

**MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD
HELD ON TUESDAY, 6 JUNE 2023**

MEMBERSHIP

PRESENT Nesil Caliskan (Leader of the Council), Alev Cazimoglu (Cabinet Member for Health & Social Care), Abdul Abdullahi (Cabinet Member for Children's Services), Andy Milne, Deborah McBeal (NCL CCG), Dudu Sher-Arami (Director of Public Health), Doug Wilson (Director of Adult Social Care), Tony Theodoulou (Executive Director of Children's Services), Jo Ikhelef (CEO of Enfield Voluntary Action), Vivien Giladi (Voluntary Sector) and Dr Nnenna Osuji (Chief Executive, North Middlesex University Hospital NHS Trust)

ABSENT Dr Helene Brown (NHS England Representative), Pamela Burke (Voluntary Sector) and Andrew Wright (Barnet, Enfield and Haringey Mental Health NHS Trust)

OFFICERS: Dr Glenn Stewart (Assistant Director, Public Health), Jane Creer (Secretary)

Also Attending: Peter Nathan (Director of Education, LBE), Christiana Kromidias (Early Years Team Manager, LBE), Zinat Ismail (Education Outreach Team, LBE), DS Marco Bardetti (MPS), Andrew Lawrence (Head of Commissioning - CYP and Public Health, LBE), Katherine MacDonald (Public Health England), Jose Acuyo (Population Health Improvement, NHS NCL ICB), Penny Mitchell (Director for Population Health Commissioning, NHS NCL ICB), Stephen Wells (NHS NCL ICB), Victoria Adnan (Policy & Performance Manager, LBE), Debbie Gates (Community Development Officer, LBE), Riyadh Karim (NHS NCL ICB), Tim Hellings (Enfield Carers Centre), Dr Alpesh Patel (NHS NCL ICB)

**1
WELCOME AND APOLOGIES**

Cllr Nesil Caliskan, Chair, welcomed everyone to the virtual meeting.

Apologies for absence were received from Andrew Wright, Dr Helene Brown, and Mark Tickner.

**2
DECLARATION OF INTERESTS**

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

3

ORDER OF THE AGENDA

AGREED that the agenda order be amended. The minutes follow the order of the meeting.

4

EARLY YEARS PARTNERSHIP BOARD / EDUCATION SETTINGS AND RELATIONSHIP TO HEALTH AND WELLBEING BOARD

RECEIVED the slide presentation and the Terms of Reference of the Early Years Partnership Board, introduced by Peter Nathan, Director of Education, LB Enfield.

NOTED

1. The background and key issues covered by the Early Years Partnership Board were described. It was accountable to the Health and Wellbeing Board.
2. Details were provided on Family Hubs, and the services for invited families which were provided from five sites and specifically targeted.
3. The Early Years Partnership Board also received a range of data, including health data.

IN RESPONSE

4. It was confirmed that the Covid-19 pandemic had concerning impacts for a cohort of young children, including on peer relationships and speech and language. It was hoped that these issues would decline now that all settings were open again.
5. Services were restricted by limited resources, but additional government grant had meant new opportunities for the Family Hub. The Chair raised the potential to link with the skills agenda for the borough.
6. Dr Osuji raised that Early Years were the most important phase for intervention and that capacity should be fully utilised and services focussed. It was advised that there was reliance on linked schools' goodwill for appropriate space and that services would be delivered also from Ponders End Youth Centre which would be a good location.
7. As a subgroup, the Early Years Partnership Board would submit updates to the Health and Wellbeing Board. The frequency of updates to be confirmed by senior officers.

ACTION: Dudu Sher-Arami / Peter Nathan

5

NORTH MIDDLESEX UNIVERSITY HOSPITAL UPDATE

RECEIVED the slide presentation, introduced by Dr Nnenna Osuji, Chief Executive, North Middlesex University Hospital NHS Trust.

NOTED

HEALTH AND WELLBEING BOARD - 6.6.2023

1. An operational update was provided on A&E attendances and improvements in performance. Numbers of patients waiting to be discharged was still a challenge. There had been work around admission avoidance and maximising the opportunities to treat people at home.
2. Details were provided on cancer faster diagnosis standard performance.
3. The full update to the Board was set out on the slides attached to the agenda.

