

# MINUTES



CITY OF WESTMINSTER



THE ROYAL BOROUGH OF  
KENSINGTON  
AND CHELSEA

## Health & Wellbeing Board

### MINUTES OF PROCEEDINGS

Minutes of a virtual concurrent meeting of Westminster City Council's and the Royal Borough of Kensington & Chelsea's **Health & Wellbeing Boards** held on 26 November 2020 at 4pm.

#### Present:

Councillor Tim Mitchell (WCC - Cabinet Member for Adult Social Care and Public Health)  
Councillor Cem Kemahli (RBKC – Lead Member for Adult Social Care and Public Health)  
Councillor Tim Barnes (WCC – Cabinet Member for Children's Services)  
Councillor Nafsika Butler-Thalassis (WCC - Minority Group Representative)  
Councillor Christabel Flight (WCC - Deputy Cabinet Member for Adult Social Care and Public Health)  
Councillor Lorraine Dean (WCC – Deputy Cabinet Member for Children's Services)  
Bernie Flaherty (Executive Director for Adult Social Care and Health)  
Senel Arkut (Bi-borough Director Health Partnerships)  
Russell Styles (Interim Director of Public Health)  
Visva Sathasivam (Bi-Borough Director of Adult Social Care)  
Jeffrey Lake (Deputy Director of Public Health)  
Grant Aitken (Bi-Borough Head of Health Partnerships)  
Annabel Saunders (RBKC & WCC – Assistant Director of Integrated Commissioning)  
Louise Butler (Interim Head of Safeguarding and Workforce Development)  
Aileen Buckton (Chair of the Safeguarding Adults Executive Board)  
Sarah Crouch (Bi-Borough Public Health)  
Anna Cox (Bi-Borough Public Health)  
Ullash Karia (Head of Leisure and Parks)  
Rachel Dickinson (Community Liaison Manager and Policy Manager)  
Nick Marchant (Community Engagement Officer)  
Michael Hagan (Local Account Group Representative)  
U Hla Htay (Local Account Group Representative)  
Michael Wills (Local Account Group Representative)  
Heather Clarke (WCC – Divisional Head of Housing Needs)  
Anne Pollock (Principal Policy Officer)

Isobel Caton-Harrison (Policy Officer)  
Emily Gordon (National Management Trainee)  
Neville Pursell (Chair, Central London CCG)  
Andrew Steeden (Chair, West London CCG)  
Louise Proctor (West London CCG)  
Philippa Johnson (Central London Community Healthcare NHS Trust)  
Robyn Doran (Central and North West London NHS Foundation Trust)  
Anna Bokobza (Imperial College Healthcare NHS Trust)  
Joe McGale (Head of Primary Care Strategy, WL CCG)  
Claire Hook (Director of Operational Performance, Imperial College Healthcare NHS Trust)  
Laura Bewick (Divisional Director of Operations for EIC, Chelsea & Westminster Hospital)  
David Thomas (Deputy Director of Performance and Contracting, Hounslow CCG)  
Hilary Nightingale (Westminster Community Network)  
Olivia Clymer (CEO, Healthwatch Central West London)  
Carena Rogers (Programme Manager, Healthwatch Central West London)  
Jenny Greenfield (Kensington & Chelsea Social Council)

## **1. WELCOME TO THE MEETING**

- 1.1 Councillor Tim Mitchell welcomed everyone to concurrent meetings of the Westminster and Kensington and Chelsea Health and Wellbeing Boards. Both Boards confirmed that Councillor Mitchell would Chair the meeting in line with the agreed memorandum of understanding.
- 1.2 The Chair welcomed Councillor Cem Kemahli to the Board as RBKC's new Lead Member for Adult Social Care and Public Health and as the new RBKC Health and Wellbeing Board Chair. Thanks were also expressed to Councillor Sarah Addenbrooke who had stepped down from the Board for her dedication and hard work as Chair and members wished her the very best as she retired from her Lead Member role.
- 1.3 The Chair also advised that Jennifer Travassos would be standing down as a member of the Board and thanked her for her many contributions to its work. He was pleased to announce that Heather Clarke would be replacing Jennifer and offered a warm welcome on behalf of the Board.

## **2. MEMBERSHIP**

- 2.1 Apologies for absence were received from Councillor Josh Rendall (RBKC - Lead Member for Family and Children's Services), Sarah Newman (Executive Director of Family Services), Jennifer Travassos (WCC – Head of Rough Sleeping), Jo Ohlson (NHS England North West London representative – NHS England), Iain Cassidy (Open Age) and Darren Tulley (London Fire Brigade).

