

**MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD  
HELD ON THURSDAY, 6 DECEMBER 2018**

**MEMBERSHIP**

**PRESENT** Alev Cazimoglu (Cabinet Member for Health & Social Care), Yasemin Brett (Cabinet Member for Public Health), Mo Abedi (Enfield Clinical Commissioning Group Medical Director), Parin Bahl (Chair of Enfield Health Watch), John Wardell (Clinical Commissioning Group (CCG) Chief Officer), Stuart Lines (Director of Public Health), Bindi Nagra (Director of Adult Social Care), Tony Theodoulou (Executive Director People), Vivien Giladi (Voluntary Sector), Litsa Worrall (Voluntary Sector), Maria Kane (Chief Executive North Middlesex University Hospital NHS Trust), Andrew Wright (Barnet, Enfield and Haringey Mental Health NHS Trust) and Josh Salih (Enfield Youth Parliament)

**ABSENT** Nesil Caliskan (Leader of the Council), Achilleas Georgiou (Cabinet Member for Children's Services), Dr Helene Brown (NHS England Representative), Jo Ikhelef (CEO of Enfield Voluntary Action) and Natalie Forrest (Chief Executive, Chase Farm Hospital, Royal Free Group)

**OFFICERS:** Dr Glenn Stewart (Assistant Director, Public Health), Mark Tickner (Senior Public Health Strategist), Tha Han (Public Health Consultant), Fay Hammond (Director of Finance), Ailbhe Bhreathnach (Health in All Policies Strategist), Neeru Kareer (Planning Consultant) and Harriet Potemkin (Strategy, Partnerships, Engagement & Consultation) Jane Creer (Secretary)

**Also Attending:**

**1**

**WELCOME AND APOLOGIES**

Councillor Alev Cazimoglu (Chair) welcomed everyone to the meeting. Apologies for absence were received from Councillors Nesil Caliskan and Achilleas Georgiou, Dr Helene Brown, Jo Ikhelef, and Natalie Forrest. Apologies for lateness were received from Dr Mo Abedi and Parin Bahl.

**2**

**DECLARATION OF INTERESTS**

There were no declarations of interest registered in respect of any items on the agenda.

### **3 INFLUENZA UPDATE**

RECEIVED the report of the Director of Public Health.

NOTED the introduction by Dr Tha Han, highlighting the three key issues:

- Enfield multi-agency Pandemic Influenza Plan, for which an exercise was run in September. There was a need to align with the business plans for key departments and NHS bodies. There was also a need to plan for how the voluntary care sector could play its part.
- Flu surveillance, which was coordinated and collated by Public Health England to closely monitor occurrence of flu and of vaccination uptake.
- Enfield data, which was set out in the report, and some of which was not very encouraging last year. Work was being done to improve vaccination rates across the board.

IN RESPONSE comments and questions included:

1. Though good promotional work was being done with NHS and Council employees, the vaccination take-up rates remained relatively low in the borough and not reaching herd immunity levels. Vivian Giladi urged greater effort to get as many people vaccinated as possible.
2. Councillor Brett emphasised the importance of communication and information to ethnic and religious communities in particular. Dr Abedi confirmed that GPs had a concerted campaign this year, but there was a large cohort of patients refusing the vaccine. The most common reason given was side effects in the past. This year there were better developed vaccines, but convincing patients was difficult. There was no evidence that particular faiths could not have the medicine, and promotional posters were being displayed at local mosques. GPs had experienced early vaccine supply difficulties but these were now resolved.
3. Concern was expressed that there had not been more coherent and aligned messaging despite Health and Wellbeing Board previously agreeing to work together. It was suggested that each member organisation should put forward a representative to a 'flu task force' to prepare and improve outcomes for next year 2019/20.

**AGREED** that Health and Wellbeing Board

- (1) Noted the Enfield Multi-agency Pandemic Influenza Plan;
- (2) Noted the flu vaccination of Children, Pregnant women, At risk groups, and Front line staff uptake;
- (3) Agreed the formation of a flu task force.

**ACTION:** Dr Tha Han

### **4**

## FINANCE

RECEIVED a presentation from Fay Hammond (Director of Finance, LB Enfield).

NOTED the presentation highlighted the following:

- The Council was setting its overall budget for 2019/20, and the presentation would explain the contexts, and the mutual understanding with the CCG of each others' financial position. Both were looking at opportunities to work together for the best outcome for residents.
- The national funding picture and Enfield's government funding were set out.
- There were uncertainties from forthcoming changes to the funding formula, economic pressures/Brexit, and demographic pressures in Enfield.
- Savings of £18m were required for 2019/20 with a further £18.5m required over the following three years of the Medium Term Financial Plan (MTFP).
- The Council was doing what it could to manage budget pressures and forecast overspend.
- The approach to budget setting 2019/20 was described. A Residents Budget Consultation exercise was being undertaken. The final budget and Council Tax for 2019/20 would be agreed at full Council 27 February 2019.
- The grant in respect of Public Health had been reduced year on year and was currently £17m. Around £1.85m of the public health grant will be used across the Council in 2019/20 to support the delivery of public health outcomes. Proposals for 2020/21 and beyond include sharing services to reduce cost, and addressing the core cost drivers.

IN RESPONSE comments and questions included:

1. The Chair advised that the Council would do its best to protect the most vulnerable, and it would be important to work together to mitigate negative impacts.
2. John Wardell and Maria Kane advised on equally challenging financial positions in the health service, and that very difficult decisions were having to be made, but moving forward there would be collaborative work with the local authority and associated providers.
3. There were long term solutions being worked on for the future, and progress on integration. A challenge would be to improve public health through collaboration. Very recently Enfield Council had been ranked number two of the most improved councils, with significant improvements in all areas examined with two outstanding highlights around older people's services and all age disabilities. Congratulations were recorded to the officers for the improvements.

