

MINUTES



CITY OF WESTMINSTER



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Health & Wellbeing Board

MINUTES OF PROCEEDINGS

Minutes of a joint meeting of Westminster City Council's and the Royal Borough of Kensington & Chelsea's **Health & Wellbeing Boards** held on 28 March 2019 at 4pm at the British Land Offices, York House, 45 Seymour Street, Marble Arch, London, W1H 7LX.

Present:

Councillor Heather Acton (WCC - Cabinet Member for Family Services and Public Health)

Councillor David Lindsay (RBKC - Lead Member for Healthy City Living)

Councillor Sarah Addenbrooke (RBKC – Lead Member for Adult Social Care)

Councillor Emma Will (RBKC – Lead Member for Families, Children and Schools)

Councillor Lorraine Dean (WCC – Deputy Cabinet Member for Family Services and Public Health)

Councillor Nafsika Butler-Thalassis (WCC - Minority Group Representative)

Bernie Flaherty (Bi-Borough Executive Director of Adult Social Care)

Iain Cassidy (Open Age)

Dr Naomi Katz (West London CCG)

Dr Neville Pursell (Chair of the Central London CCG)

Angeleca Silversides (Healthwatch RBKC)

Melissa Caslake (Bi-Borough Children's Services)

Annabel Saunders (RBKC & WCC – Assistant Director of Integrated Commissioning - Children's Lead)

Wayne Haywood (Programme Manager – Better Care Fund)

Matt Webster (British Land - Head of Wellbeing and Futureproofing)

Michael Meadows (British Land – Planning Director)

Emma Cariaga (British Land – Head of Operations at Canada Water)

Dr Catherine Heffernan (Principle Advisor for Commissioning and Immunisations and Vaccination, NHS England)

Toby Hyde (Imperial College NHS Trust)

Anne Pollock (WCC – Principal Policy Officer)

Philippa Johnson (Central London Community Healthcare NHS Trust)

Louise Proctor (managing Director of the West London CCG)

Spencer Sutcliff (London Fire Brigade)
Chris Greenway (Bi-Borough – Director of Integrated Commissioning)
Neil Hales (Central London CCG)
Sarah Crouch (Bi-Borough Public Health)
Anna Cox (Bi-Borough Public Health)
Emma Biskupski (Local Safeguarding Children Board Business Development Manager)
Maria O'Brien (Central and North West London NHS Foundation Trust)
Hilary Nightingale (Westminster Community Network)

1. WELCOME TO THE MEETING

- 1.1 Councillor Heather Acton welcomed everyone to the meeting and confirmed that as the joint Board meeting was being held within Westminster she would Chair the meeting in line with the agreed memorandum of understanding.

2. MEMBERSHIP

- 2.1 Apologies for absence were received from Robyn Doran (Central and North West London NHS Foundation Trust), Lesley Watts (Chelsea & Westminster NHS Foundation Trust), Senel Arkut (Bi-Borough - Head of Health Partnerships and Development), Jennifer Travassos (WCC – Homelessness Prevention), Angela Spence (Kensington & Chelsea Social Council) and Dr Andrew Steeden (Chair of West London CCG).

3. DECLARATIONS OF INTEREST

- 3.1 No declarations were made.

4. MINUTES

RESOLVED:

- 4.1 That the minutes of the Royal Borough of Kensington & Chelsea and Westminster Health & Wellbeing Board meetings held on 12 September 2018 and 13 September 2018 be agreed as a correct record of proceedings.
- 4.2 The minutes of the concurrent Royal Borough of Kensington & Chelsea and Westminster Health & Wellbeing Board meeting held on 24 January 2019 be agreed as a correct record of proceedings.

5. BRITISH LAND PRESENTATION ON HEALTH AND WELLBEING

- 5.1 Matt Webster (British Land - Head of Wellbeing and Futureproofing) provided a presentation on the role of British Land as a landlord and their impact on people's health and wellbeing. Information on how they developed and operated their buildings in a sustainable manner to increase people's wellbeing was noted, which included shifting their emphasis from a cure-based system to a preventative style system.

5.2 A placemaking strategy had been implemented to create improved areas for people to work and live in and this included:

- Planting greenery to increase opportunities for people to encounter nature;
- Increasing communal seating to encourage more social interaction between people; and
- Improving walkways and cycle facilities to empower people to move around more.

5.3 British Land's wellbeing principles were highlighted and the Board noted how it was intended for these to impact positively on people's lives and wider society for many years. The Board thanked British Land for an interesting presentation and all their efforts in improving their environments to increase people's wellbeing.

