

MINUTES

Health & Wellbeing Board

MINUTES OF PROCEEDINGS

Minutes of a meeting of the **Health & Wellbeing Board** Committee held on **Thursday 30th March, 2023**, Chelsea Old Town Hall, King's Road, Kensington and Chelsea, London, SW3 5EE.

Members Present:

Councillor Nafsika Butler-Thalassis, Cabinet Member for Adult Social Care, Public Health and Voluntary Sector, WCC

Councillor Sarah Addenbrooke (Chair), Lead Member for Adult Social

Councillor Tim Mitchell, Minority Group, WCC

Sarah Newman, Bi-Borough Executive Director of Children's Services

Anna Raleigh, Bi-Borough Director of Public Health

James Benson, Central London Community Healthcare NHS Trust

Andrew Steeden, Primary Care Representative

Jan Maniera, Primary Care Representative

Angela Spence, KCSC

Ann Sheridan, Community Services Manager, Central and North West London NHS Foundation Trust

Danni O'Connell, Healthwatch Westminster and Kensington and Chelsea (substitute)

Apologies for Absence: Bernie Flaherty, Judith Davey and Lena Choudary-Salter

1 INTRODUCTION AND WELCOME TO THE MEETING

Councillor Sarah Addenbrooke welcomed everyone to the meeting, and thanked those who facilitated the tour of Violet Melchett Health Centre prior to the Board meeting.

It was noted that the theme of this Health and Wellbeing Board meeting was Complex Care.

2 MEMBERSHIP

Apologies for absence were received from Councillor Faulks, Bernie Flaherty, Lena Choudary-Salter, and Judith Davey.

Danni O'Connell attended as a substitute for Judith Davey.

3 DECLARATIONS OF INTEREST

None received

4 MINUTES AND ACTIONS ARISING

James Benson noted that his title was recorded incorrectly and should read Central London Community Healthcare NHS Trust.

The minutes of the meeting held on 26 January 2023 were confirmed as a correct record and signed by the Co-Chair, Councillor Nafsika Butler-Thalassis.

5 HEALTH AND WELLBEING BOARD - NEW TERMS OF REFERENCE

The Terms of Reference were noted by the Board.

6 MENTAL HEALTH (WRITE-UP FROM LAST MEETING)

The report was noted by the Board.

7 COMPLEX CARE

Dr Andrew Steeden introduced the report, and raised the following points:

- 1. The importance of working together as partners to provide an integrated care offer.
- 2. That this work was integral to the aim of reducing health inequalities.

Dr Andrew Steeden invited Rose Doyle, from the Local Accountancy Project, to present stories of those with lived experiences in this area. Rose shared the following examples:

- 1. Health deterioration when not provided with sufficient support after undergoing surgery.
- 2. Difficulties of finding respite care.
- 3. Once discharged, difficulties finding health professionals to contact.
- 4. Care only provided temporarily.
- 5. Being put off wanting to have operations out of fear of the lack of support that would be received following it.

Members and attendees visited four market stalls, and provided feedback. The stalls were on the topics of discharge, care homes, good health, and community safety.

The Chair invited Members of the Board to provide reflections from their discussions at the market stalls, and the following points were raised by Board members:

- 1. The stalls highlighted the various determinants of health and wellbeing and the importance of thinking about the topic more widely.
- 2. The stalls provided Board members with hope and that the next stage was making goals a reality.

- 3. The stalls emphasised the vulnerabilities of those who lived alone, particularly with regards to discharge.
- 4. The importance of having an integrated offer for discharge services.
- 5. The value of residents knowing who to contact in different circumstances and feeling confident that they would receive a response.

8 HEALTH AND WELLBEING STRATEGY CONSULTATION

Rachel Soni and Joe Nguyen introduced the item, and raised the following points:

- 1. The Strategy was a document which set out the ambition and vision for the health and wellbeing of the residents in the Boroughs. There were ten key ambitions and various outcomes related to each ambition.
- 2. There were still errors in this draft which would be corrected and there was still time to make changes based on feedback received at the meeting.
- 3. Feedback had been taken as to how to improve the consultation methodology.
- 4. The Strategy would be provided in a hard copy form, as well as an interactive online version.
- 5. It allowed NHS partners to work differently with other public sector partners, such as schools and housing departments.
- 6. The North West London Integrated Care System were also consulting on their Strategy and this linked to it on a more local level.
- 7. The Strategy supported broader social and economic development.
- 8. Board Members were asked to help to share the Strategy and to feature it in their own organisational and business plans.

A demonstration was provided of the online, interactive version of the Strategy.

The Chair invited comments from Board Members on the Strategy, and the following points were raised:

- 1. Healthwatch noted that they were working with Council colleagues to provide anyeasy read version of the document.
- 2. It was important that it set out the issues, as well as the ambitions.
- 3. Suggested having an access page for residents to use so they know who to contact for an issue and how to do so.
- 4. To maintain it as a live document that could be edited as the demographic of residents' changes.
- 5. Greater reference to the Grenfell Tragedy and the support in place for bereaved, survivors and the local residents to be added.
- 6. Asked to revisit those who helped to develop the Strategy in its early stages to gain their feedback on the changes made.
- 7. An appendix would be added to provide the dates of the statistics referenced in the Strategy.
- 8. It needed to be made clear how the Strategy fitted in with other key documents.
- 9. Suggested adding reference to the planning cycles and incremental achievements at the start of the document and revisiting it at the end.

10. Partners needed to know clearly what their role was in relation to the Strategy.

The Chair then invited comments from members of the public who were in attendance, and the following points were raised:

- 1. It was shared that residents' interests included the impact of climate change on health and wellbeing, the impact of mental ill health on health and wellbeing, and the importance of working closely with the voluntary sector and ncommunities.
- 2. It was also echoed that Grenfell recovery should be a stronger focus throughout the Strategy, as those impacted were starting to experience the longer-term impacts of the tragedy.

RESOLVED:

The Board noted the work carried out to date to develop the draft 10-year Health and Wellbeing Strategy.

The Board approved the draft strategy for consultation and agreed to endourse and promote the consultaion through their local networks and partnerships.

9 ANY OTHER BUSINESS

There was one matter of business raised by a resident in attendance, and the following points were made:

- 1. Due to the reduction in mental health beds and services, mental health issues of those who were disengaged with the system were going untreated and this was causing severe impacts to communities.
- 2. Examples including a stabbing and abusive neighbours were shared with the Board.
- 3. The Royal Borough of Kensington and Chelsea had responded and committed to help with the issues in the community and the resident asked for all stakeholders to do the same.
- 4. Board Members noted that they would discuss these issues outside of the meeting with the resident.

10 DATE OF NEXT MEETING

The next meeting would be held on 1 June 2023, to be hosted by the City of Westminster.

The Meeting ended at 17.55