IN RESPONSE

4. In response to Members' queries regarding an increase in average length of stay in hospital, it was advised that more patients who were more frail and with co-morbidities were being seen, and the more extreme cases raised the averages. There was also the effect of medically optimised patients remaining in hospital. A current area of focus was to take patients with easily treated conditions into easier pathways and out of hospital.
5. Work around Enfield community services was highlighted and that transitional arrangements were in place, and would lead to development of a population-based integrated care model. Further updates would be provided to the Health and Wellbeing Board.

ACTION: Dr Nenna Osuji

6

BRIEFING ON THE NEW LBE 'COMBATING DRUGS AND ALCOHOL PARTNERSHIP' (CDAP)

RECEIVED the report and slide presentation, introduced by Dudu Sher-Arami, Director of Public Health and DS Marco Bardetti, Metropolitan Police Service, Chair and Deputy Chair of Enfield Combating Drug and Alcohol Partnership (CDAP).

NOTED

1. CDAP had recently come into existence and was also accountable to the Health and Wellbeing Board.
2. The government 10-year drugs plan to cut crime and save lives 'From Harm to Hope' was published in April 2022, and set out requirements for each Local Authority, with agreed funding.
3. This had led to the set up of CDAP multi-agency group, including members with lived experience. There would also be sub groups covering clinical governance and treatment and care. CDAP would deliver a plan to address drug and alcohol related health and crime improvements for the Enfield community, including increasing drug and alcohol treatment service as well as prevention. Updates on progress would be brought to the Board.

ACTION: Dudu Sher-Arami

IN RESPONSE

4. It was confirmed that there was quite prescriptive detail regarding how the funding was spent and monitoring of progress to targets.

5. In response to queries in respect of engagement, it was confirmed that the detailed plan would be shared with the Board in due course, and there would be work to increase the numbers accessing services and to raise awareness of how to get support. The Chair asked officers to consider work with partners on referrals. Recognition should also be given to the preparatory work by partner organisations with people who were going to be referred so they could usefully accept and access the services. DS Bardetti advised that the custody suite was one of the referral pathways, and from neighbourhood policing. The Chair also suggested links to work in respect of prostitution and drug issues in the Joyce and Snells estate area. It was also confirmed that mental health services were part of the partnership board.

7

NORTH CENTRAL LONDON POPULATION HEALTH AND INTEGRATED CARE STRATEGY

RECEIVED a verbal update from Jose Acuyo (Population Health Improvement Project Officer, NHS NCL ICB) and Penny Mitchell (Director for Population Health Commissioning).

NOTED

1. The update followed on from the presentation to the Board in March. The finalised version of the population health and integrated care strategy was now publicly available. The internet link was given on the agenda and members were invited to share this widely.
2. Alignment across priorities with partners was important.
3. The strategy ambitions were split into delivery areas to address inequalities, levers for change, and transformation programmes with early intervention and proactive care.

IN RESPONSE

4. It was confirmed that work was being progressed on mapping and scoping.
5. In respect of the new joint local health and wellbeing strategy (JLHWS), it would be ensured that Jose Acuyo was included in discussions.
6. It was confirmed that the key delivery areas and levers for change were pan-system, for all organisations. Specific ambitions for making change were being considered, such as heart health, lung health and cancer.
7. In response to queries on behalf of the VCSE enterprise sector, it was advised there had been a planning session the previous week in respect of potential collaboration for tackling root causes of poor health and interdependencies with their plans, and the voluntary sector would be kept updated.

8

ANY OTHER BUSINESS

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1. The Chair accepted an issue at this point raised earlier by Vivien Giladi on behalf of a voluntary sector colleague who ran swimming for the disabled activities at one of Enfield's Fusion-run leisure centres. The Halliwick Penguins group were concerned the hoist to enable users to get into the swimming pool had been out of commission for some time. It was clarified that, having failed inspection, the hoist needed to be repaired, and officers had been chasing on this. The Chair also commented on wider failings of Fusion and that the Cabinet would be considering a report the next day.
2. The proposal by the Director of Public Health for a special focussed session for the Board on the new Joint Health and Wellbeing Strategy was agreed. A calendar invitation would be sent to members.

ACTION: Dudu Sher-Arami

9

MINUTES OF THE MEETING HELD ON 2 MARCH 2023

AGREED the minutes of the meeting held on 2 March 2023.

10

NEXT MEETING DATES AND DEVELOPMENT SESSIONS

NOTED the next Board meeting date: Monday 2 October 2023, 6:30PM.