6. SUGAR – APPROACH TO ORAL HEALTH AND OBESITY

6.1 Anna Cox and Sarah Crouch (Bi-Borough Public Health) presented a paper outlining both Councils activity in promoting oral health. Oral health was seen as a marker of wider health and social care issues and remained among children an important public health issue. It was noted that tooth decay was the top cause of non-emergency hospital admissions for children aged 1-18 across the Bi-Borough and represented a fifth of all hospital admissions. However, the data suggested that hospital admissions for dental care were reducing, in part due to the Community Dental service treating more children in the community.

6.2 The Board noted the work undertaken to promote good oral health for children and young people. This included ensuring oral health was an integral part of the healthy schools programme and the healthy early years programme. The oral health team was also supporting a Dental Buddying scheme, which was an initiative for dental practices to adopt local schools and family hubs to increase dental attendance. It was now hoped to extend this scheme further to an early years setting.

6.3 The Board discussed the various initiatives undertaken and noted that in Westminster 'The Tale of Triumph over Terrible Teeth' campaign had been run in 2018 and distributed to all GP practices. Efforts to improve access to water in schools was also noted as a way of improving oral health after meals.

6.4 The Board was pleased to note the work being undertaken to improve oral health for children and young people. The important link between oral health and obesity was briefly discussed and it was requested that a specific item on childhood obesity be scheduled for a future Board meeting.

7. DEMENTIA STRATEGY

- 7.1 Anne Pollock (Principal Policy Officer) provided the Board with a short verbal update on the progress of the Dementia Strategy. Extensive engagement on the strategy had continued, culminating in a meeting of an expert panel that had been very well attended. Discussions at the panel centred on dementia, health and social care, transport, arts and culture and design. Follow up work was now being undertaken and officers would be attending an away day to identify the key ideas, commitments and priorities, which would feed into the strategy before it was presented to a future Board meeting for further feedback. Following this, it was hoped to launch the strategy in autumn 2019.
- 7.2 The Board noted that during the engagement process it had become apparent a more personal approach to providing assistance to people with dementia and their carers was required. As such personas were being developed, in conjunction with a digital approach, to detail the journey of someone with dementia from the initial stages onwards. The Board was pleased to note the efforts made in this area and requested that the discussion note from the expert panel be circulated for comment.

8. IMMUNISATIONS AND FLU VACCINATIONS

- 8.1 Sarah Crouch (Bi-Borough Public Health) and Dr Catherine Heffernan (Principal Advisor for Commissioning and Immunisations and Vaccination, NHS England) presented a report providing an overview of childhood immunisation uptake across the Bi-Borough area. It was explained that the uptake of most vaccines in the Bi-Borough was generally lower than the national and London averages. Uptake had been in decline over the last decade giving rise to concerns about the collective immunity of the community and the resulting risk to the population and individuals in the event of a disease outbreak. The potential reasons for variance in uptake included:
- The transient and mobile nature of the population made it difficult to track people leading to gaps in the data available;
 - There were workforce challenges resulting in some areas facing significant pressures with regards to access to GP surgeries and practice nurses; and
 - The level of robust recall in GP practices varied and was often a very manual intensive process.
- 8.2 It was recognised that a large number of childhood immunisations were administered privately or abroad and this data was also not currently being captured. Efforts were being made across the Pan-London region to improve the situation and this included utilising technology and working closely with CCGs and GP Federations to help target child vaccinations for the age 5 year group.
- 8.3 The Board discussed how some GP practices attempted to capture vaccine data and the work undertaken to provide parents with reminders regarding

childhood vaccinations. The work of health hubs in providing an immunisation service for communities, including during weekends, was also detailed. It was suggested that there was the potential for this data to be captured and shared to reduce any data gaps. It was acknowledged that some local schools had data on child vaccinations and this was another area where data could be utilised to identify areas of low uptake and variance at population level within local communities.

- 8.4 The Board provided thanks for the update and noted that workshops would be held to examine the issues raised in more detail. This would include looking at children centres, schools, community engagement and the needs of different ethnic populations in the areas. It was then intended to bring an implementation plan back to the Board on how to understand more about the data and take action where variance had been identified.

9. VIOLENCE AGAINST WOMEN AND GIRLS STRATEGIC PARTNERSHIP LINK WITH THE HEALTH AND WELLBEING BOARD

- 9.1 The Board received a verbal update from Shabana Kausar (Bi-Borough Strategic Lead for Violence Against Women and Girls – VAWG) on the work of the VAWG Partnership and the potential for joint working with the Board. The health implications of VAWG were outlined and it was explained that it was hoped to strengthen links between health services and domestic abuse services going forward.
- 9.2 It was noted that a Pathfinder Project had been initiated to improve responses to domestic abuse which was a whole health approach bringing five national agencies together to build capacity and better coordinate responses to VAWG. In addition, RBKC Public Health had helped fund the Identification and Referral to Improve Safety (IRIS) Programme which was a service providing training and support for GPs, practice nurses and other primary care clinicians to help identify and refer victims of domestic abuse to specialist services.
- 9.3 In response to a request, the Board agreed to be kept informed of the Pathfinder Project. Officers were also requested to examine the possibility of developing a joint working protocol between the Board and the VAWG Strategic Board. It was felt this would improve links between the two, encourage shared learning and enable enhanced support across various sectors.

