

# HEALTH AND WELLBEING BOARD

# **MINUTES**

# 11 MAY 2017

Chair: \* Councillor Sachin Shah

Board Members:

Councillor Simon Brown Harrow Council

\* Councillor Janet Mote
 \* Councillor Varsha Parmar
 \* Councillor Mrs Christine
 Harrow Council
 Harrow Council

Robson

Dr Amol Kelshiker (VC) Chair of Harrow CCG

\* Dr Shahla Ahmad Harrow Clinical

Commissioning Group

\* Julian Maw Healthwatch Harrow

\* Dr Genevieve Small Clinical Commissioning Group

Non Voting Members:

† Bernie Flaherty Director of Adult Harrow Council Social Services

Carol Foyle Representative of Voluntary and the Voluntary Community

and Community Sector

Sector

\* Andrew Howe Director of Public Harrow Council

Health

\* Paul Jenkins Interim Chief Harrow Clinical

Operating Officer Commissioning

Group

† Rob Larkman Accountable Officer Harrow Clinical

Operations

Commissioning

Group

Jo Ohlson Director of NW London NHS

Commissioning England

	†	Chief Superintendent Simon Ovens Chris Spencer	Borough Commander, Harrow Police Corporate Director, People	Metropolitan Police Harrow Council
In attendance: (Officers)	*	Sarah Crouch	Public Health Consultant	Harrow Council
	*	Carole Furlong	Public Health Consultant	Harrow Council
	*	Gary Griffiths	Deputy Chief Operating Officer	Harrow Clinical Commissioning Group
	*	Visva Sathasivam	Head of Adult Social Care	Harrow Council

# 204. Attendance by Reserve Members

**RESOLVED:** To note the attendance at this meeting of the following duly appointed Reserve Members:-

Ordinary Member	Reserve Member
Dr Shaheen Jinah	Dr Shahla Ahmad
Mina Kakaiya	Julian Maw

#### 205. Declarations of Interest

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

#### 206. Minutes

**RESOLVED:** That the minutes of the meeting held on 2 March 2017, be taken as read and signed as a correct record.

## 207. Public Questions, Petitions and Deputations

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

#### **RESOLVED ITEMS**

## 208. Future Joint Strategic Needs Assessments (JSNA) in Harrow

The Board received a report on the Joint Strategic Needs Assessment which proposed changes on how it could be delivered in the future so that it was responsive and more easily managed.

An officer introduced the report, detailing the three options: a single JSNA produced once every three to five years, a thematic annual report, or a virtual JSNA.

In response to questions arising from the requirement for the webpage to become more functional in order to achieve a virtual JSNA, it was noted that:

- the date of posting for each item and for any subsequent update would be displayed;
- the ability to respond to requests for further information would be dependant on officer capacity. Responses to previous questions would be available in a separate section;
- a matrix would track progress and the Board would periodically receive updated information. Each report would have a key messages section to enable the capture of issues;
- the JSNA and Health and Wellbeing Strategy had been funded by Public Health. However, its funding had been reduced and any funding opportunities from the CCG would be welcomed to take the initiative forward:
- the need for all reports to be downloadable and with the opportunity to bring in manageable links was recognised.

**RESOLVED:** That option 3, a rolling virtual JSNA, be supported.

## 209. INFORMATION REPORT - Health and Wellbeing Strategy Update

Consideration was given to a report which set out progress made against the nine actions which the Board had committed to for 2016/17 to implement the Harrow Health and Wellbeing Strategy.

An officer introduced the report and drew particular attention to the good progress in the Children and Adolescent Mental Health Service transformation plan. It was noted that the Council had signed the 'Time to Change' Employer Pledge at a public event earlier that day.

A Member referred to the review of the Early Intervention Service and suggested a review after a year of implementation of the redesigned model of service delivery.

It was noted that there would be no further updates in relation to a specific Harrow Health and Wellbeing Strategy action plan. Instead it was proposed that the updates would come as a result of collaborative discussion around local implementation of the North West London Sustainability and Transformation Plan.

A CCG representative informed the Board that the Harrow Health app would have a second phase of publicity in May. Approximately 14,000 people had used the app to date including a significant number of people aged over 50.

**RESOLVED:** That the report be noted.

# 210. Child Poverty and Life Chances Strategy and Action Plan

The Board received the Child Poverty and Life Chances Strategy which brought together the actions currently being undertaken by Harrow Council and partners that would help mitigate the impact of child poverty in Harrow.

It was noted that the strategy for Harrow was to focus support and interventions on the eight areas in the borough where the disparity between income and health was higher compared to other ward counterparts.

Members were informed that officers were trying to identify funding opportunities and opportunities to work with partner organisations. A Capable Communities Grant had been obtained.

#### **RESOLVED:** That

- (1) the Child Poverty and Life Chances Strategy and action plan be supported;
- (2) a verbal report on key issues be presented to the Board in six months and an annual report be submitted.

# 211. INFORMATION REPORT - Better Care Fund (BCF) Update Quarter 3 2016/17 and 2017/18 Planning

A report was received which set out progress on the Better Care Fund (BCF) in the third quarter of 2016/17. Extracts from the Quarter 3 report indicated Harrow's position in relation to the plan and supplied data in narrative form to provide an indication of the estimated end position. It was noted that NSE England feedback on progress was positive

A CCG officer drew particular attention to additional resources for extended primary care access to primary care which was currently 8 am to 8 pm weekdays and access at weekends, and that April 2017 had seen the first time in twelve months that there were zero delay transfers of care related to health...

The Board was informed that the Council and CCG were making progress on the negotiation on the 2017/18 plan and an update would be submitted to the Board meeting in July.

**RESOLVED:** That the report be noted.

(Note: The meeting, having commenced at 12.35 pm, closed at 1.20 pm).

(Signed) COUNCILLOR SACHIN SHAH Chair