MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD
HELD ON TUESDAY, 10 OCTOBER 2017

MEMBERSHIP

PRESENT  Alev Cazimoglu (Cabinet Member for Health & Social Care), Krystle Fonyonga (Cabinet Member for Community Safety & Public Health), Mo Abedi (Enfield Clinical Commissioning Group Medical Director), Parin Bahl (Chair of Enfield Health Watch), Tessa Lindfield (Director of Public Health), Tony Theodoulou (Executive Director of Children’s Services), Deborah McBeal (Acting CCG Chief Officer), Natalie Forrest (Chief Executive, Chase Farm Hospital, Royal Free Group), Vivien Giladi (Voluntary Sector) and Andrew Wright (Barnet, Enfield and Haringey Mental Health NHS Trust)

ABSENT  Doug Taylor (Leader of the Council), Ayfer Orhan (Cabinet Member for Education, Children’s Services & Protection), Dr Helene Brown (NHS England Representative), Ray James (Executive Director of Health, Housing and Adult Social Care), Litsa Worrall (Voluntary Sector), Libby McManus (Chief Executive North Middlesex University Hospital NHS Trust), Robyn Gardner (Enfield Youth Parliament) and Bobbie Webster (Enfield Youth Parliament)

OFFICERS:  Ian Davis (Chief Executive), Innes Deuchars (Legal Services) and Niki Nicolaou (Voluntary Sector Manager) Jane Creer (Secretary)

Also Attending:  Councillor Christine Hamilton (Mayor of Enfield) and partner, Miho Yoshizaki (Health Intelligence Manager), Tha Han (Public Health Consultant), Sharon Burgess (Interim Head of Safeguarding Adults) and Bharat Ayer (Development Manager)

1  WELCOME AND APOLOGIES

NOTED

1. Dr Mo Abedi (Vice Chair) welcomed everyone to the meeting, with a particular welcome to the Mayor who was in attendance to observe.
2. Apologies for absence were received from Councillors Doug Taylor and Ayfer Orhan, Dr Helene Brown, Litsa Worrall, Libby McManus, Ray James, Bindi Nagra, Richard Gourlay, Robyn Gardner, and Bobbie Webster. Apologies for lateness were received from Councillor Krystle Fonyonga.
3. The Vice Chair recorded congratulations with some sadness that Ray James would be leaving Enfield to become NHS England’s national...
learning disability director. Councillor Cazimoglu echoed that Enfield Council were proud and wished him all the best on his secondment.

4. Coasters and pens had been distributed to attendees to mark World Mental Health Day, which deserved recognition.

5. Enfield CCG would be welcoming John Wardell as the new Chief Operating Officer from December. Deborah McBeal was deputising until he was in post.

2 DECLARATION OF INTERESTS

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

3 DOMESTIC VIOLENCE - LINKS WITH THE SAFER STRONGER COMMUNITIES BOARD

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

NOTED

Tessa Lindfield’s introduction of the report highlighted:
● When the Health and Wellbeing Board (HWB) set their priorities, one of the key areas for focus was collaboration with the Safer Stronger Communities Board (SSCB).
● The HWB development session last month included a presentation and discussion, and commitments were made, which were subject to ratification by the HWB. Slides from the presentation were included in the agenda pack as Appendix A to the report.

AGREED that the Health and Wellbeing Board support:
● The SSCB to audit Enfield’s progress towards implementing the NICE guidelines on domestic abuse.
● Dissemination of information on services for victims of domestic abuse in Enfield and prevention campaigns.
● The wider use of routine enquiry in health and care services.
● The use of DV specialist workers in A&E.
● A joint commissioning approach where it makes sense to do.
● Work towards more data sharing and analysis.
● A proposal to the JSNA steering group to include further work on this topic.

Points above would be tracked via an action plan and included in the HWB forward plan.

ACTION: Tessa Lindfield
4

PROGRESS UPDATE ON JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

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

NOTED

Tessa Lindfield and Miho Yoshizaki’s introduction of the report highlighted:
● Health and Wellbeing Board (HWB) ratified a new approach earlier in the year, and this report provided an update on the programme to date.
● The web-based resource was designed for flexible and easy access and interaction in the data, to obtain further details and mapping.
● The completed profiles were available within the Healthy Enfield website. Three other profiles were nearing completion.
● Further profiles were being developed, with the JSNA steering group providing strategic direction during the development.

IN RESPONSE comments and questions were received, including:
1. It was confirmed that this was a partnership website with links to Enfield Council and NHS sites.
2. In respect of the timescales for the forthcoming Vulnerable Children profile, this was hoped to be fully drafted within one month.
3. A link from the Enfield CCG website was suggested, and that the GPs and federation were made aware of the resources, which would support planning.
4. If updates were added, these should be flagged on the front page.
5. Tessa Lindfield would be happy to make a presentation to relevant groups or GP meetings. She also invited comments or potential improvements to be sent to her directly.

AGREED that the Health and Wellbeing Board would champion and promote the new Enfield JSNA.

