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**MINUTES OF A MEETING OF THE
HEALTH & WELLBEING BOARD
Virtual Meeting
27 January 2021 (1.00 - 3.00 pm)**

Present:

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

Officers of the Council: Andrew Blake-Herbert (Chief Executive), Mark Ansell (Director of Public Health), Ian Elliot (Children & Families Transformation) as a representative for Robert South (Director of Children's Services) and John Green (Head of Joint Commissioning Unit) as a representative for Barbara Nicholls (Director of Adult Services)

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

Healthwatch: Anne-Marie Dean (Healthwatch Havering)

BHRUT: Fiona Peskett

All decisions were taken with no votes against.

28 CHAIRMAN'S ANNOUNCEMENTS

The Chairman reminded Members of the action to be taken in an emergency.

29 APOLOGIES FOR ABSENCE

Apologies were received for the absence of Cllr Damian White

30 DISCLOSURE OF INTERESTS

There were no disclosures of interest.

31 MINUTES

The minutes of the meeting of the Committee held on 25 November 2020 were agreed as a correct record and, due to COVID-19, will be signed by the Chairman at a later date.

32 MATTERS ARISING

There were no matters arising from the previous meeting.

33 ANY OTHER BUSINESS

There was no other business.

34 UPDATE ON DEVELOPING GOVERNANCE ARRANGEMENTS FOR INTEGRATED CARE SYSTEM

The Board members were presented with updated governance arrangements for the North East London (NEL) Integrated Care System (ICS).

Members were informed that borough partnerships were being established in each of the BHR boroughs. Each borough had been offered £25,000 to resource the development of a roadmap outlining development to April 2022 and beyond. Members were advised that the Health and Wellbeing Board (HWB) would be asked to sign off the roadmaps in March 2021.

It was noted that the Havering CCG would dissolve, and the NEL CCG would come into effect on the 1st of April 2021. Board members commented on the Integrated Care Partnership Board (ICPB) Terms of Reference (ToR). Members noted the suggestion of 1 Healthwatch representative on behalf of the 3 Boroughs. The Board noted that the ToR in reference to procurement and competition would need to be reviewed due to emerging legislation. Members raised concerns regarding the procedure for managing conflicts of interest and resolving disagreements in decision-making. The Board asked for consideration to be placed on an independent Chair and Vice-Chair to ensure varied representation and authority. In view of COVID-19, the Board asked that electronic means of engagement i.e., virtual meetings, be considered as part of the 'business as usual' model.

In conclusion the Board suggested 3 changes to wording in the Terms of Reference:

1. Regarding the EU regulations to include the word 'relevant'
2. Regarding the balance and roles of the Chair and Vice-Chair
3. Regarding the wording relating to virtual working

Otherwise, the Board agreed the Terms of Reference.

35 COVID-19 UPDATE

The Board was updated on the Borough's position regarding COVID-19.

Members were informed that collectively, rates in the South East of England were high. Members were informed that the incidence rate in Havering peaked in mid-December at 1,200 cases per 100,000 individuals due the emergence of a new, dominant, and more transmissible variant. While acknowledge the current reduction in cases, it was felt that the current rate (448/100,000), was unacceptably higher when compared to the national average (382/100,000). It was pointed out that rates remained higher among working adults (600/100,000) due to a large proportion of people

unable to work from home, whilst cases in children had driven down due to school closures. Members were informed that the positivity testing rate (20%) was far beyond the 7.5% limit recommended by Public Health England (PHE).

It was noted that on 26 January 2021, the UK passed the milestone of 100,000 deaths. It was noted that Havering had the highest mortality rate (273/100,000) nationally, which was attributed to the borough's generally older population and high community prevalence. It was noted that deaths in the borough were 18% higher compared to previous years.

NELFT

The Board received an update on the current NHS situation.

Members were informed that the phlebotomy backlog was cleared. The Board members noted an increase in the number of referrals to child and adult mental health services resulting from lockdown and isolation. Members were made aware of increased end-of-life care in learning disability settings. Members were advised that partners were looking at local options for crisis management and that additional bed capacity had been created across BHR hospitals. Members commented on developments to support public mental health (PMH) including work of the Mental Health Transformation Board. Members highlighted the potential for joint working between community and voluntary (CAV) sector partners and the local authority to support PMH.

BARKING, HAVERING AND REDBRIDGE UNIVERSITY TRUST (BHRUT)

Members received an update on BHRUT.

Members noted a gradual decrease in the number of hospital inpatients with COVID-19 diagnosis from a peak of 520 down to 350 at present. The frailty unit at Queen's hospital was transformed into a high flow oxygen unit to support high oxygen demand for patients with respiratory COVID-19. Members were informed that critical care units were operating at "super surge levels of expansion" in order to provide mutual aid to other intensive care providers. Members were advised that leave suspensions for staff were due to be lifted in February. Members were cognisant of staffs' health and mental wellbeing due to the pressures of working under increased demand.

CORONAVIRUS VACCINATION PROGRAMME

The Board was given an update on the progress of the coronavirus vaccination programme.

It was noted that BHR was on target to vaccinate the first four Joint Committee on Vaccination and Immunisation (JCVI) priority groups by mid-February 2021. The Board were informed that majority of care homes had now been vaccinated and that home visits were now taking place.

Members were given an update on outreach work. In accordance with historical flu vaccination trends, uptake for the vaccine was lowest in Black African and Bangladesh communities. Members queried the provisions for asylum seekers and were concerned that many might not be identified by typical databases i.e., GP registration records. Members suggested that the Community Leaders Forum could offer some relevant engagement and that 'vaccine champions' could be useful in influencing uptake in vaccine hesitant cohorts. Members were also informed that work was underway to increase vaccine uptake through CAV sector partners.

Members were advised that work was underway with NHS England to determine if and when coverage data at borough level would be made available to the public.

LOCAL TESTING STRATEGY

Members were given an update on the development of the Borough's testing strategy.

Members were advised that the current priority was to ensure good access to testing for the asymptomatic working population. Members noted that people unable to work from home would be able to test twice weekly using rapid lateral flow tests (LFTs). It was noted by the Board that 2 more community testing sites were to open at Gidea Park and South Hornchurch Libraries from the 1st February 2021, bringing the total to 5. It was noted by the Board that Havering in the weeks leading up to Christmas 2020, had the highest testing uptake and volume of tests made available to the community. Members thanked the Public Health team for their efforts and perseverance in setting up testing sites.

36 DATE OF NEXT MEETING

The next meeting of the Board would be held on Wednesday 24 February 2021 at 1.00 pm.

Chairman