

**MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD  
HELD ON THURSDAY, 7 OCTOBER 2021**

**MEMBERSHIP**

**PRESENT** Nesil Caliskan (Leader of the Council), Alev Cazimoglu (Cabinet Member for Health & Social Care), Dr Nitika Silhi (Governing Body Member, NHS NCL CCG), Deborah McBeal (Director of Integration, NCL CCG), Olivia Clymer (Healthwatch Central West London), Dudu Sher-Arami (Interim Director of Public Health), Bindi Nagra (Director of Adult Social Care), Jo Ikhelef (CEO of Enfield Voluntary Action), Vivien Giladi (Voluntary Sector), Pamela Burke (Voluntary Sector), Dr Nnenna Osuji (Chief Executive, North Middlesex University Hospital NHS Trust) and Andrew Wright (Barnet, Enfield and Haringey Mental Health NHS Trust)

**ABSENT** Mahtab Uddin (Cabinet Member for Children's Services), Dr Helene Brown (NHS England Representative), Tony Theodoulou (Executive Director of Children's Services) and Siobhan Harrington (Whittington Hospital)

**OFFICERS:** Mark Tickner (Health and Wellbeing Board Partnership Manager) and Dr Glenn Stewart (Assistant Director, Public Health), Jane Creer (Secretary)

**Also Attending:** Dr Chitra Sankaran (Governing Body (Enfield) NCL CCG), Dr Hetul Shah (NCL CCG), Gayan Perera (LBE Public Health Intelligence), Doug Wilson (LBE Health, Housing & Adult Social Care), Riyad Karim (NCL CCG Assistant Director of Primary Care), Des O'Donoghue (LBE Service Manager – Community Services), Stephen Wells (Senior Programme Manager, NCL CCG), Ruth Donaldson (NCL CCG)

**1  
WELCOME AND APOLOGIES**

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

Apologies for absence were received from Dr Helene Brown, Tony Theodoulou, Debbie Gates and Siobhan Harrington.

Apologies for lateness were received from Dr Nnenna Osuji and Olivia Clymer.

**2  
DECLARATION OF INTERESTS**

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

**3**

**COVID-19 AND OTHER WINTER THREATS IN ENFIELD UPDATE**

**i. Epidemiology and Outlook**

RECEIVED the presentation, Enfield Covid-19 Dashboard, providing an update and analysis of Covid-19 related data in Enfield from LBE Public Health Intelligence.

NOTED

1. Introduction by Gayan Perera, LBE Public Health Intelligence Team, on the latest infection rates in Enfield. In the last week or so there had been a slightly increasing number of cases, mainly Delta variant, but hospitalisations and deaths were staying low.
2. Most recent information on deaths, hospitalisations, cases in schools, and vaccination numbers. The main cohort currently at risk was the 0 – 29 age group.

**ii. Care home status, visiting support, and vaccination status**

RECEIVED the update presentation on care home vaccination status.

NOTED

3. Introduction by Des O'Donoghue, LBE Service Manager – Community Services, of numbers of care home residents and staff vaccinated.
4. Work was being done to support care homes and facilitate staff vaccinations by the Government deadline. It was confirmed that the rollout was on track and plans were in place to ensure homes were appropriately staffed.

**iii. Vaccination Update**

RECEIVED the Covid vaccination update presented by Dr Hetul Shah, GP and Riyad Karim, Assistant Director of Primary Care, Enfield Borough NCL CCG.

NOTED

5. Vaccination coverage in Enfield was good in the older population. Uptake was not yet at target in younger populations, some geographic communities, ethnic groups, and other communities experiencing inequality.
6. Collaborative work continued on the flu, Covid-19, and booster vaccination campaigns. There had been an increase in the number of vaccination sites. The Enfield Phase 3 Covid and Flu Group were meeting every two weeks.

IN RESPONSE

7. In response to Councillor Cazimoglu's queries, assurance was given of the focus on both flu and Covid-19 vaccinations. There had been some logistical issues leading to some rearranged appointments, but GP practices and pharmacies were now giving flu jabs as soon as possible even if that meant patients going back again for Covid-19 boosters. It was important for the protection from flu to build. Covid-19 booster vaccinations could be given six months after the second dose. Where possible, both vaccinations could be safely given at the same time. The Chair also raised the importance of not leaving behind any vulnerable groups, including the housebound.
8. It was confirmed that vaccination rates in 12 – 15 year olds were fairly low at the moment across the whole country. There was hesitancy in this group, and an impact from levels of sickness absence and isolation among school children. Further guidance was awaited on the 12 – 15 programme. Engagement work was being undertaken with parents and families. Catch-up clinics were planned during half term, at evenings and weekends.
9. Andrew Wright on behalf of BEH agreed to circulate an update briefing to Board members to provide the latest assurance on access to the vaccines for key groups.

