



Haverling

L O N D O N B O R O U G H

HEALTH & WELLBEING BOARD AGENDA

| | | |
|----------------|---|------------------------|
| 1.00 pm | Wednesday, 23 September 2020 | Virtual Meeting |
|----------------|---|------------------------|

Members: 16, Quorum: 6

BOARD MEMBERS:

Elected Members: Cllr Robert Benham
Cllr Jason Frost (Chairman)
Cllr Damian White
Cllr Nisha Patel

Officers of the Council: Andrew Blake-Herbert, Chief Executive
Barbara Nicholls, Director of Adult Services
Mark Ansell, Interim Director of Public Health

Haverling Clinical
Commissioning Group: Dr Atul Aggarwal, Chair, Haverling Clinical
Commissioning Group (CCG)
Ceri Jacob, BHR CCG

Other Organisations: Anne-Marie Dean, Healthwatch Haverling
Jacqui Van Rossum, NELFT
Fiona Peskett, BHRUT

For information about the meeting please contact:
Luke Phimister 01708 434619 01708 434619
luke.phimister@onesource.co.uk

What is the Health and Wellbeing Board?

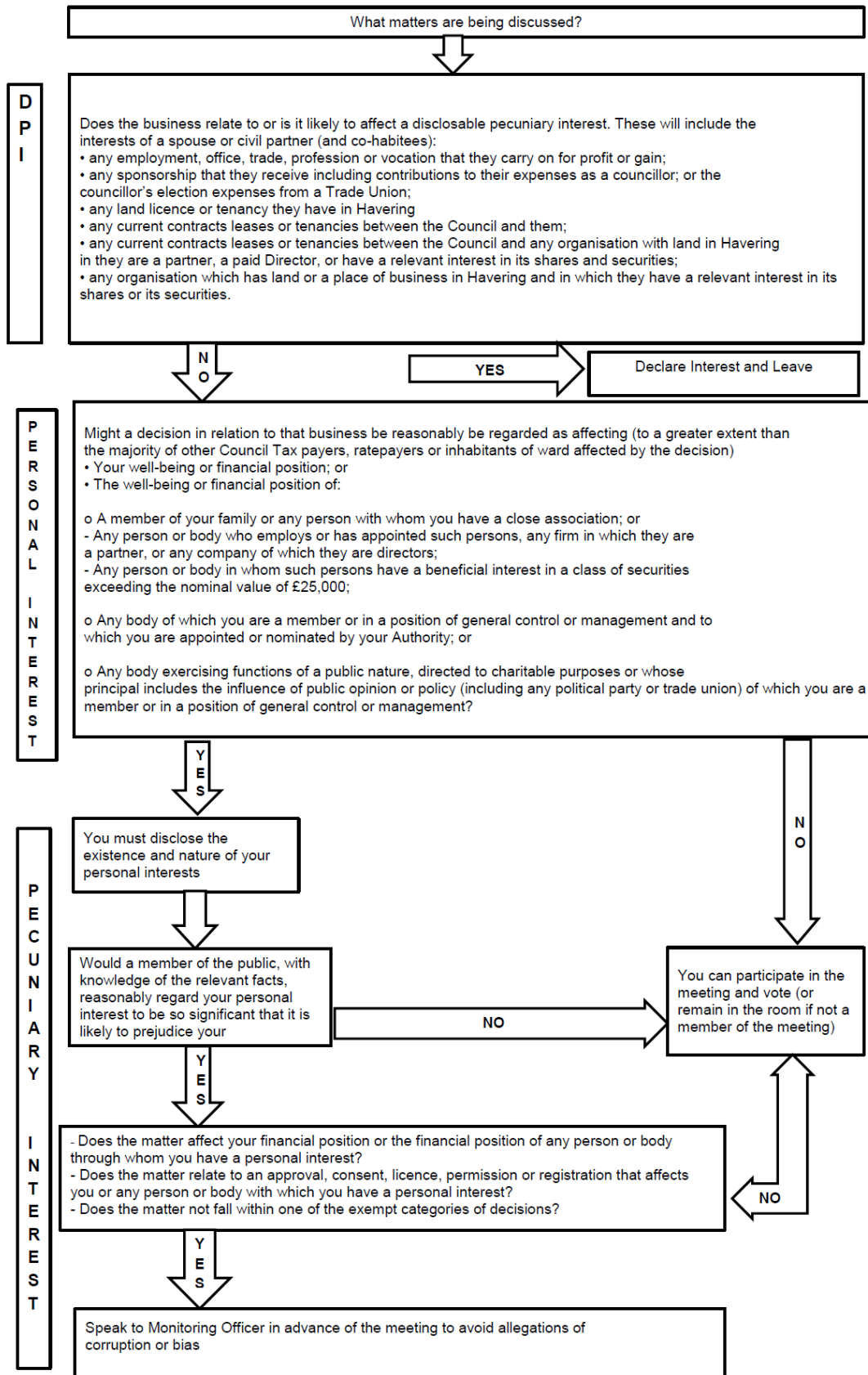
Havering's Health and Wellbeing Board (HWB) is a Committee of the Council on which both the Council and local NHS and other bodies are represented. The Board works towards ensuring people in Havering have services of the highest quality which promote their health and wellbeing and to narrow inequalities and improve outcomes for local residents. It will achieve this by coordinating the local NHS, social care, children's services and public health to develop greater integrated working to make the best use of resources collectively available.

