

Health and Wellbeing Board

Minutes

21 March 2023

Present:

Chair: Councillor Paul Osborn

Board Members:	Councillor Ghazanfar Ali	Harrow Council
	Councillor Hitesh Karia	Harrow Council
	Councillor Pritesh Patel	Harrow Council
	Councillor Norman Stevenson	Harrow Council
	Yaa Asamany	Healthwatch Harrow
	Isha Coombes	North West London Integrated Care Board

Non Voting Members:	Senel Arkut	Corporate Director, People	Harrow Council
	Carole Furlong	Director of Public Health	Harrow Council
	Lisa Henschen		Harrow Borough Based Partnership
	Chris Miller	Chair, Harrow Safeguarding Boards	Harrow Council
	Peter Tolley	Director of Children's Services	Harrow Council

In attendance: (Officers)	Sebastien Baugh	Consultant in Public Health	
	James Biggin-Lamming	Director of Transformation	London North West University Healthcare NHS Trust
	Laurence Gibson	Consultant in Public Health	
	Piers Milner		London North West University Healthcare NHS Trust

Apologies received:

Dr Radhika Balu
Simon Crawford

John Higgins

Absent:

Inspector Edward Baildon
James Benson

31. Attendance by Reserve Members

RESOLVED: To note that there were no Reserve Members in attendance.

32. Declarations of Interest

RESOLVED: To note that there were no declarations of interests made by Members.

33. Minutes

RESOLVED: That the minutes of the meeting held on 17 January 2023 be taken as read and signed as a correct record.

34. Petitions

RESOLVED: To note that no petitions had been received.

35. Public Questions

RESOLVED: To note that two public questions had been received and responded to and the recording would be made available on the Council's website.

36. Deputations

RESOLVED: To note that no deputations had been received.

Resolved Items

37. Health and Wellbeing Strategy - Healthy People Delivery Plan

The Board received a report which summarised how the commitments from the Health and Wellbeing Strategy would be delivered.

The Board were advised that the Strategy set out plans to report on each of the three domains of Healthy People, Healthy Policy and Practice and Healthy Place once a year. The report before the Board presented the Health and Wellbeing Strategy delivery plan for Healthy People and the Healthy People domain indicators. It also set out a proposal that a Senior Responsible Officer (SRO) be identified for each of the strategy domains with the expectation that these individuals would have overall accountability and responsibility for the delivery plan to address the strategy's commitments, responsibility for coordinating an annual report to, and reporting back to, the Board.

The officer advised that there would be a particular focus on three areas within the delivery plan over the next one to two years but there would continue to be updates to the Board on other areas. The first focus would be on integration around family hubs with children centres converting to family hubs and neighbourhood resource centres converting to health and wellbeing hubs. Secondly, there would also be a focus on prevention and around the conversation café. The third area of focus would be engagement and the commitment to embed population health management approaches within the work undertaken and to codesign the interventions with residents in order to meet their needs.

Members of the Board welcomed the strategy and expressed their support. It was commented that timeliness and collaboration were critical. Clarification was sought in relation to the North West London indicators where there appeared to be no data and the Board was advised that in terms of benchmarking there was no relevant data. The officer undertook to see if it were possible to get this data or to compare performance data with statistical neighbours but noted the Member's comment that if there were no relevant data it should not be included.

With reference to data, a Member asked whether it was possible to receive health related data at ward level and was advised that health and wellbeing ward profiles had been provided the previous year. The Chair stated that some data was four years old which was not helpful but acknowledged that this may be due in part to the pandemic. He questioned how policy could be changed if the data before the Board was out of date.

An officer suggested that there needed to be a discussion in terms of violence against women and girls, youth offending and adolescent safeguarding in terms of Board ownership and whether this sat with the Safer Harrow Board or the Safeguarding Children and Adult Board. He requested this be noted for further discussion.

In response to a question as to why the areas highlighted had been chosen as a focus, the Board was advised that in terms of the integration agenda, prevention needed to be embedded throughout the strategy.

