



CITY OF WESTMINSTER

MINUTES

Health & Wellbeing Board

MINUTES OF PROCEEDINGS

Minutes of a virtual joint meeting of Westminster City Council's and the Royal Borough of Kensington & Chelsea's **Health & Wellbeing Boards** held on 25 March 2021 at 4pm.

Present:

Councillor Tim Mitchell (WCC - Cabinet Member for Adult Social Care and Public Health)
Councillor Cem Kemahli (RBKC – Lead Member for Adult Social Care and Public Health)
Councillor Nafsika Butler-Thalassis (WCC - Minority Group Representative)
Councillor Christabel Flight (WCC - Deputy Cabinet Member for Adult Social Care and Public Health)
Senel Arkut (Bi-borough Director Health Partnerships)
Russell Styles (Interim Director of Public Health)
Visva Sathasivam (Bi-Borough Director of Adult Social Care)
Jeffrey Lake (Deputy Director of Public Health)
Grant Aitken (Bi-Borough Head of Health Partnerships)
Annabel Saunders (RBKC & WCC – Assistant Director of Integrated Commissioning)
Heather Clarke (WCC – Divisional Head of Housing Needs)
Anne Pollock (Principal Policy Officer)
Neville Pursell (Chair, Central London CCG)
Andrew Steeden (Chair, West London CCG)
Janet Cree (West London CCG)
Simon Hope (North West London CCG)
Joe Nguyen (Borough Director, Central London CCG)
Philippa Johnson (Central London Community Healthcare NHS Trust)
Anna Bokobza (Imperial College Healthcare NHS Trust)
James Benson (Central London Community Healthcare NHS Trust)
Ann Sheridan Central and North West London NHS Foundation Trust (CNWL)
Lesley Watts (Chief Executive of Chelsea and Westminster Hospital NHS Foundation Trust and CEO of the North West London Integrated Care System (ICS))
Roger Chinn (Chief Medical Officer, Chelsea and Westminster NHS Foundation Trust)
Xiao Cai (Assistant Director, Elective Care NHS)
Lena Choudary-Salter (Westminster Community Network)
Olivia Clymer (CEO, Healthwatch Central West London)
Iain Cassidy (OpenAge)
DI Mark Kent (Metropolitan Police)

Tania Kerno (Healthwatch RBKC)

1 WELCOME TO THE MEETING

- 1.1 Councillor Tim Mitchell welcomed everyone to the joint meeting of the Westminster and Kensington and Chelsea Health and Wellbeing Boards. Both Boards confirmed that Councillor Mitchell would Chair the meeting in line with the agreed memorandum of understanding.

2 MEMBERSHIP

- 2.1 Apologies for absence were received from Councillor Tim Barnes (WCC – Cabinet Member for Children’s Services), Councillor Josh Rendall (RBKC - Lead Member for Family and Children’s Services), Bernie Flaherty (Executive Director for Adult Social Care and Health) and Darren Tulley (London Fire Brigade).

3 DECLARATIONS OF INTEREST

- 3.1 There were no declarations of interest.

4 MINUTES

RESOLVED:

- 2.1 That the minutes of the Royal Borough of Kensington & Chelsea and Westminster City Council joint Health & Wellbeing Board meeting held on 28 January 2021 be agreed as a correct record of proceedings.

5 COVID-19 EPIDEMIOLOGY UPDATE

- 5.1 Russell Styles (Interim Director of Public Health) and Joe Nguyen (Borough Director, Central London CCG) provided the Board with a verbal update on the latest situation with regards to Covid-19 rates in Westminster and Kensington & Chelsea.
- 5.2 The Board was pleased to note that cases of Covid-19 had continued to steadily decline across both boroughs since mid-January which was consistent with the reported overall London levels. Despite this positive trend a couple of points of caution were raised which was that the five London boroughs with the highest case rates were located within the London north-west area and also there were clear signs locally that rates were starting to plateau.
- 5.3 The case rates amongst the over 60 group were now very low which was a very encouraging indicator as this group were especially vulnerable to Covid-19. This was the result of the impact of the national lockdown which had reduced transmission levels and also due to extensive roll out of the vaccination programme.

- 5.3 Joe Nguyen provided further details on the ongoing primary care response and how Covid-19 hubs had been further expanded in order to provide support to patients within the community and not within a hospital setting. In particular, opening hours had been extended on evenings and weekends and there had been an increase in remote monitoring capabilities.
- 5.4 The Chair expressed thanks to all partners for their ongoing collaborative work over the past few months in responding to the Covid-19 pandemic.

