

### **MINUTES**

#### **Health & Wellbeing Board**

#### **MINUTES OF PROCEEDINGS**

Minutes of a meeting of the **Health & Wellbeing Board** held on **Thursday 24th May, 2018**, Room 3.6 and 3.7, 3rd Floor, 5 Strand, London, WC2 5HR.

#### **Members Present:**

Chairman and Cabinet Member for Family Services and Public Health:

Councillor Heather Acton

Clinical Representative from the Central London Clinical Commissioning Group:

Dr Neville Purssell

Minority Group Representative: Nafsika Butler-Thalassis

Bi-borough Public Health: Mike Robinson Bi-Borough Adult Social Care: Bernie Flaherty

Bi-Borough Children's Services: Annabel Saunders (acting as Deputy) Housing and Regeneration: Jennifer Travassos (acting as Deputy)

Clinical Representative from West London Clinical Commissioning Group:

Dr Naomi Katz

Healthwatch Westminster: Olivia Clymer

Chair of Westminster Community Network: Hilary Nightingale

Central London Community Healthcare NHS Trust: Basirat Sadiq (acting as Deputy)

Imperial College NHS Trust: Clare Robinson

Central and North West London NHS Foundation Trust: Maria O'Brien

**Also Present:** Jules Martin (Managing Director, NHS Central London Clinical Commissioning Group) and Simon Hope (Deputy Managing Director, NHS West London Clinical Commissioning Group).

#### 1 MEMBERSHIP

- 1.1 Apologies for absence were received from Melissa Caslake (Bi-borough Director of Children's Services), Tom McGregor (Director of Housing and Regeneration), Dr David Finch (NHS England), Dr Joanne Medhurst (Central London Community Healthcare NHS Trust) and Detective Inspector lain Keating (Metropolitan Police).
- 1.2 Annabel Saunders (Bi-borough Director of Commissioning), Jennifer Travassos (Head of Prevention) and Basirat Sadiq (Central London Community Healthcare NHS Trust) attended as Deputies for Melissa Caslake, Tom McGregor and Dr Joanne Medhurst respectively

- 1.3 The Chairman welcomed Councillor Nafsika Butler-Thalassis, Olivia Clymer and Clare Robinson to the Board who were replacing former Councillor Barrie Taylor, Janice Horsman and Anne Mottram as the respective Minority Party, Healthwatch Westminster and Imperial College NHS Trust representatives. The Chairman advised that her Cabinet portfolio had changed and she was now Cabinet Member for Family Services and Public Health.
- 1.4 Jules Martin (Managing Director, NHS Central London Clinical Commissioning Group) was also in attendance. An apology for absence was received from Louise Proctor (Managing Director, NHS West London Clinical Commissioning Group). Simon Hope (Deputy Managing Director, NHS West London Clinical Commissioning Group) attended in her absence.

#### 2 DECLARATIONS OF INTEREST

2.1 Councillor Nafsika Butler-Thalassis declared that she works for the Health Forum, a Westminster based charity, and that her husband receives a carer's allowance for their son.

#### 3 MINUTES AND ACTIONS ARISING

#### 3.1 **RESOLVED**:

That the minutes of the meeting held on 20 March 2018 be signed by the Chairman as a correct record of proceedings.

- 3.2 The Chairman advised that a date was awaited for the Board to receive a report from the Care Quality Commission (CQC) on its work. She added that the City Council was now working closely with the CQC. It was also noted that NHS Central London Clinical Commissioning Group (CCG) were working closely with the CQC and were receiving CQC reports prior to their publication which the CCG found helpful.
- 3.3 The Chairman confirmed that she had received further information in respect of a London wide social media campaign on suicide prevention and Members noted that they had received the Health and Wellbeing Centres Task Group report that contained some useful findings.

#### 3.4 **RESOLVED:**

That progress in implementing the actions and recommendations agreed by the Westminster Health and Wellbeing Board be noted.