5

SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2016-17

RECEIVED the report of Ray James (Executive Director of Health, Housing and Adult Social Care).

NOTED

Sharon Burgess (Interim Head of Safeguarding Adults) and Bharat Ayer (Development Manager) introduced the report, highlighting:
The Independent Chair of Enfield Safeguarding Adults Board was unable to attend this meeting, but the key accomplishments and actions across the partnership were set out in the report.

Priorities included raising awareness. A lot of promotional material was produced in the run up to Keep Safe Week in February 2017.

Certain groups were identified as being less represented in safeguarding adults data, and targeted awareness sessions were organised.

Videos were produced and included on the Enfield Council web page regarding how to recognise signs of abuse.

Enfield had a high number of care providers, with 100 homes and 60 domiciliary care providers.

There was excellent partnership working with the CQC and the CCG, and extended to the Police and going forward to the Fire Service.

The Board hosted a North Central London Challenge and Learning event during the year, and this has led to a more joined up approach.

During the financial year, one safeguarding adult review had concluded and four reviews were initiated.

Looking forward, there would be focus on prevention and reaching all residents, and identifying more effective ways of working together, and ensuring safety in the provider market.

IN RESPONSE comments and questions were received, including:

1. Councillor Cazimoglu recorded thanks to the Safeguarding Adults Board and its new chair for their work, and thanks to the officer team who carried out some of the most challenging work in the Council.

2. In respect of deprivation of liberty data, Sharon Burgess confirmed there had been an increase this year from the last and this was common across the country, but she would expect it to come down in the next year or two.

3. It was confirmed that board manager leads across North Central London were meeting regularly and aligning action plans. Enfield officers were attending a NCL STP workshop focussing on safeguarding tomorrow.

4. There was work taking place and improved systems in respect of Police Merlins.

5. Niki Nicolaou offered her assistance in reaching out to community groups.

6. The Chair’s remarks that the Safeguarding Adults Board year after year produced exemplary reports and had a track record of partnership work and they should be congratulated. He looked forward to receiving the report at the governing body of the CCG. Health and Wellbeing Board should not simply note, but celebrate this excellent piece of work.

AGREED that the Health and Wellbeing Board noted the progress being made in protecting vulnerable adults in the Borough as set out in the annual report of the Safeguarding Adults Board.

6

ENFIELD PHARMACEUTICAL NEEDS ASSESSMENT (PNA) - DRAFT PNA

RECEIVED the report of Tessa Lindfield (Director of Public Health).
Tessa Lindfield and Miho Yoshizaki’s introduction of the report highlighted:

- The PNA was a statutory duty of the Health and Wellbeing Board (HWB) to publish every three years, and the next Enfield PNA was due by April 2018.
- A full draft PNA had been circulated to HWB, and an executive summary was included in the agenda pack.
- The PNA contained information to allow NHS England to make decisions regarding pharmaceutical service provision.
- The process for developing the PNA was set out. This process was overseen by the PNA Steering Group.
- Over 98% of the borough’s residents were within walking distance of a pharmacy.
- Considering the population projections for the next three years, no gaps in provision of pharmaceutical services were identified currently or in the future, and the coverage of services was good.
- The next step was a minimum 60 days’ consultation, and this was proposed between 23 October 2017 and 8 January 2018, with analysis in January and final sign off in February 2018.

IN RESPONSE comments and questions were received, including:

1. It was confirmed that 98% of residents were within 20 minutes’ walk from a pharmacy and 90% were within 10 minutes’ walking distance. It was also confirmed that the research covered pharmacy delivery services.
2. Evidence within the report was also useful for local commissioning.
3. Pharmacies offered an important resource, and there were opportunities to use them more, and for promotion of basic public health messages and to assist addressing inequalities.
4. NHS England were one of the key stakeholders who must be consulted.
5. Health and Wellbeing Board was asked to agree the sign off process for the final PNA report to ensure smooth publication on time.

AGREED that

1. The Health and Wellbeing Board approved the draft PNA for consultation.
2. A subset of Health and Wellbeing Board members, including the Director of Public Health and representatives of the CCG and HealthWatch be delegated to sign off the final report on behalf of Health and Wellbeing Board.

7

NORTH CENTRAL LONDON (NCL) SUSTAINABILITY AND TRANSFORMATION PLAN (STP) - PROGRESS REPORT

RECEIVED the STP update slides.

NOTED
Deborah McBeal’s introduction of the report highlighted:
● The update was provided to ensure HWB members were up to date on the current position with the work and the workstreams.
● The STP was moving from planning to implementation.

IN RESPONSE comments and questions were received, including:
1. Vivien Giladi (Voluntary Sector) expressed serious reservations in respect of delivery of the STP due to a lack of resources. In response, it was advised that an update to the next meeting would cover what was being done specifically in Enfield.
2. Councillor Cazimoglu had ongoing concerns regarding lack of transparency and involvement, and urged greater engagement particularly with patients and frontline staff.
3. It was acknowledged that elements including the Mental Health workstream and Urgent and Emergency Care had been subject to greater consultation.
4. Parin Bahl (HealthWatch) also had concerns about communications and engagement at the right level and there was a need for improvement.
5. The Chair confirmed that a lot of work was going on locally and across the system, but suggested that HWB needed more clarity. A discussion about how citizens could be involved in a better way would be appropriate for a development session, with the STP communications officer to be invited to discuss how they could be supported.