What does the Health and Wellbeing Board do?

As of April 2013, Havering's HWB is responsible for the following key functions:

- Championing the local vision for health improvement, prevention / early intervention, integration and system reform
- Tackling health inequalities
- Using the Joint Strategic Needs Assessment (JSNA) and other evidence to determine priorities
- Developing a Joint Health and Wellbeing Strategy (JHWS)
- Ensuring patients, service users and the public are engaged in improving health and wellbeing
- Monitoring the impact of its work on the local community by considering annual reports and performance information

DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF



AGENDA ITEMS

1 CHAIRMAN'S ANNOUNCEMENTS

The Chairman will announce details of the arrangements in case of fire or other events that might require the meeting room or building's evacuation.

2 APOLOGIES FOR ABSENCE

(If any) – receive

3 DISCLOSURE OF INTERESTS

Members are invited to disclose any interest in any of the items on the agenda at this point of the meeting.

Members may still disclose any interest in any item at any time prior to the consideration of the matter.

4 MINUTES (Pages 1 - 4)

To approve as a correct record the minutes of the Board held on 20 August 2020 and to authorise the Chairman to sign them.

5 MATTERS ARISING

To consider the Board's Action Log

6 CORONAVIRUS UPDATE (Pages 5 - 6)

Report attached.

7 PREPAREDNESS OF HEALTH AND SOCIAL CARE SYSTEM FOR INCREASE IN CASES OF COVID-19 (Pages 7 - 8)

Report attached.

8 ANY OTHER BUSINESS

9 DATE OF NEXT MEETING

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**MINUTES OF A MEETING OF THE
HEALTH & WELLBEING BOARD Virtual Meeting
20 August 2020**

Present:

Elected Members: Councillors Robert Benham, Jason Frost (Chairman) and Nisha Patel

Officers of the Council: Andrew Blake-Herbert (Chief Executive), Barbara Nicholls (Director of Adult Services) and Mark Ansell (Interim Director of Public Health)

Havering Clinical Commissioning Group: Dr Atul Aggarwal (Chair, Havering Clinical Commissioning Group (CCG))

North East London NHS Foundation Trust (NELFT) – Carol White

Healthwatch: Anne-Marie Dean (Healthwatch Havering) and Fiona Peskett (BHRUT)

Also Present: Elaine Greenway (London Borough of Havering)

All decisions were taken with no votes against.

54 CHAIRMAN'S ANNOUNCEMENTS

The Chairman reminded members of the protocol around virtual meetings being conducted during the Covid-19 pandemic.

55 ONE MINUTE SILENCE IN MEMORY OF LOST DURING PANDEMIC

A minute silence was observed by all members of the Board and all other participants in memory of those who lost their lives during the COVID-19 pandemic.