**AGREED** that Health and Wellbeing Board noted the LB Enfield budget setting context and process.

## 5

### HEALTHY WEIGHT STRATEGY UPDATE

RECEIVED the report of the Assistant Director of Public Health and the updated Enfield Healthy Weight Strategy and action plan.

NOTED the introduction by Ailbhe Bhreathnach, Health in All Policies (HiAP) Strategist, highlighting the latest statistics regarding prevalence of overweight or obesity in children and adults, and the link between excess weight and deprivation. The strategic objectives set out the vision for Enfield and were aligned with the 3-4-50 concept. Attention was drawn to the objective to make tackling obesity everybody's business, and the Board's commitment was sought to taking action.

IN RESPONSE comments and questions included:

1. There was a need to do something locally now.
2. The area identified which needed more work was how to make tackling obesity everybody's business, and the existing Healthy Weight Partnership group was a good way of going forward.
3. There were complex factors around excess weight and changing of behaviour.
4. It was suggested that focus should be concentrated where deprivation was highest, and on practical, effective suggestions.
5. There was potential for place shaping to address these issues in the new Local Plan.
6. Ailbhe Bhreathnach asked to be advised of any other groups who should be engaged with. The Youth Parliament should be included.

**AGREED** that Health and Wellbeing Board:

- (1) Approved the Healthy Weight Strategy and action plan (with a recommendation that it be sharpened and focussed);
- (2) Considered what actions their respective organisations can take to meet the strategic objective to 'Make tackling obesity everybody's business';
- (3) Requested an initial implementation report in six months.

## **6**

### **ENFIELD'S NEW LOCAL PLAN 2036**

RECEIVED a presentation from Neeru Kareer, Planning Consultant, LB Enfield.

NOTED the presentation highlighted:

- The public consultation on the new Local Plan 2018 to 2036 commenced yesterday, until the end of February, and included different platforms of engagement.
- As the local planning authority, Enfield Council was required to produce a framework about policies to direct future development on how the borough should grow and take shape.
- The Council also wanted to prioritise the public health agenda with proactive policies.

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- The challenges included the changing and growing population, and the provision of infrastructure and community services. There was a need to look at policies to address inequalities, and a need to attract the right kind of investment. Effective planning around under-used land, and optimal densities was important.
- Options being consulted on included town centres and areas around stations, existing movement corridors, rules on Green Belt strategy around Crews Hill, and the Council's portfolio of land.
- All Health and Wellbeing Board members were encouraged to participate in the consultation.

IN RESPONSE comments and questions included:

1. It was important that new housing development, especially social housing, was as friendly as possible and with health-promoting networks.
2. It was confirmed there was confidence in the population projections, noting that there was a lot of inward migration.
3. It was noted that the local economy, poverty and health were all linked, and improvements to the borough economy would be expected to have a positive long-term effect on health and wellbeing.
4. The right health facilities should be built into planning documents, and environments should be planned to make healthy choices, such as active travel, easier.
5. The Council could influence training and apprenticeships offered to residents and young people in the borough through new development.

### 7

#### **VOLUNTARY SECTOR REPRESENTATIVE APPOINTMENT / SELECTION PROCESS**

NOTED a verbal update from Niki Nicolaou (Voluntary Sector Manager) that UK Engage had been appointed to carry out the appointment process. The site would be going live on 7 January 2019 and nominations invited by 22 January. If there were more than two nominations received, voting would open on 26 January with results expected on 27 January.

The Health and Wellbeing Board expressed thanks to the current Voluntary Sector representatives for their valuable contribution over the last four years, and hoped that nominations were received from both of them.

### 8

#### **VISIT TO BOROUGH BY DUNCAN SELBIE (CHIEF EXECUTIVE, PUBLIC HEALTH ENGLAND)**

NOTED the verbal update from Stuart Lines, Director of Public Health, confirming the visit of Duncan Selbie, Chief Executive of Public Health England, to Enfield in February 2019.

**9**

**PROPOSED LGA WORK WITH BOARD**

NOTED the verbal update from Stuart Lines, Director of Public Health, confirming that arrangements were being made with the Local Government Association (LGA) for development work with the Board on Integration. This is likely to be in February 2019.

**10**

**PROGRESS UPDATE ON JOINT HEALTH AND WELLBEING STRATEGY (JHWS)**

RECEIVED the update report from Stuart Lines, Director of Public Health.

NOTED the verbal update from Harriet Potemkin, Strategy and Policy Hub Manager, that the proposal was to begin the consultation before Christmas and any further amendments to the survey would be circulated to all Board members.

**AGREED** that Health and Wellbeing Board:

- (1) Confirmed their agreement for launching the public consultation to run from December 2018 through to the end of February 2019;
- (2) Noted the request to promote the consultation across their organisations and with service users;
- (3) Noted the request to confirm whether their organisation can work with Healthwatch to co-design their annual conference in February to further consult on the strategy.

**11**

**MINUTES OF THE MEETING HELD ON 27 SEPTEMBER 2018**

**AGREED** the minutes of the meeting held on 27 September 2018.

**12**

**INFORMATION BULLETIN**

NOTED the Information Bulletin items.

**13**

**HEALTH AND WELLBEING BOARD FORWARD PLAN**

NOTED that the Health and Wellbeing Forward Plan would be shared with all members as soon as possible.

**14**

**DATES OF FUTURE MEETINGS**

NOTED the dates of future meetings of the Health and Wellbeing Board and dates of future development sessions. Members were wished a merry Christmas and happy new year.