MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD
HELD ON WEDNESDAY, 19 APRIL 2017

MEMBERSHIP

PRESENT
Doug Taylor (Leader of the Council), Alev Cazimoglu, Ayfer Orhan, Deborah Fowler (Enfield HealthWatch), Sarah Thompson (Chief Officer - Enfield Clinical Commissioning Group), Tessa Lindfield (Director of Public Health), Tony Theodoulou (Executive Director of Children's Services), Vivien Giladi (Voluntary Sector) and Andrew Wright (Barnet, Enfield and Haringey Mental Health NHS Trust)

ABSENT
Krystle Fonyonga, Mo Abedi (Enfield Clinical Commissioning Group Medical Director), Dr Helene Brown (NHS England Representative), Ray James (Director of Health, Housing and Adult Social Care), Peter Ridley (Director of Planning, Royal Free London, NHS Foundation Trust), Libby McManus (Chief Executive North Middlesex University Hospital NHS Trust), Robyn Gardner (Enfield Youth Parliament) and Bobbie Webster (Enfield Youth Parliament)

OFFICERS:
Glenn Stewart (Assistant Director, Public Health), Keezia Obi (Head of Safeguarding Adults), Sam Morris (Strategy, Partnerships, Engagement and Consultation Team), Innes Deuchars (Legal Services), Miho Yoshizaki (Health Intelligence Manager) and Niki Nicolaou (Voluntary Sector Manager) Jane Creer (Secretary)

Also Attending:
Graham MacDougall (Director of Strategy and Partnerships, Enfield CCG), Genevieve Ileris (NCL STP Comms and Engagement Lead)

1 WELCOME AND APOLOGIES

Councillor Doug Taylor (Chair) welcomed everyone to the meeting. Apologies for absence were received from Councillor Krystle Fonyonga, Dr Mo Abedi, Dr Helene Brown, Ray James, Bindi Nagra, Libby McManus, Peter Ridley, Robyn Gardner, and Bobbie Webster. Apologies for lateness were received from Councillor Alev Cazimoglu.

2 DECLARATION OF INTERESTS
There were no declarations of interest registered in respect of any items on the agenda.

3 JOINT HEALTH AND WELLBEING STRATEGY - SETTING PRIORITIES FOR THE HEALTH AND WELLBEING BOARD 2017-19

RECEIVED the report of Tessa Lindfield (Director of Public Health).

NOTED

Tessa Lindfield’s introduction of the report highlighted:
- Further to previous discussions at Health and Wellbeing Board (HWB), three priority areas were recommended as the focus for the final two years of the 5 year Joint Health and Wellbeing Strategy (JHWS).
- The report addressed the arguments around all areas proposed, and the rationale behind the selected priorities.
- Four levels of engagement were recommended, including in depth input from HWB to the top three priorities; collaboration in the area of domestic violence; enhanced monitoring of other issues; and outcome indicators to be reviewed annually by HWB.

IN RESPONSE comments and questions were received, including:

1. Deborah Fowler asked about the practical processes, and ensuring how HWB added value. Vivien Giladi also questioned the differences between the roles of HWB and Scrutiny. In response, Tessa Lindfield advised that HWB’s role rather than scrutinising existing arrangements, was to look at issues and evidence in respect of improvements in Enfield, and actions for HWB. In respect of governance, existing groups and partnership boards should be utilised, and formal sub boards could be re-energised to deliver some of that work.

AGREED that Health and Wellbeing Board
(i) endorsed the four levels of engagement in monitoring the progress of JHWS in 2017-2019;
(ii) endorsed the recommended priority areas:
  - Better Start in Life
  - Obesity
  - Mental Health Resilience

4 NORTH CENTRAL LONDON (NCL) SUSTAINABILITY AND TRANSFORMATION PLAN (STP) ENGAGEMENT PLANS
RECEIVED the report of Genevieve Ileris (NCL STP Comms and Engagement Lead).

NOTED

Genevieve Ileris’ introduction of the report highlighted:
- Engagement to date and the approach going forward was summarised in the report.
- NCL was starting from a way behind some other footprints. The focus in the past few months was on establishing relationships within 21 partner organisations.
- A rewrite of the plan was being done and the decision was confirmed to publish in April.
- A website was being developed as a single platform for information regarding the STP.
- A comms and engagement workstream included membership spanning Healthwatch, NCL leads, voluntary sector and lay people.
- A significant caveat was that there was no budget for communication and engagement in the STP, and achieving the outcomes was reliant on the 21 organisations across the boroughs releasing people to participate, and ‘piggy-backing’ engagement activities on events already planned in authorities and CCGs. Key STP leads were available for public presentations and speaking events.

IN RESPONSE comments and questions were received, including:

1. Vivien Giladi welcomed the update and acknowledged the issues around being behind other STPs, and the under-resourcing of the work, but considered representation on the STP Board inadequate and democratically problematic. The public should be involved in decision-making. There were no politicians on the Board.
2. Deborah Fowler also added that it had been assured there would be real engagement to start in the Autumn which did not happen, and that it was important that the public was listened to. She questioned how it would be ensured that no borough would be left behind. Genevieve Ileris advised that there were some good comms and engagement people across organisations, including Enfield CCG and local authority and provider organisations.
3. In response to queries by Tony Theodoulou, it was acknowledged there was more to be done to improve engagement with the public, and that the lack of budget was a big barrier. Sarah Thompson emphasised the importance of all contributing.
4. Glenn Stewart raised that prevention and healthy lifestyles should also be highlighted by clinical colleagues.
5. The Chair recommended that HWB had some local engagement. Genevieve Ileras considered that an event hosted by Enfield Council would get engagement off the ground in Enfield, and confirmed that key personnel would be available to speak to residents. Local authority officers agreed willingness to be involved in an engagement plan and Deborah Fowler confirmed that Healthwatch would be happy to help.
AGREED that Health and Wellbeing Board
(i) discussed the proposed approach going forward and agreed HWB colleagues to collaborate on a plan for engagement in Enfield;
(ii) noted the rewrite of the STP plan and summary document;
(iii) noted the establishment of the comms and engagement workstream and the inclusive membership.