6 COVID-19 LOCAL VACCINATIONS UPDATE

- 6.1 Joe Nguyen (Borough Director, Central London CCG), presented a report which provided details of key aspects of the national Covid-19 Vaccination programme and the approach followed in West and Central London. The report also outlined plans to further enable vaccine uptake in low-uptake areas and community groups.
- 6.2 The Board was interested to note the current figures regarding the vaccination uptake by cohort and how the use of population bases made a big impact in how vaccination performance was recorded, and then perceived. The Board discussed the figures and considered them overall to be encouraging.
- 6.3 In response to questions from the Board it was clarified that every resident who had not taken up the vaccine, but was eligible, was being contacted. Where individuals had specific concerns over the vaccine, they could discuss these directly with their GP in order to try and address any particular issues. Significant amounts of work were also being undertaken to tackle vaccine hesitancy with the establishment of a hotline to allow residents to talk to GPs and discuss any concerns they had.

7 ELECTIVE CARE TREATMENT DELAYS DURING 2020 AND SOLUTIONS

- 7.1 Xiao Cai (Clinician, North West London ICS) provided an overview to the Board of the current position for elective care in North West London.
- 7.2 The Board was pleased to note that North West London had maintained a greater portion of elective activity in Wave 2 of the pandemic compared to Wave 1. Care was able to be provided to Covid-19 patients in addition to the more clinically urgent elective patients requiring treatment within four weeks. It was explained that this had been achieved through the development of a virtual outpatient consultation system. Integrated working across primary, secondary and community care had also been strengthened in addition to treating patients across North West London based on clinical priority and using mutual aid across organisations, including more use of the independent sector, where appropriate.
- 7.3 The Board was informed that waiting times for patients awaiting routine care had increased across the NHS. In particular, there was a significant number of patients who had been waiting for over 52 weeks for treatment. In response the four acute trusts within the North West London Integrated Care System, were working together to develop a detailed and co-ordinated 'reset and

recovery' plan for all services as the country emerged from the Covid-19 second wave.

- 7.4 The Board expressed its thanks for all the efforts being undertaken to reduce delays for elective care treatment and requested a future update be circulated on the progress made.

8 NEW NHS REGIONAL STRUCTURE - BRIEFING ON THE WHITE PAPER AND LOCAL ICP UPDATE

- 8.1 Lesley Watts, Chief Executive of Chelsea and Westminster Hospital NHS Foundation Trust and CEO of the North West London Integrated Care System (ICS), provided details of the NHS White Paper 'Integration and Innovation', which set out proposals to streamline and update the legal framework for health and care.

- 8.2 The Board was advised that the new structure was based on the ICS providing a whole system approach bringing together NHS trusts and Foundation Trusts, general practices and local authorities and other sectors to collaborate and plan together in order to improve the health and care of local residents and patients.

- 8.3 In accordance with the emphasis in the White Paper on "place", it was explained that work would continue to progress Integrated Care Partnerships (ICPs) across the bi-borough area with local NHS partners, including primary, community (CLCH), mental health (CNWL) and voluntary sector partners. The ICPs for both boroughs had recommenced their integration efforts with the establishment of a "Leadership Quartet" – which included Local Authority, Primary Care, Community Health and Mental Health. These developments were bringing together a bi-borough framework and helping to address local needs and development at the Borough and Neighbourhood level.

- 8.4 In North West London, the Board noted that the joint working approach taken over the last year in establishing the NW London ICS meant that the governance and structures already put in place had anticipated much of what was outlined in the white paper. Whilst the formal establishment to an ICS would take place in April 2021, the Board was advised that North West London was already operating in this manner.

- 8.5 The Board expressed its thanks for the update and stressed the importance of ensuring local decision-making abilities remained within the bi-borough level so there was no loss of local autonomy and uniqueness to help address the needs of local residents.

9 BETTER CARE FUND - 2021/22 PROGRAMME

- 9.1 Senel Arkut (Bi-Borough Director of Health Partnerships) provided an update on the development of the Kensington and Westminster Better Care Fund (BCF), including the financial assumptions for the 2021/22 financial year and planning conditions as outlined by NHS England.

- 9.2 The Board noted that the 2021/22 BCF funding had yet to be confirmed through the NHS Planning Guidance, though NHS England had confirmed that the programme would be funded, based on the 2020/21 financial commitments and included an uplift for adult social care contributions.
- 9.3 As part of draft NHS national conditions, there would remain a requirement for the Health and Wellbeing Board to agree the 2021/22 BCF plan and to receive quarterly returns on progress including the overall performance of the programme against the draft national indicators. The Board was pleased to note that the required targets had been met. Members were also pleased to note that to further strengthen the Board in its assurance role, health and local authority officers were continuing to develop a shared set of key performance indicators (KPIs) to support progress against agreed priorities and to demonstrate the wider impact of delivery across system partners. Details on how a set of draft priorities and outcomes had been proposed were provided and these would inform the development of the programme. Further local performance indicators would also be developed to demonstrate how individual schemes contributed to the agreed local priorities and national conditions. These would be reported in quarter 1 as part of the national reporting requirement.
- 9.4 Following discussions, the Board noted the financial position of the indicative BCF programme and the activities being taken to provide greater transparency in how the BCF programme aimed to deliver against its national indicators and contributed to local priorities.

The Meeting ended at 5.15 pm

CHAIRMAN: _____

DATE _____