A Member questioned how the difficulties for those residents for whom English was not their first language or were refugees would be engaged with. He stated that GP practices had previously acted as a form of hub where people could meet but it was now difficult for residents to get a GP appointment. In terms of understanding Harrow's communities, the Board was advised that there were a number of initiatives underway including the Conversation Café, Community Champions and around vaccine hesitancy and that it was important to understand the barriers communities faced. Harrow had a diverse community that may require different services and there was work being done around integration and development of services and steering groups would assist in shaping these. Information sharing was also important.

In terms of GP access, the representative of the Integrated Care Board accepted that this remained an issue that was exacerbated by the workforce crisis, changing demographics and more complex patient needs. The Board

indicated that they would welcome an item for discussion on this topic at a future meeting.

The Board then discussed the role of SRO and identifying who would take on those roles. It was suggested that this be discussed outside of the meeting so that contact could be made with the relevant officers. The Chair requested that when considering the Healthy Place domain, housing in the private rented sector be addressed. It was further commented that it was important to have some representation from Housing colleagues.

RESOLVED: That

- (1) the approach to delivery of the health and wellbeing strategy be endorsed;
- (2) a Senior Responsible Officer (SRO) for each one of the three strategy domains outlined in the report be endorsed;
- (3) the officers identified as SROs following the meeting be reported to the Board for approval.

38. Launch of Our Way Forward: Strategy for London North West University Healthcare NHS Trust

The Board received a report which provided details of London North West University Healthcare NHS Trust Our Way Forward strategy which set a clear vision for the future and shape of the Trust's work for the next five years.

Following a detailed presentation of the strategy, the Board made comments and asked questions as follows:-

- Midwifery services did not appear to be mentioned within the strategy and, having previously been dangerous and inadequate, clarification was sought on the plans to remedy this. The Board was advised that the Maternity Strategy had been launched at the end of 2022 and was organised around three domains; leadership and governance, safe and effective care and women centred care. The service had fluctuated between adequate and inadequate and in terms of being sustainably 'good' this would be progressed through the strategy over the next year or so. A Maternity Improvement Lead had been appointed the previous week as a continuation of investment in the department/service.
- Objective 4 of the strategy outlined delivery in the community and clarity was sought in terms of integration the other strategies the Trust was looking to adopt to progress community based support. The Board was advised that pre Covid, London North West had not always been as outward facing as it should have been but was ready to play its part working with partners. Some of this would be around innovation and delivering services in a different way or it might be the provision of expertise or the use of buildings and assets. An officer commented that there had been a shift in the culture of the Trust and cited the example of a paediatrician being available at a Children's Health Hub and consultants being more available.

- Northwick Park Hospital had a significant impact on Harrow and placed pressure on the wider system and the long term vision of the Trust for the hospital was questioned. The Board was advised that service changes such as the new 'front door' and virtual wards and enhancements as well as investment in a purpose built critical care unit for the hospital would address this. The balance between Ealing Hospital and Northwick Park also required consideration as well as staffing issues.
- Concern was expressed about the use of annual indicators to measure performance, particularly when out of date data was being used. The data was from the staff survey of 2021 and therefore the picture might now be different. The Board were advised that the staff survey for 2022 had just been published but the point was acknowledged and the Trust would be introducing pulse surveys.
- Whilst welcoming the comprehensive report and strategy and its ambitions a Member questioned whether some of the work had been completed and how feedback from users was obtained. Whilst the automated texts were welcomed, some residents received 3 or 4 copies of the same letter and this had to be resolved. In response, the Board were advised that the friends and family test and patient care participation group provided feedback. It was acknowledged that support services had not been prioritised but that it was hoped that investment to save would resolve the duplication of letters.
- In terms of supporting and promoting wellbeing of staff, one example where working together would be welcomed was cervical screening of women under 50. The integrated staff forum could be used as a vehicle for addressing workplace health.

The Board thanked the representatives of the Trust for the presentation.

RESOLVED: That the report be noted.

39. Any other Urgent Business

The Board were informed that the Council had been advised of a joint targeted area of inspection of children in need. This was a multiagency inspection with 9 inspectors on site from 27 to 31 March 2023. Feedback would be given to the Board.

(Note: The meeting, having commenced at 10.05 am, closed at 11.20 am).

(Signed) Councillor Paul Osborn
Chair