## 4 PATIENTS AND THEIR CARERS EXPERIENCES OF LIVING WITH LONG TERM HEALTH CONDITIONS IN WESTMINSTER

4.1 Olivia Clymer (Chief Executive Officer, Healthwatch Central West London) presented the draft report and advised that further comments could still be submitted. She stated that its findings highlighted the challenges for patients and their cares in co-ordinating their care and the report also provided

- examples of best practice. There were a number of practical ways in which care could be improved and Olivia Clymer suggested that an update be provided to the Board in around nine months' time.
- 4.2 Members welcomed the report and commented that some patients and carers experienced difficulties in accessing services because English was not their first language. It was asked whether such patients and carers had been approached to give their views. Members commented that variations in quality of care amongst GP practices was an issue in Westminster. Jules Martin (Managing Director, NHS Central London Clinical Commissioning Group) asked about the extent of work done with Patient Participation Groups (PPGs).
- 4.3 In reply to the issues raised, Olivia Clymer advised that there had been no specific work on obtaining views from patients and carers whose first language was not English, however this was something that could be undertaken. She acknowledged that variations in quality of care amongst GP practices in Westminster was an issue and this was an area that was being looked at in some detail. Efforts were being made to change culture and ensure all patients had equal access to quality care. Olivia Clymer advised that Healthwatch worked well with PPGs in both Central and West London through practice managers and this was an effective route in achieving good dialogue. There was also a recommendation in the report to make more use of PPGs.
- 4.4 The Chairman welcomed the report and advised that the North West London Health and Care Transformation Group had revised its terms of reference and there were now two Healthwatch representatives on the Group.
- 4.5 Olivia Clymer requested that any further comments and suggestions from the Board with regard to the report be provided by 7 June.

# 5 CHILDREN AND YOUNG PEOPLE SPECIAL EDUCATIONAL NEEDS AND DISABILITIES JOINT STRATEGIC NEEDS ASSESSMENT

- 5.1 Catherine Handley (Public Health Business Partner) presented the report and emphasised the pivotal role the Board played in overseeing the assessment of local needs and strategy development. The Joint Strategic Needs Assessment (JSNA) provided evidence for the strategy which would be considered at a future Board meeting. Catherine Handley advised that 16% of pupils at state funded schools had Special Educational Needs and Disabilities (SEND) and 60% of SEND plans were completed within the deadline and this rate was improving. However, there were some long waiting times and whilst children were getting support during this time, their families needed more support too. Speech and language were the most common areas where children needed support.
- 5.2 Catherine Handley advised that the themes identified to take forward the local strategy included early identification, diagnosis and post diagnosis, information and sign posting, service provision and transition. She

- emphasised the importance of providing the same quality of service across the whole of Westminster.
- 5.3 Members welcomed the report and asked if details were available on the proportion of children who made their two year health visitor appointment. In respect of speech therapy and language, it was emphasised how important follow-up support was following the first treatment. Members acknowledged that overall reading standards in Westminster were good, however it was asked what steps were being taken for children who were not reaching the target reading standards.
- 5.4 Members commented that it was often difficult to track and obtain access to the two year health checks. There were also occasions when parents refused treatment for their children because they were not happy with the outcome of the diagnosis. It was important for all partner organisations to work together and provide a 'wrap around' service. Members felt that the SEND JSNA set out the challenges clearly and it was important that the strategy picked up the response. A Member welcomed the focus on outcomes in the report and she acknowledged the concerns about support for speech and language and the need for on-going support whilst waiting for SEND plans. She suggested suggested that health notifications for children aged 0 to 5 years should also be accepted from parents and childcare centres. She also advised that there was a new key working service for parents to help them navigate through what services were available.
- 5.5 The Board agreed the report, subject to the comments made by Members.

#### 6 ANY OTHER BUSINESS

- 6.1 The Chairman advised that there had been some changes both in terms of councillors and officers on the North West London Health and Care Transformation Group since the Local Elections on 3 May. She also circulated a progress update on the North West London health and care partnership to Members. A Member added that the partnership was setting targets and ambitions and was trying to reach the point where both social care and health services could be accessed from the same place.
- 6.2 Jules Martin advised that multi-speciality community partnerships (MCPs) were being developed to promote patient pathways. Future reports on MCPs would be presented to the Board and they represented significant changes to the health system. Members commented that they were encouraged by what MCPs were seeking to achieve and hoped that any resource issues could be overcome. Members also remarked that it was important to ensure that MCPs performed consistently.

The Meeting ended at 4.38 pm.

CHAIRMAN:	DATE	