10. CENTRAL LONDON CCG GOVERNING BODY COMMISSIONING ARRANGEMENTS

- 10.1 The Board received a report from Dr Neville Pursell, Chairman of the Central London Clinical Commissioning Group, providing an update on the commissioning priorities for the North West London Collaboration of CCGs. It was explained that the report built on previous work undertaken and highlighted the key aim of delivering local services that were integrated and better co-ordinated. There was a focus on prioritising, addressing health inequalities and personalisation of care. This approach would ensure there

was increased capacity in the local community with patients receiving high quality care. An update on progress on the following key priorities was provided:

- Digital Selfcare;
- Children and young people;
- An integrated mental health offer; and
- The establishment of primary care networks.

10.2 Louise Proctor, Managing Director of the West London CCG, explained that the West London CCG had the same overarching ambitions and strategy. The work undertaken across North West London with regards to outpatients was detailed. In terms of primary care, work with the West London GP Federation to develop new, enhanced ways of working, including extended access in evenings and weekends, were noted. The main focus was on how GP Practices came together to work in an integrated way with the wider community.

10.3 The Board held a detailed discussion on the reports and expressed concern that they lacked the level of detail required to fully understand future commissioning intentions. Therefore, more information was requested on what impact these arrangements would have on local level relationships with regards to jointly commissioning services. In order to support the plan and priorities a greater degree of detail was required and this was necessary to ensure there was effective joint working between all parties. A suggestion from Neil Hales of the Central London CCG that at the next meeting of the Board an update would be provided on the contractual position for 2019/20, which linked in to the overall financial position, was welcomed. The Board expressed its thanks for receiving the updates but requested that a further update come before the next meeting of the Board providing a greater degree of detail on the future commissioning priorities for the Central and North West London CCGs.

11. BETTER CARE FUND UPDATE

11.1 Wayne Haywood (Programme Lead – Better Care Fund) provided the Board with a report outlining the progress on the Better Care Fund (BCF) Plan for 2017/19. It was explained that the delivery of the BCF remained an important tool to deliver a sustainable health and social care system and to help deliver better patient outcomes. It was recognised that there would be challenges for 2019/20 and work had already begun on preparing this Plan, which would be presented to the Board at a future meeting.

RESOLVED:

- 1) That the Joint Health and Wellbeing Board approve the BCF Quarter 3 return; and
- 2) That the Joint Health and Wellbeing Board authorised the Chairs of the Westminster and Kensington & Chelsea Health and Wellbeing Boards to approve the BCF Quarter 4 return.

12. LOCAL SAFEGUARDING CHILDREN BOARD ANNUAL REPORT 2017/18

- 12.1 Emma Biskupski (Quality Assurance and Safeguarding) introduced the Local Safeguarding Children Annual Report 2017/18 to the Board. This provided an overview of the work undertaken in 2017/18 and included information on the key priorities of reducing the harm of domestic abuse and coercive control, tackling peer on peer abuse and hearing the voice of children and young people.
- 12.2 The Board was interested to note the initiatives undertaken such as 'No Knife, One Life', an initiative to engage local communities around knife crime, which it was hoped would be expanded in the future. The work with local businesses was also described, in particular engaging with local hotels to tackle and identify any potential sexual exploitation.
- 12.3 The Board expressed its thanks for the hard work that had gone into producing such a comprehensive report and conveyed its thanks to the LSCB for their efforts in safeguarding children.

13 ANY OTHER BUSINESS

- 13.1 Councillor Heather Acton provided the Board with the following updates:

- A Family Hubs Conference had recently been held which was very successful and had identified numerous lessons to be learned;
- Westminster had held a Schools' Headteachers' event, at which all the preventative health activities and offers of support were discussed, such as oral health and obesity, mental health, air quality and active travel. A note to go out to all schools was under preparation and once finalised would be shared with the Board;
- Young People – A meeting of all the youth providers in Westminster had been arranged to examine what services were available and what further work was required to help address serious youth violence;
- Westminster's ward health profiles had been circulated. They were extremely detailed and any feedback on them would be gratefully received;
- Violence Against Women and Girls – It was noted that London had seen the first person to be found guilty in the UK of female genital mutilation; and

- The Westminster Care Awards had recently been held and thanks were expressed to all the carers who had attended and the organisations which had supported the Event.

13.2 Councillor David Lindsay provided the Board with the following update:

- A scientific paper had recently been published regarding potential contaminants in the environment around Grenfell Tower. RBKC was aware of the situation and was working with central government to assist residents.

The Meeting ended at 6.01 pm.

CHAIR: _____

DATE _____