56 MESSAGE OF THANKS FROM CHAIRMAN

The Chairman gave thanks on behalf of the Health and Wellbeing Board and Havering to all NHS staff for their hard work during the COVID-19 pandemic. The Chairman also thanked the partner agencies and all service staff and praised the response and work done by all service providers.

57 **APOLOGIES FOR ABSENCE**

Apologies were received for the absence of Councillor Damian White

58 **DISCLOSURE OF INTERESTS**

There were no disclosures of interest.

59 **MINUTES**

The Board noted the Health and Wellbeing consultation strategy had been agreed at the meeting of the Board on 29 January. With this amendment, the minutes of the meeting of the Board held on 29 January 2020 were agreed as a correct record and, due to COVID-19, will be signed by the Chairman at a later date.

60 **MATTERS ARISING**

The rough sleeper and homelessness strategy had been adopted and any specific actions would be presented to the Board at later dates for further discussions.

61 **STRUCTURE OF FUTURE MEETINGS**

The Board discussed the structure of future, which will have focus on one main item with presentations and considerable time for discussions. Action points would continue to be logged into the Action Log after every meeting and other business would be included when necessary

62 **DEVELOPMENT OF BOROUGH PARTNERSHIPS**

The report presented to the Board gave an update on the development of partnerships between across Barking, Havering and Redbridge. The Board received a presentation on the partnerships and how they would be established and developed.

Board members noted that the Board needed to provide support in future to the development of partnerships to provide clear roles and accountability, with clear focus on clinic and professional leadership. The Board discussed how to improve delivery across partners, extra focus on PCNs and how to coordinate care, specifically with current shielders and the support provided to them. Members noted that Havering had a number of workshops that looked at community hubs and the role they would provide in providing strategic direction regarding health and social care, housing and finance. The Board agreed that PCN chairs should attend future Health and

Wellbeing Board meetings. Members also noted that there would be the opportunity to set up integrated services before a potential second wave of COVID-19. It was noted that there was work to be done in the following months to ensure the Board was in line with the NHS long term plan due in April 2021.

63 CORONAVIRUS UPDATE

A verbal update was given on the Borough's COVID-19 statistics. The Board noted and agreed that this item would be a standing item.

The Board noted that the Silver group received data weekly and that the Health and wellbeing Board would receive that data also. The Board noted that there had been 15 new cases taking Havering to 6 cases per 100,000 people, under the 25 cases per 100,000 for a borough to be placed on the watch list. Members noted that a mobile testing site had been at the Town Hall every third day and that an application had been submitted for permanent walk through centres in Rainham and Harold Hill. Board members were advised about current arrangements for NHS Test and Trace and the expanded role that some local authorities were taking to improve contact tracing locally. Local authority areas that are currently experiencing the highest rates of Covid-19 infection are those that are being prioritised for training and access to CTAS system.

64 ANY OTHER BUSINESS

There was no other business.

Chairman

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HEALTH & WELLBEING BOARD

Subject Heading:

Coronavirus Update

Board Lead:

Mark Ansell, Director of Public Health

Report Author and contact details:

Mark Ansell
mark.ansell@havering.gov.uk

The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

| | |
|---|---|
| ☒ | <p>The wider determinants of health</p> <ul style="list-style-type: none"> • Increase employment of people with health problems or disabilities • Develop the Council and NHS Trusts as anchor institutions that consciously seek to maximise the health and wellbeing benefit to residents of everything they do. • Prevent homelessness and minimise the harm caused to those affected, particularly rough sleepers and consequent impacts on the health and social care system. |
| ☒ | <p>Lifestyles and behaviours</p> <ul style="list-style-type: none"> • The prevention of obesity • Further reduce the prevalence of smoking across the borough and particularly in disadvantaged communities and by vulnerable groups • Strengthen early years providers, schools and colleges as health improving settings |
| ☒ | <p>The communities and places we live in</p> <ul style="list-style-type: none"> • Realising the benefits of regeneration for the health of local residents and the health and social care services available to them • Targeted multidisciplinary working with people who, because of their life experiences, currently make frequent contact with a range of statutory services that are unable to fully resolve their underlying problem. |
| ☒ | <p>Local health and social care services</p> <ul style="list-style-type: none"> • Development of integrated health, housing and social care services at locality level. |
| ☒ | <p>BHR Integrated Care Partnership Board Transformation Board</p> <ul style="list-style-type: none"> • Older people and frailty and end of life Cancer • Long term conditions Primary Care • Children and young people Accident and Emergency Delivery Board • Mental health Transforming Care Programme Board • Planned Care |