### **3. DECLARATIONS OF INTEREST**

- 3.1 There were no declarations of interest.

### **4. MINUTES**

#### **RESOLVED:**

- 4.1 That the minutes of the Royal Borough of Kensington & Chelsea and Westminster City Council joint Health & Wellbeing Board meeting held on 8 October 2020 be agreed as a correct record of proceedings.

### **5. COVID-19 UPDATE**

- 5.1 The Chair expressed his thank to partners for their ongoing collaborative work over the past few months in responding to the Covid-19 pandemic and their support in assisting with the second lockdown.
- 5.2 Russell Styles (Interim Director of Public Health) provided the Board with a verbal update on the latest situation with regards to Covid-19 in Westminster and Kensington & Chelsea.
- 5.3 The Board noted that following a period of steady growth in Covid-19 cases within the bi-borough, rates had subsequently plateaued and were now displaying tentative signs of starting to fall, although it was too early to determine if this was a consistent trend. Case rates locally were below the national and London averages with the latest local data revealing that the bi-borough area had the fifth lowest rates within London. It was explained that the roll out of local testing sites within the bi-borough was supporting the increase in local testing rates. Despite these positive signs however the importance of remaining vigilant was essential, especially as the second lockdown period was ending, due to the disparities in case rates across London, with the North-East of London a particular concern.
- 5.4 Further information on the criteria used to determine tiers was provided and it was confirmed these would be reassessed on a regular basis.

### **6 UPDATE ON COVID-19 EXPERIENCES FROM LOCAL RESIDENTS**

#### **Healthwatch Patient Experiences of COVID-19**

- 6.1 Olivia Clymer (CEO, Healthwatch Central West London) and Carena Rogers (Programme Manager, Healthwatch Central West London) presented a report detailing resident experiences of Covid-19 from July to September 2020. It was explained that a variety of methods and channels had been used to gather the insights set out within the report with an additional focus on young people and local BAME communities.

- 6.2 The following key findings from the report were highlighted and discussed by the Board:
- Mental Wellbeing – this was an important issue being captured in all aspects of the survey responses. A particular concern was the impact on the mental health of young people and those vulnerable to the virus.
  - Social Isolation and Loneliness – This was another important issue identified which related not just to a person’s home environment but also other aspects such as a person’s lack of outdoor space.
  - Social Distancing – Many concerns were raised by respondents over the stress caused by people not social distancing or wearing face masks in their local area and how this would impact on them.
- 6.3 The Board discussed the impact of Covid-19 on the mental wellbeing of young people and how the BAME community had been disproportionately affected. It was also recognised that areas such as body image, social image and worries over academic achievement were particularly very high amongst young people and causes of severe stress. The Board noted that in addition there was a concern within the BAME community regarding the stigma of an individual, or family member, having received a positive Covid-19 test result. The importance of ensuring these areas of the community were supported was highlighted and noted by the Board.
- 6.4 Further concerns raised by local people included a lack of appointments at dentists and a lack of knowledge about Covid-19 and vaccines. It was explained that different options were being explored to ensure adequate information about services and support was disseminated to those areas of the community identified. This could potentially include information being provided at supermarkets, pharmacies or local faith groups to help assist and support those people requiring it. The Board thanked Healthwatch for producing a very informative report which highlighted the challenges faced by local people in terms of their social wellbeing and mental health. The report’s findings were noted and would greatly assist in the process of engaging and supporting local communities during the Covid-19 pandemic.

#### **Local Account Group Experiences of COVID-19**

- 6.5 Rachel Dickinson and Nick Marchant (Community Liaison, Adult Social Care) provided a brief background to the Local Account Group (LAG) and introduced the following three members of the Group to discuss the challenges, difficulties and opportunities presented by Covid-19: Mike Hagan, U Hla Htay and Michael Wills.
- 6.6 In terms of challenges the Board was informed by the three members of the following difficulties experienced:

- Lockdown had resulted in a lack of opportunities to participate in physical activities due to not being able to leave their house and the temporary closure of leisure centres and gyms;
- Emotional challenges due to being unable to meet regularly with family members, in addition to the impact of deaths and the inability to see loved ones at their final moments;
- Social isolation made worse for some by financial issues and poverty, immobility and a lack of access to resources; and
- Mental Health and well-being: an increase in anxiety and mental health issues where underlying disorders have been elevated. Also, people who were not aware they had mental health problems, now might develop mental health issues.