**4**

**PUBLIC HEALTH ENGLAND (PHE) SUCCESSOR ORGANISATIONS UPDATE - IMPLICATIONS FOR ENFIELD**

RECEIVED the presentation, introduced by Dudu Sher-Arami, Interim Director of Public Health.

NOTED

1. The context of the setting up of PHE in 2013, and the transfer of all its health protection and health improvement functions from 1 October 2021 to two new entities: The UK Health Security Agency and The Office for Health Improvement and Disparities. A synopsis was given of where responsibilities now lay.
2. There would be little change in functions locally, but the local authority would be working with both organisations as they evolved, and the Board would be kept updated.

IN RESPONSE

3. The remarks of Councillor Cazimoglu and the Chair expressing concern at the abolition of PHE in a pandemic, and the risk of losing focus on prevention.
4. Clarification of governance, and that there were no specific local implications at this stage.
5. The Chair requested an update to the Board in two months' time.

**5**

## **UPDATE ON THE JOINT HEALTH AND SOCIAL CARE COMMISSIONING BOARD**

RECEIVED a verbal update from Doug Wilson, Head of Strategy and Service Development, Health, Housing & Adult Social Care Directorate, LBE, advising of the effective partnership working and the impact of the pandemic and that a detailed report would be brought to the next Board meeting.

### **6 ICS WORKSTREAMS UPDATE**

RECEIVED the progress update presentation, introduced by Stephen Wells, Head of Integrated Care Partnership Programme, and Deborah McBeal, Director of Integration, NCL CCG.

NOTED

1. Work was highlighted of the four working groups, plus the new working group in respect of Access to Services, Recovery & Innovation, which was jointly chaired by Richard Gourlay (North Middlesex University Hospital) and Jon Newton (LB Enfield)

IN RESPONSE

2. Discussion of concerns and experiences of residents relating to access to GPs and health services for all, noting the pressures on service providers and the provision of significantly more appointments as well as delivering vaccination programmes. The potential for streaming patients away from A&E to appropriate hubs with capacity was being explored. It was difficult to meet current patient demand and a system wide response was needed. The value of communication was also stressed. The new working group would press for solutions.
3. The second phase of the Inequalities Fund was highlighted and the upcoming deadline for submissions. Members should contact Ruth Donaldson or Dudu Sher-Arami with any further ideas.

### **7 UPDATE FROM ROYAL FREE HOSPITAL AND NORTH MIDDLESEX UNIVERSITY HOSPITAL**

The Chair extended a warm welcome to Dr Nnenna Osuji, Chief Executive at North Middlesex University Hospital NHS Trust, to her first Enfield Health and Wellbeing Board meeting.

RECEIVED a verbal update from Dr Nnenna Osuji, including on staff continuing to work hard managing the challenges of the pandemic and the backlogs, high A&E attendance numbers experienced this autumn, upcoming patient feedback and surveys and benchmarking information, collaborative working, continued delivery of elective services, and necessity of communication work around cancer risk signs.

IN RESPONSE

1. The Chair gained clarification around incidental diagnosis of cancer.
2. It was advised that the hospital had been placed in the top ten most improved trusts, but areas for improvement continued to be waiting times and communication, which both linked to the high numbers of people attending and needing to be managed.
3. The introduction of a live feed of information on current attendance and wait time at A&E on the hospital website was suggested.
4. The use of Chase Farm hospital for elective Covid protected surgery was confirmed, and management of patient flow and discharge.
5. Members offered support in cancer awareness raising.

**8**

**MINUTES OF THE MEETING HELD ON 24 JUNE 2021**

**AGREED** the minutes of the meeting held on 24 June 2021.

**9**

**NEXT MEETING DATES AND DEVELOPMENT SESSIONS**

**NOTED** the next Board meeting was scheduled for Thursday 2 December 2021.