

MINUTES OF A MEETING OF THE HEALTH AND WELLBEING BOARD

THURSDAY, 10TH SEPTEMBER, 2020

Councillors Present: Dr Mark Rickets (Chair of C&H CCG)in the Chair

Mayor Glanville (Co Chair)

Malcolm Alexander (Interim Chair of Hackney

Healthwatch)

Deputy Mayor Anntoinette Bramble (Cabinet Member for Education, Young People and

Children's Social Care),

Anne Canning (Group Director)

Dr Sandra Husbands (Director of Public Health)
David Maher (Managing Director, C&H CCG)

Cllr Christopher Kennedy (Cabinet Member, Health,

Leisure)

Cllr Caroline Selman (Community Safety, Policy

and the Voluntary Sector)

Tracey Fletcher (Chief Executive of the Homerton

Hospital)

Alistair Wallace (Health and Social Care Forum)
Raj Radia (Chair, Local Pharmaceutical Committee)

Officers in Attendance: Donna Dohery-Kelly (Hackney Public Health)

Andy Cunninghan (Hackney Transport)

Also in Attendance: Dr Rhiannan England (City and Hackney CCG)

- 1 Welcome from the Chair (1 minute) (Chair)
- 1.1. The Chair welcomed everyone to the meeting.
- 2 Apologies for absence (1 minute) (Chair)
- 2.1 Apologies for absence were submitted on behalf of Laura Sharpe.
- 3 Minutes of the Previous Meeting (1 minute) (Chair)
- 3.1 The minutes of the previous meeting were agreed as a correct record, subject to the addition of Lorraine Sunduza (ELFT) to the list of attendees.
- 4 Declarations of Interest Members to Declare as Appropriate (1 minute) (Chair)
- 4.1 There were no declarations of interest.

5 Action Tracker 9 (1 minute) (Chair)

- 5.1 The Chair introduced the item. Actions 1 and 3 had been completed. Action 2 was in actions. Dr Husbands confirmed that action 4 was on the agenda for this meeting.
- 5.2 Mayor Glanville raised that under Community Voice at that previous meeting to undertake discussions with Carers Heallthwatch Hackney. Councillor Kennedy confirmed that these discussions had taken place.

Mayor Glanville stressed the need to distinguish between whether an action was for the Board or for an individual to take forward. The Chair stated that the matter could be discussed further outside the meeting.

RESOLVED:

To note the action tracker.

6 COVID-19 response (5 minutes) (Verbal) (Dr Sandra Husbands)

- 6.1 Dr Sandra Husbands updated the Board on the COVID-19 response. An increase in infections had occurred in three wards in the north of the Borough where work had been carried out with the community. This work was ongoing but it appeared that the situation there had stabilised but infections were not declining as hoped. There had been a general increase in infection in young adults across the Borough and the Country. The number of cases per 1000000in the population was lower in the last seven days than in the previous weeks. Dr Husbands said that this may be related to people not testing as much as previously or problems in accessing testing. Other Boroughs had seen infection rates rise and work was ongoing between the Boroughs on this to have a co-ordinated response. The Council had updated the 'Outbreak Control Plan' and continued with the SPOs that supported this. 13 of the 16 SPOs had been published
- 6.2 Dr Husbands to the Board that the next phase was to deliver local contact and trace, with staff being trained to use the national contact tracing system and in the use of the web tools and all other safeguarding measures as well as making every contact count. Work was ongoing with Public Health to make up the shortfall in national contact and tracing. It was hoped to complete preparatory work over the course of the week and go live in the following week

RESOLVED:

To note the verbal update on Covid-19

7 Community Voice (15 Minutes) (Jon Williams)

- 7.1 Jon Williams introduced the item focusing on community aspects of the transport strategy, introducing John Thornton as a speaker.
- 7.2 John Thornton highlighted the following areas:

- Tackling inequality through the adoption and implementation of a hierarchy of needs where disabled pedestrians are at the top with private motorist at the bottom. The transport strategy fails to adopt this.
- No taxis are available when called for
- Due to new cycle lanes on green lanes and queensbridge road, people who travel by taxi are unable to access homes and health care facilities
- On LTN zones taxi drivers were getting lost and there was a lack of signage, especially on Nile Street
- 50% fewer buses for disabled people, particularly during Schools hours with difficulties in standing longer at bus shelters
- Staff had been removed from Train Station booking offices with no one available for giving assistance to passengers
- In a report it had been identified that 91% of disabled people were afraid to leave their homes in particular going to parks and on footways because of cyclists and rented bikes on footways
- Traders and restaurants causing obstructions to footways
- Walking need to be priority one in the transport strategy given physical and mental benefits
- Qualifying conditions were set by government but there was an opportunity for local conditions to be flexible
- With COVID-19, increasing numbers of people would require freedom passes and how was the Council prepared for this
- Transport strategy need to take into account that more people will be walking and will require more seating to rest on the street
- Concerns regarding letter from the Council's Chief Executive and CCG Managing Director stating that it was unlikely with restrictions in place for residents to be able to visit friends and family during the challenging period of self-isolation.
- There was a need for funding organisations such as Healthwatch to work on behalf of the disabled to ensure there was transport equal opportunity for people with disabilities
- 7.3 Mayor Glanville confirmed that while the Borough of Hackney had had high incidents of infections and testing at an earlier time, London had not been a hotspot in the build up to a second wave.
- 7.4 Deputy Mayor Bramble stated in regard to cycling on pavements that there was a need to get the message across about the use of shared space in the Borough to ensure active travel and people walking with social distancing. Councillor Burke was to meet Officers concerned to consider the enforcement of dock less bikes left on pavements.
- 7.5 Dr Husbands stated that during March there were higher rates of infection in Hackney than other parts of London and although the rate was high in July with in way similar to during the peak in March. She said that the risk outdoors was small and that infections was more likely to occur indoors in people's home. Physical distancing and hygiene was necessary to lower risk.
- 7.6 Councillor Kennedy sated that having adequate resting places to sit on throughout the Borough formed part of the draft ageing well strategy which was going out to consultation and he encouraged and comments.

7.7 Jon Williams stated that Healthwatch would discuss the areas highlighted by John Thornton and raise with the Borough's transport lead.

RESOLVED:

To note the presentations from John Thornton and Jon Williams on transport issues in the Borough.

8 Health in all Policies Forward Plan (10 minutes) (Donna Doherty-Kelly)

- 8.1 Donna Doherty-Kelly introduced the report outlining the forward plan and key lines of enquiry for the Board's adoption of a 'Health in all Policies' approach for 2020/21. The Forward Plan was designed to provide timely input into strategies and plans as they come for review, giving the Board greater influence on reducing inequalities and improving population health though positive action on the wider determinants. Donna told the Board that the at the previous meeting the Board had agreed to use the Forward Plan as a framework for actions and to review wider partners strategies to ensure economic and cultural factors that influence health are systematically considered within all related strategic policy development.
- 8.2 Councillor Caroline Selman asked that Community Safety be included as a determinant. She asked what mechanism was in place to identify the determinants that the Board would want to influence most and consider the health impacts of strategies and polices that are coming up for renewal to ensure early involvement in their development.
- 8.3 Councillor Carole Williams clarified that under Education and Skills, the skills element sat with Employment and Skills and was separate from education.
- 8.4 Councillor Kennedy suggested that a public health impact assessment be attached to themes. Mayor Glanville stated that having the opportunity to feed into the health system in this way would be of helpful, making clear that it relates to the implications for public health. He welcomed housing as a determinant and including homelessness and rough sleeping.
- 8.5 Dr Husbands confirmed that work on the governance process would be undertaken to ensure that this was embedded in the process for the Board.

RESOLVED:

- 1. To endorse the forward.
- 2. To agree to consider key lines of enquiry in advance of Health and Wellbeing Boards to prepare for policy review within the meeting.
- 3. To review and update the forward plan on an annual basis.
- 9 Proposed Health and Wellbeing Board membership, Joint Health and Wellbeing Strategy Plan, wider determinants of Health (15 Minutes) (Donna Doherty-Kelly)
- 9.1 Donna Doherty-Kelly introduced the report. In July the Board had agreed to update the Board's membership to ensure representation from partners who can make the greatest contribution to reducing health inequalities. The report outlined a proposal

for the extended membership of the Board, providing the Board with details of the proposed Board membership.