AGREED that the Health and Wellbeing Board noted the update on the STP.

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

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

NOTED

Tessa Lindfield’s introduction of the report highlighted:
● This was a regular report to Health and Wellbeing Board, updating on the agreed priority areas.
● Flu vaccination uptake would be given attention as performance last year had fallen.
● A Thrive LDN workshop was scheduled in Enfield on 8 November to deliver the priority of mental health resilience.
● Tessa Lindfield would be interested in members’ feedback.

IN RESPONSE comments and questions were received, including:
1. In respect of the Best Start in Life focus area, it was confirmed that there was a task & finish group considering this, led by Stuart Lines, which would report to the HWB development session in January 2018.
**AGREED** that Health and Wellbeing Board noted the progress on HWB monitoring areas, and supported the HWB priority areas as set out in the report.

9
**PROGRESS UPDATE ON HEALTHY ENFIELD WEBSITE**

RECEIVED a verbal update and website demonstration from Tessa Lindfield (Director of Public Health) and Miho Yoshizaki (Health Intelligence Manager).

**NOTED**
- The Healthy Enfield website was now operational.
- The different chapters were targeted at different audiences including residents, partners, and stakeholders.
- The website brought together advice and resources from Enfield and national information in one place.
- The Healthy News section gave up to date information and was interactive.

IN RESPONSE comments and questions were received, including:
1. It was confirmed that feedback would be sought through engagement with different groups. Dr Abedi suggested that it would be useful to seek patients’ input.
2. There was a process in place to keep the contents updated.
3. The website should be promoted, via newsletter links and via Radio Enfield and on the screens in GP practices.

**AGREED** that the Health and Wellbeing Board noted the update on the Healthy Enfield website.

10
**THE INTEGRATION AND BETTER CARE FUND**

RECEIVED the report of Bindi Nagra (Assistant Director, Health, Housing and Adult Social Care, LB Enfield) and Vince McCabe (Interim Director of Commissioning, Enfield CCG).

**NOTED** that the Council and the CCG were working together to ensure a joined up plan.

**AGREED** that the Health and Wellbeing Board noted the information provided in the report.
UNIVERSAL CREDIT

RECEIVED a presentation from Sally McTernan (Assistant Director Community Housing, Health, Housing & Adult Social Care).

NOTED

- Sally McTernan ran the customer services and assessment function at LB Enfield, including financial assessment.
- Central government was rolling out the Universal Credit scheme as part of its welfare reform programme. Universal Credit would replace six current benefits.
- In Enfield a live service began in July 2015, but the full digital rollout would commence from November 2017 for working age families.
- Claims were administered online, by the applicant via the Department of Work and Pensions portal, and one payment was paid monthly direct to the claimant.
- There was a 6 week administration period and a 7 day waiting period. Those in financial difficulty may apply for advance payment, which would be a loan.
- It was difficult for the local authority to challenge an award. This was not a Council administered benefit and rollout was not within Council control.

IN RESPONSE comments and questions were received, including:

1. It was confirmed that situations which could be potentially detrimental to the Council would be monitored, and officers would work with housing associations, and would look out for people falling into rent arrears and put in place targeted intervention. Information had also been gathered from LB Croydon to learn lessons from Universal Credit rollout there.
2. Councillor Cazimoglu confirmed that members were very concerned about the implications for the health and wellbeing of people living below the poverty line.
3. Members felt that it was important for Health and Wellbeing Board to register its concern about impact on the most vulnerable and that their concerns be recorded in the meeting minutes.
4. Tessa Lindfield suggested that service providers and commissioners should gather data at contact meetings and keep an eye on the impact as part of the role of tackling health inequalities, while the priority should be to ensure that people did not lose their housing and to focus on supporting those most badly affected.
5. Sally McTernan was asked to bring an update to the next meeting.

ACTION: Sally McTernan

AGREED that the Health and Wellbeing Board noted the presentation and recorded its concern.
RECEIVED and NOTED the report from Overview and Scrutiny Committee setting out the Scrutiny Annual Work Programme and Workstreams identified for 2017/18.

13
MINUTES OF THE MEETING HELD ON 12 JULY 2017

AGREED the minutes of the meeting held on 12 July 2017.

14
INFORMATION BULLETIN

NOTED the newly introduced Information Bulletin as agreed at the last meeting, which included useful notices, consultations and links.

15
HEALTH AND WELLBEING BOARD FORWARD PLAN

NOTED the HWB forward plan in respect of forthcoming meetings, noting that the development session on 21 November 2017 would also consider the Homelessness Reduction Act.

16
DATES OF FUTURE MEETINGS

NOTED the dates of future meetings of the Health and Wellbeing Board and dates of future development sessions.