6.7 Despite these challenges the three LAG members explained that the Covid-19 pandemic had also presented opportunities, such as the following:

- Taking advantage of technology: using Social Media apps to stay in touch with family and friends;
- Spending so much time indoors was an opportunity to decorate their homes, do some gardening and meditate more;
- It provided a chance to become more involved with community groups such as the Local Account Group, enabling members to share their lockdown experiences; and
- Engaging with friends. Members were able to share their experiences and help support each other generating a greater community spirit.

6.8 The Board expressed its thanks to Mike Hagan, U Hla Htay and Michael Wills of the LAG for attending the meeting and sharing their experiences. The contributions the LAG provided to help improve the social care system in Westminster and Kensington and Chelsea was recognised by the Board as being particularly valuable.

## **7 LOCAL IMPLEMENTATION OF THE COVID-19 VACCINATION PROGRAMME**

7.1 David Thomas (Deputy Director of Performance and Contracting, Hounslow CCG) provided a verbal update on how the new Covid-19 vaccination programme would be implemented at the North West London level and what the timescales were for achieving vaccination coverage.

7.2 The Board was informed that the planning process for the delivery of the vaccine was happening at pace at both national and local levels. It was expected that small quantities of the Pfizer vaccine would be received in December 2020, but it was stressed that this was yet to receive approval from the Medicines and Healthcare products Regulatory Agency.

7.3 At a North West London level it was explained that over two million over 18s would need to be vaccinated and if there was a 75% or above uptake rate this would involve delivering a total of 2.9 million vaccinations which equated to

25,000 per day, 7 days a week between now and the end of April 2021. Significant work had been undertaken identifying the cohort of people who would be eligible to receive the vaccine first. Approximately 3,000 people would need employing to deliver the vaccine in the North West London area and work was being undertaken with organisations to source this workforce. Sites for vaccine delivery within each borough had also been identified and approval of these was expected shortly.

- 7.4 The Board recognised that this was a rapidly changing situation and noted that as the situation developed the details provided would be subject to change. The Board expressed its thanks for the hard work being undertaken to deliver a vaccine and requested that further information be provided as the programme developed.

## **8 SEASONAL FLU UPDATE AND APPROACH**

- 8.1 Sarah Crouch, Anna Cox (Public Health) and Joe McGale (Head of Primary Care Strategy, WL CCG) presented a paper which updated the Board on which flu strains were in circulation this winter and what additional measures had been taken to protect vulnerable residents in view of the rising Covid-19 cases.
- 8.2 The Board was advised that the ambition of the National NHS Flu vaccination programme was to deliver flu vaccinations to 75% of eligible population cohorts and 100% of front-line health and social care workers. There was a heightened focus on flu this year to protect vulnerable people and prevent health services being overwhelmed dealing with two potential concurrent outbreaks of Covid-19 and seasonal flu. An initial UK study of patients admitted to hospital earlier in 2020 showed that risk of death in Covid-19 patients more than doubled when they also had flu.
- 8.3 Both Council's had undertaken work to maximise the uptake of the flu vaccination. This included communications with NWL CCG to promote the flu vaccine both internally and externally via Council and CCG channels, social media and partnership bulletins throughout the flu season. Public Health and CCG Community Engagement were working with BAME networks, community champions and community engagement leads to ensure that the flu vaccine was promoted effectively to all communities and that there was an opportunity for communities to raise questions and have them answered.
- 8.4 The 2020 flu campaign undertaken by the North West London CCG was detailed along with the challenges currently being experienced. These included a high rate of patients declining the flu vaccine across all population groups for a wide, variety of reasons. Work was being carried out to understand the reasons behind this and improve rates. Issues had also been experienced initially in ensuring there was adequate vaccine supplies which had pushed back delivery dates therefore delaying the beginning of the programme. Finally, there were a significant amount of anti-vaccination myths in circulation, in response to which a NWL Mythbusters webpage had been set up to dispel some of these messages.

8.5 The Board welcomed the local implementation planning that has been put in place to deliver the National NHS Flu vaccination programme and agreed to review the 2020-21 local delivery of the NHS Flu vaccination programme in April/May 2021 when the vaccination programme was completed and a published uptake date was available.

