- Consensus – it should be kept has a priority but which influences the other strands.

Presentation 3 – Healthy Place

Presentation given by Shazia Hussain

- Challenge Developers about the quality of 'Child Play space'. Need to engage with Public Realm.
- Healthy Food Initiatives should not have short term goals subject to funding but lifelong goals.
- Examine the role Schools play – opening schools up for 'community' use.
- Extension of food exclusion zones – i.e. the Chicken mile. Working with businesses and creating a healthy place for all.

Presentation 4 – Healthy weight and nutrition in children

Presentation given by Cllr Rachael Saunders

- Board Members appreciated the Data sets/ graphs shown in presentation
- Need to target early years and early health but also how it then carries through to primary and secondary school years.
- Reference to the 'Daily mile' initiative adopted by some schools.
- Give consideration to healthy eating to include parents – possibly have a KPI indicator not just healthy weight of children but also parents.

Presentation 5 – Developing a Truly Integrated system to Support Health

Presentation given by Denise Radley

- Health and Wellbeing Boards need to take ownership of the Integration agenda.
- Concur need a campaign on culture change.
- Need to develop a framework and review the tools of assessment used by health and social care providers. Should have a common framework.
- Consider what the shared vision is and how we can influence culture change.

7. AOB

There was no other business discussed.

8. DATE OF NEXT MEETING

It was noted that future meetings of the Health and Wellbeing Board would to be held on **Tuesdays at 5:00 p.m.**

The proposed dates were noted as follows:

9th August 2016
18th October 2016
13th December 2016
21st February 2017
18th April 2017

The meeting ended at 7.48 p.m.

Vice Chair, Cllr Amy Whitelock-Gibbs
Tower Hamlets Health and Wellbeing Board