

HEALTH AND WELLBEING BOARD MINUTES

14 JANUARY 2020

Chair:	* Councillor Graham Henson		
Board Members:	* Councillor Simon Brown		
	* Councillor Janet Mote		
	* Councillor Christine Robson		
	* Councillor Krishna Suresh (3)		
	* Dr Genevieve Small (VC)	Chair, Clinical Commissioning Group	
	* Marie Pate	Healthwatch Harrow	
	* Javina Sehgal	Harrow Clinical Commissioning Group	
	* Dr Muhammad Shahzad	Clinical Commissioning Group	
Non Voting Members:	† Carole Furlong	Director of Public Health	Harrow Council
	* Paul Hewitt	Corporate Director, People	Harrow Council
	* John Higgins	Voluntary Sector Representative	Voluntary and Community Sector
	Chief Superintendent Sara Leach	Harrow, Brent & Barnet Police	Metropolitan Police Service
	* Chris Miller	Chair, Harrow Safeguarding Boards	Harrow Council
	* Angela Morris	Director of Adult Social Services	Harrow Council

In attendance: (Officers and Partner Organisation)	Natasha Azzopardi	CBU Manager for Harrow Specialist Services	NW Division, CLCH NHS Trust
	Surita Bahri	Public Health Strategist	Harrow Council
	Simon Crawford	Director of Strategy & Deputy CEO	LNWH NHS Trust
	Alex Dewsnap	Director of Strategy	Harrow Council
	Donna Edwards	Finance Business Partner – Adults & Public Health	Harrow Council
	Chimeme Egbutch	Public Health Strategist	Harrow Council
	Tom Elrick	Assistant Managing Director	Harrow CCG
	Seth Mills	Head of Service CLDT & CYAD	Harrow Council
	Tanya Paxton	Harrow Borough Director	CNWL NHS Foundation Trust

- * Denotes Member present
- (3) Denotes category of Reserve Member
- † Denotes apologies received

96. Change of Membership

The Board noted that John Higgins had been appointed as representative of the Voluntary and Community Sector with Varsha Dodhia as the Reserve.

The Chair welcomed John Higgins to his first meeting.

97. Attendance by Reserve Members

RESOLVED: To note the attendance of the following duly constituted Reserve Members:

Ordinary Member

Councillor Ghazanfar Ali

Reserve Member

Councillor Krishna Suresh

98. Declarations of Interest

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

99. Minutes

RESOLVED: That the minutes of the meeting held on 19 September 2019, be taken as read and signed as a correct record.

100. Public Questions, Petitions and Deputations

RESOLVED: To note that no public questions, petitions or deputations had been received.

RECOMMENDED ITEMS

101. Health and Wellbeing Board Revised Terms of Reference

The Board considered a report on proposed amendments to its terms of reference. The Corporate Director People informed the Board that the changes had arisen from discussions at the Executive Board and Partnership Boards with regard to the purpose of the Board within the Integrated Care Partnership (ICP). The changes included confirmation that the Board did not perform a scrutiny function and emphasised the expectation that partners would be invited routinely.

The Board confirmed the view of the Healthwatch Harrow representative that the key responsibility 'To have a role in agreeing the commissioning arrangements for local Healthwatch.' had not taken place and agreed to its deletion from the terms of reference.

Resolved to RECOMMEND: (to Council)

That the amended terms of reference be adopted.

RESOLVED ITEMS

102. Supporting People on a Section 117 (S117) Plan

Following a presentation to the January meeting of the Board, a report was received which set out the agreed approach to supporting people placed on Section 117 of the Mental Health Act 1983 which required after hospital care and or social care support.

The Board noted that the preview funding was jointly 50/50 but the new framework due to be fully implemented in March proportioned funding according to health needs. This would be operational for all new cases.

The Board considered that the approach provided a good example of partnership work with clear processes and criteria and enabled common programmes for staff training.

RESOLVED: That the report be noted.

103. Better Care Fund

The Board received a report which set out details of the Better Care Fund (BCF) 2019/20 submission made by Harrow Council and NHS Harrow CCG to NHS England on 27 September 2019.