5 THE BETTER CARE FUND AND INTEGRATION

RECEIVED the report of Bindi Nagra (Asst. Director, Health, Housing and Adult Social Care, LB Enfield) and Graham MacDougall (Director of Strategy and Partnerships, Enfield CCG).

NOTED

The report was introduced by Keezia Obi (Head of Transformation (People)) highlighting:
● The report provided an update on the delivery of the 16/17 BCF plan.
● The financial position was to be on budget for the year.
● Performance against targets was in the context of extreme pressures on A&Es, growing demand, and issues across health and social care, though systems were now working more effectively and there was greater optimism about 2017/18.
● Some good outcomes had been demonstrated.
● A robust evaluation framework was being used, and reviews were being undertaken to inform the programme for the next two years.

IN RESPONSE comments and questions were received, including:

1. In response to the Chair’s queries, it was confirmed that local processes had been developed around the BCF.
2. Vivien Giladi passed on the very positive feedback from an older persons voluntary group in respect of dementia in particular, and the Older Person’s Assessment Unit (OPAU), but some concerns remained regarding delayed transfer of care.
3. The additional funding for adult social care announced in the Budget 2017 was noted. The policy and framework had been published, but technical guidance was awaited. The Better Care Fund had been renamed ‘Integration and Better Care Fund’.
4. The Chair had agreed that the next HWB development session focus on a discussion and workshop on Health and Social Care integration. Representatives of Healthwatch and Public Health and Children’s Services agreed to assist planning the session.

NOTED that Councillor Alev Cazimoglu arrived at the meeting at this point.
AGREED that Health and Wellbeing Board
(i) noted the year-end financial position;
(ii) received and noted the current BCF performance and performance dashboard including outcomes;
(iii) noted the current status with the development of the shared care record;
(iv) noted that the BCF policy framework had now been published and key themes were outlined in section 4 of the report;
(v) noted the future Board development session would be focused on Health and Social Care Integration, and the planning for the development session.

6
JOINT STRATEGIC NEEDS ASSESSMENT (JSNA), A NEW APPROACH FOR ENFIELD

RECEIVED the report of Tessa Lindfield (Director of Public Health).

NOTED

Tessa Lindfield’s introduction of the report highlighted:
● The JSNA should provide a comprehensive picture of the current and future health and wellbeing needs, and inform decisions and commissioning across the system to achieve better outcomes and reduce inequalities.
● The previous Enfield JSNA was web-based as a series of PDF documents and was now unfit for purpose. The JSNA was now due for review. The requirements for the new JSNA were discussed at the last Board development session and proposals were set out in the report.
● The JSNA steering group had been reconvened

IN RESPONSE comments and questions were received, including:

1. In response to the Chair’s queries regarding the timeline, it was advised that a JSNA was subject to ongoing development, but the data in the new JSNA would be made easier to update to ensure that the latest data could be made available to a large audience. This also coincided with work on a HWB website to be launched officially in the Autumn.
2. The Chair requested an update report to HWB in October.

ACTION: Tessa Lindfield

AGREED that Health and Wellbeing Board
(i) endorsed the proposal for the new Enfield JSNA development;
(ii) endorsed the delegated authority to JSNA steering group for development and maintenance of the new Enfield JSNA.

7
CCG OPERATING PLAN
RECEIVED the report of Graham MacDougall (Director of Strategy and Partnerships, Enfield CCG).

NOTED the comments and questions were received, including:

1. In response to concerns raised by Deborah Fowler regarding future risks, it was advised there was intensive performance management by NHS England to ensure there was no detriment of quality of care to the public. Graham MacDougall also confirmed that this was a technical plan. Transformation of how care was delivered would improve efficiency and prevention and early system response would lead to savings.
2. Concerns among the public in Enfield continued in relation to evidence based medicine and convergence across NCL.

AGREED that Health and Wellbeing Board noted the requirements and progress within the report, to inform the development of the CCG’s Operational Plan 2017/19.

8 ENFIELD PHARMACEUTICAL NEEDS ASSESSMENT (PNA)

RECEIVED the report of Tessa Lindfield (Director of Public Health).

NOTED the comments and questions were received, including:

1. In response to queries, Tessa Lindfield clarified the need for external expertise to help deliver the PNA in Enfield. The criteria for evaluation to be used by the consultant would be circulated to HWB members.

   ACTION: Tessa Lindfield

2. The draft PNA would be presented to HWB Board in the Autumn and approval of the final PNA in February / March 2018. Public consultation was also a requirement.

AGREED that Health and Wellbeing Board
(i) noted the PNA responsibilities and proposed time frame;
(ii) endorsed the proposal to delegate authority to the PNA steering group in preparing the Enfield PNA;
(iii) endorsed the proposed process for the Enfield PNA.

9 MINUTES OF THE MEETING HELD ON 9 FEBRUARY 2017

AGREED the minutes of the meeting held on 9 February 2017.
10
DATES OF FUTURE MEETINGS

NOTED that the dates of future meetings of the Health and Wellbeing Board and dates of future development sessions were due to be agreed at Annual Council on 10 May 2017.

11
THANKS

As this was Sam Morris' final HWB meeting, the Board wished to record thanks for his work and assistance to HWB and congratulations on his new job.