## **9 CHANGES TO URGENT CARE PRACTICES AT CHELSEA AND WESTMINSTER AND IMPERIAL COLLEGE TRUSTS**

9.1 Claire Hook (Director of Operational Performance, Imperial College Healthcare NHS Trust) and Laura Bewick (Divisional Director of Operations for EIC, Chelsea & Westminster Hospital) were invited to address the Board to explain the recent changes to emergency care services and the 111 pathways that had been implemented at both trusts.

9.2 The Board was informed that the following two initiatives had been undertaken to try and ensure Emergency Departments (ED/A&E) did not become overwhelmed and overcrowded:

- Implementation of Same Day Emergency Care (SDEC) Pathways – Both Trusts were running this initiative which was an extension of what they were already providing. SDEC was the provision of same day care for emergency patients with certain conditions who would otherwise be admitted to hospital. Patients presenting at hospital with relevant conditions could be rapidly assessed, diagnosed and treated without being admitted to a ward, and if clinically safe to do so, would go home the same day their care was provided.
- NHS 111 Pathway – This was a new scheme currently being piloted by the Chelsea and Westminster Trust and due to be rolled out by the Imperial Trust on 27 November 2020. People contacting 111 would be advised where they need to go for treatment and a timeslot would be booked for them. Information about the patient would be transferred from 111 to the receiving ED, this would include whether the patient was on the National Shielded List enabling the ED reception to prepare for their arrival. It would allow Emergency Departments to be aware of demand and be able to better manage the flow within their departments.

9.3 The Board discussed the initiatives undertaken and was informed that communication of them would be London-led but with an element of local communications in addition. As the initiatives were still at the pilot phase work was being carried out to ensure that any final technical and logistical issues were resolved before a larger communication campaign was embarked upon. The Board was pleased to note that initial feedback on the NHS 111 Pathway initiative at the Chelsea and Westminster Trust had been very positive and requested that an update be provided as the pilot developed.

## 10. ADULTS ANNUAL SAFEGUARDING REPORT

10.1 Aileen Buckton (Chair of the Safeguarding Adults Executive Board) and Louise Butler (Interim Head of Safeguarding) presented the annual report of the Safeguarding Adults Executive Board for 2019-2020.

10.2 The Board was provided with an overview of the following key highlights contained within the report:

- The safeguarding statistics for each borough were presented and it was noted how 3 out of 4 safeguarding concerns raised were by statutory agencies. Work was being undertaken with service users and community organisations to encourage more referrals from people in the community in addition to widening the number of agencies making referrals to ensure everyone understood safeguarding was their concern. The Board noted that three out of ten enquiries involved a social care provider and the main abuse type was neglect and acts of omission. The Board was informed this mainly related to care quality issues.
- Work continued on Making Safeguarding Personal (MSP) by hearing the voices of residents and their experiences of the safeguarding process. User groups had been involved in reviewing the materials on the 'say no to abuse booklet' and advised the communications team on how to improve the accessibility of the booklets. A joint programme of events and practice tools with the local Safeguarding Children's Board had also been developed. This approach enabled overarching strategies such as "MSP" and "Think Family" to be linked into the work of the wider Safeguarding communities.
- The SAEB and member agencies had undertaken significant work to ensure residents were at the centre of decision making about their care, treatment, and safety. Work continued to tackle financial abuse and fraud by helping people protect themselves and others against scams. The Board was pleased to note that in November 2019 the Safeguarding Adults Awareness Week campaign had been both a national and local success. In the Bi-Borough residents had the opportunity to watch the 'Safe at Home' (short films) which were co-produced with service user groups, received helpful information from local services on scam awareness, wellbeing and safety, and had the opportunity to ask any safeguarding related questions.
- As a partnership, work continued to look at information about local safeguarding activity to inform its priorities. It considered recommendations and lessons learned from both national and local Safeguarding Adult Reviews to understand what needed to change.

10.3 The Board expressed its thanks for all the hard work undertaken by SAEB to ensure that member agencies worked together, and independently, to secure the safety of residents who were at most at risk of harm from others, or through self-neglect. The report and its findings were discussed, and the Board was grateful for the production of such a comprehensive report in what were challenging times. During the discussions several areas regarding the presentation of information were identified as requiring a slight amendment but subject to these changes it was agreed to accept the report.

**RESOLVED:**

That the Board accepted the 2019/20 Annual Report of the SAEB, and in particular noted and lent its support to the priorities that were informing the work of the SAEB during 2020/21.

The Meeting ended at 6.17 pm.

**CHAIR:** \_\_\_\_\_

**DATE** \_\_\_\_\_