The officer introduced the report stating that it had not been possible to submit the report to the previous meeting as the guidelines had not been available at that time. The Board was advised that the submissions were nationally assured and the support of the Board had to be confirmed in order to receive the Letter of Assurance.

The Board considered that the BCF discussions had resulted in a strong piece of partnership work. It was noted that, whilst historically confined to CCG commissioners and the Council, the 2020/21 approach incorporated health and social care needs with the CCG and Local Authority commissioned providers, alongside third sector organisations. Some overlap, such as the Home First/Discharge to Assess, was acknowledged. With effect from April the scope would include the wider community, for example, acute services and would be fed through delivery boards. It was important that the BCF was key in emerging pathway and unplanned care.

In response to a question as to the arrangements for the participation of the voluntary sector as the provider for some schemes, it was stated that significant input was expected as part of the Integrated Care principles. The governance and forum proposals would have regard for the closer involvement of voluntary acute and community providers.

A Board Member expressed concern at the continuity of the local context in view of the amalgamation of CCGs. In response it was noted that the focus would be on functions such as financial agenda setting with the suggestion that there be four groups of CCGs, including one for Brent and Harrow, for functions such as place based care.

RESOLVED: That

- (1) the attached submission and the schemes funded by the Better Care Fund be noted;
- (2) it be noted that the quarter 3 position, which would inform the 2020/21 BCF Allocations, would be reported to the Board in March

104. Update on Integrated Care Partnership

A report was received which informed the Board on the latest position in the development in Harrow of the Integrated Care Partnership (ICP) including population health managements.

The CCG Managing Director who was the Senior Responsible Officer for the Programme introduced the report, advising that North West London was part of the accelerated programme and that work was taking place on the footprint. It was noted that a management Board including the CEOs of key partners had been established with leadership support from PPL Consulting.

The Board was advised that the Population Board had met twice and was considering how to best use the data for place based care and work with Primary Care Networks.

A further update would be submitted to the Board in March 2020 which would include a narrative for phases 2 and 3.

RESOLVED: That the report be noted.

105. Draft Suicide Prevention Action Plan for Brent and Harrow Councils

The Board received a report which set out the public health approach taken to develop a borough wide Suicide Prevention Plan with partners, in line with the national strategy 'Preventing Suicide in England: A cross government outcomes strategy to save lives'.

An officer introduced the report stating that the focus for 2019-20 was a reduction in the risk of suicide in men in Brent and Harrow and children and young people. Attention was drawn to: the funding available to work with people affected by suicide in order to set up pathways and systems; a high priority would be to work with next of kin; and that the training offer was scheduled around mental health and suicide. With regard to the identification of a pattern of male suicide aged 40-50, the action plan included the exploration of opportunities to promote suicide prevention for businesses, workplaces and the community.

The Board was advised that London's first multi-agency information sharing hub was now live which enabled vital information to be securely shared to enable effective bereavement support and the improvement of suicide prevention work throughout London. However access to the documents was not possible in the absence of the named person which needed to be addressed. It was hoped that additional granular data such as age and ethnicity would be available in the future.

The Board was advised that raising awareness was part of the Safeguarding Boards' plans and would be the theme of the conference to be held on 31 January 2020.

In response to a question, the Harrow Borough Director, CNWL NHS Foundation Trust advised that CNWL funding for Crisis Haven covering 3.00 pm to midnight had gone out to tender with the aim of diverting attendance from A&E.

In response to questions, the Board was informed that:

- all designated Safeguarding Leads in schools had received training from Papyrus and the Molly Rose Foundation. Every school had a policy regarding social media and Safeguarding Leads had been trained. Whilst schools were working with parents, it was recognised that more needed to be done and to this end it was a theme of the Safeguarding conference;
- the first step with regard to mental health was contact with a health professional and then crucial that they were listened to;

- the thrive 20 minute online training was an excellent resource but it needed to be recognised that it was emotionally demanding and could invoke a lot of responses from the recipient. Organisations were encouraged to share the training;
- work was being undertaken with Young Harrow Foundation to lead and help raise awareness with the community and parents. The next meeting aimed to firm out responsibility and will look at the resources and support available. There was not a specific budget for this work;
- the information received from the coroner was restricted to the gender of the person;
- there was not an explicit action plan for a target reduction. Alignment with the 5 year mental health view was needed.