| SUMMARY |
|--|
| <p>An update to members about rates of coronavirus infection in the borough and progress with implementation of the outbreak control plan. The presentation will be tabled to reflect the situation on the day given the rapidly changing picture locally.</p> |
| RECOMMENDATIONS |
| <p>The paper will set the scene for the subsequent agenda item under which relevant members of the Board will set out plans to maintain services / manage additional demand for health and social care.</p> |
| REPORT DETAIL |
| <p>Update to be based on most up to date data available on the day of the Health and Wellbeing Board</p> |
| IMPLICATIONS AND RISKS |
| <p>None arising from this item</p> |
| BACKGROUND PAPERS |
| <p>Havering coronavirus outbreak control plan https://www.havering.gov.uk/downloads/download/848/havering_coronavirus_outbreak_control_plan</p> <p>Coronavirus in Havering weekly report https://www.havering.gov.uk/covid19havering</p> |

HEALTH & WELLBEING BOARD

Subject Heading:

Preparedness of health and social care services for increase in cases of Covid-19.

Board Lead:

Barbara Nicholls, Director of Adult Social Care and Health

Report Author and contact details:

Barbara Nicholls
barbara.nicholls@havering.gov.uk

The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

| | |
|-------------------------------------|---|
| <input type="checkbox"/> | <p>The wider determinants of health</p> <ul style="list-style-type: none"> Increase employment of people with health problems or disabilities Develop the Council and NHS Trusts as anchor institutions that consciously seek to maximise the health and wellbeing benefit to residents of everything they do. Prevent homelessness and minimise the harm caused to those affected, particularly rough sleepers and consequent impacts on the health and social care system. |
| <input type="checkbox"/> | <p>Lifestyles and behaviours</p> <ul style="list-style-type: none"> The prevention of obesity Further reduce the prevalence of smoking across the borough and particularly in disadvantaged communities and by vulnerable groups Strengthen early years providers, schools and colleges as health improving settings |
| <input type="checkbox"/> | <p>The communities and places we live in</p> <ul style="list-style-type: none"> Realising the benefits of regeneration for the health of local residents and the health and social care services available to them Targeted multidisciplinary working with people who, because of their life experiences, currently make frequent contact with a range of statutory services that are unable to fully resolve their underlying problem. |
| <input checked="" type="checkbox"/> | <p>Local health and social care services</p> <ul style="list-style-type: none"> Development of integrated health, housing and social care services at locality level. |
| <input checked="" type="checkbox"/> | <p>BHR Integrated Care Partnership Board Transformation Board</p> <ul style="list-style-type: none"> Older people and frailty and end of life Cancer Long term conditions Primary Care Children and young people Accident and Emergency Delivery Board Mental health Transforming Care Programme Board Planned Care |

| SUMMARY |
|--|
| Members of the H&WB representing key sectors of the health and social care system will update regarding current preparedness and risks arising should a significant increase in cases of Covid-19 occur – including action to minimise impact on business as usual, expectations of partners, how action across the system is being coordinated and any particular areas of concern. |
| RECOMMENDATIONS |
| Consider how the Health and Wellbeing Board can assist the collective effort across the health and social care system in line with the role set out in the outbreak control plan as the lead for public engagement on behalf of health and social care Partnership. |
| REPORT DETAIL |
| Update to be verbal reflecting the most up to date information available. |
| IMPLICATIONS AND RISKS |
| None specifically arising from this item |
| BACKGROUND PAPERS |
| Havering coronavirus outbreak control plan https://www.havering.gov.uk/downloads/download/848/havering_coronavirus_outbreak_control_plan |