A Member referred to the availability of self harm admission numbers and suggested that information on the number of presentations to hospitals for self harm who were not subsequently admitted would be useful.

In conclusion, the Board was advised that the developing action plan would be submitted to the Board for a co-ordinated response and subsequent review.

RESOLVED: That

- (1) the development of a Suicide Prevention Plan and the process of developing the Action Plan be supported; and
- (2) it be agreed to review the final Plan and its implementation once developed.

106. Public Health Quarterly Update Report

The Board received a report which provided an update on the work programmes of the Public Health Team for the second quarter of 2019-20

RESOLVED: That the report be noted.

107. Draft Joint Health and Wellbeing Strategy Consultation

Consideration was given to the draft Joint Health and Wellbeing Strategy. The Board was informed that it was a statutory requirement and set out the strategic objectives and focus for the Board in addressing the health and wellbeing needs of the population of Harrow for 2020-2025.

The Board was advised that the current draft was out for consultation having already been circulated to stakeholders. It aimed to ensure a common language and not duplicate work. The expectation was that there would be more self-management using technology, the sharing of information and

common practices. Following discussion at the Health and Wellbeing Executive, the CCG Leads would be incorporated in the document.

The Strategy was parallel to the Borough Plan which would be submitted in due course.

RESOLVED: That

- (1) the draft strategy be approved for consultation;
- (2) the final strategy be submitted to the Board in March together with the Borough Plan.

108. INFORMATION REPORT - Draft Revenue Budget 2020/21 and Medium Term Financial Strategy 2020/21 to 2022/23

The Board received a report which detailed Harrow Council's Draft Revenue Budget 2020/21 to 2022/23, as reported to the Council's Cabinet on 6 December 2019. It was noted that the budget and MTFs would return to Cabinet in February 2020 for final approval and recommendation to Council.

An officer introduced the report and drew particular attention to the key points relevant to the Health and Wellbeing Board including the continued financial challenges to the health and social care sector with future funding pressures identified by modelling reflected in table 2 of the report. The pressures were linked to future funding announcements and the MTFs currently did not assume any additional support over and above that received for 2020/21. In particular the commissioning activity could not be implemented until there was some surety of additional funding. The 2020/21 Adults budget assumed that funding for the Protection of Social Care through the Better Care Fund would remain at the agreed 2019/20 level of £6.112m.

In response to questions it was noted that:

- the transformation above £2m for transport was to identify how it could be undertaken differently in order to fund within the envelope;
- the first two lines for Social Care was the previously agreed GMT which was built in but not the bottom line (page 187);
- the matrix built in the shift in funding and the effect of existing cases.

The CCG Managing Director stated that the budget would be monitored at every Board meeting and that it would be helpful to have discussions on a plan around BCF which recognised the limited funding and ring fence that could be taken into account at the February or March A&E Delivery Board subject to it being decided whether this was the most suitable forum. The Director of Strategy and Deputy CEO, NWH NHS Trust, suggested the formation of a smaller group regarding conversations around assumptions and initiatives. Harrow Council welcomed the opportunity to share the conversation. It was advised that the A&E Delivery Board included Ealing and

Brent in addition to Harrow. The Chair referred to the benefit of collaboration on some targets in order to mitigate sudden spikes and expressed interest in the outcome of the talks. It was agreed that it would be helpful to set up a BCF Board in Harrow as good governance around these issues. The Director for Adult Services would take this forward with colleagues from the Acute Trust and the CCG.

RESOLVED: That the report be noted.

(Note: The meeting, having commenced at 11.30 am, closed at 1.20 pm).

(Signed) COUNCILLOR GRAHAM HENSON
Chair