- 9.2 Mayor Glanville proposed the Group Director for Neighbourhoods and Housing and the Cabinet member for human resources.
- 9.3 Dr Husbands outlined that the process would involve the Board working with policy areas to drive forward the health policy agenda, considering policies through a health lens to improve health and reduce health in equality and to improve ways of doing this, mitigating any negative impacts.
- 9.4 Councillor stated that the housing representative should be someone to focus on housing strategy and how this is used in a way that is about providing locally. She said that there was a need for a representative with poverty in their portfolio.
- 9.5 Anne Canning suggested that the Group Director for Adults and Health should be a members of the Board.

RESOLVED:

- 1. To develop more membership list that reflected the Board's discussion.
- 2. The Mayor to invite nominees onto the Board?
- 10 HiaP Strategy paper Transport Strategy (25 minutes) (Andrew Cunningham) (To Follow)
- 10.1 Andy Cunningham presented to the Board on the HiaP Strategy.
- 10.2 Councillor Kennedy referred to the fact that 70% of the population did not own a car and expressions concerns about the reversion to car usage in the Borough. Andy Cunningham responded that those with cars will use Public Transport or cycle.
- 10.3 The Chair referred to the key lines of inquiry around the real and perceived risks of contracting COVID 19 on Public transport, leading people to use cars. He referred to the need to reduce car usage and that there was a need to consider how to communicate that it was safe to use Public transport with precautions, such as social distancing and the use of face covering. He said that in addition to looking at deaths from COVID-19 there was also a need to consider levels of death from air pollution.
- 10.4 Councillor Bramble told the Board that Councillor Burke was to write to the Commissioner for Public transport about encouraging the use of Public transport and to ensure that those who do wear face covering. She referred to the current lack of capacity on buses, following measure to have some buses for school children only. There was a need to increase capacity and use of Public transport and that this needed to be carried out regionally.
- 10.5 Mayor Glanville stated that key hospital trusts had sent correspondence on supporting sustainable transport for health benefits and to promote key workers going to work in a safe way. He referred to the need to recognise the impact of air pollution and not action travel lifestyle. He said that there was a need to work together on this and that GP Practices were key stakeholders in traffic neighbourhoods.

RESOLVED:

To note the presentation on the health in all policies transport strategy papers, together with member comments

11 Pledge to reduce ethnic inequalities in mental services (10 minutes) (Dr Rhiannon England)

- 11.1 Dr Rhiannon England presented on the pledge to reduce ethnic inequalities in mental health. The Synergi national collaborative was working to reduce inequality in mental health provision for people with BAME backgrounds. There was local commitment to do this and were well placed to pledge to some measurable outcomes in access and recovery. She said that signing as a system was a powerful supportive measure for national action. The presentation focused on:
 - Synergi National Statement of Intent
 - City and Hackney current projects
 - Hackney improving outcomes for Young Black Men: Mental Health and strand strategy
 - COVID-19's impact on inequalities in Hackney
 - System wide Equality and Diversity Group
 - 11.2 The Board welcomed the presentation and the initiative. Mayor Glanville asked if updates on this would be submitted to the Board for consideration. He referred to Councillor Williams work on differential impacts and the Young black Men Project that looked at mental health outcomes.
 - 11.3 Deputy Mayor Bramble thanked the presenters and referred to the need to change systems so that for instance, young black men, for example turn up in early screening, therapy rather than at the end of the system. When a model was in place there would be a need to adapt this for all groups, women, other ethnic minorities. She stressed the need not to dilute the work done for young black men. She referred to the fact that Councillor Kennedy had done much work in promoting this.
 - 11.4 Jon Williams referred to the excellent work on this and work around equal impact assessment

RESOLVED:

To endorse the Synergi Pledge

- 12 Update on development of partnership-wide Children and Families Plan (5 minutes) Anne Canning)
- 12.1 Anne Canning told the Board that as a result of the OFSTED inspection two boards had been set up, one composed of officer with the other composed of

members. Improving lives for Hackney's children and young people was a shared responsibility across all agencies. The partnership plan and shared vision for children in Hackney would sit above each agency's key strategies and plans to ensure that priorities are aligned with a shared approach to improving the lives of children in Hackney.

RESOLVED:

That a multi-agency sub-group is established under the Health and Wellbeing Board to oversee the development of a partnership Children and Families Plan for Hackney and to provide a governance structure for the partnership plan once this has been launched.

13 Health and Social Care Complaints Charter Update (10 minutes) (Jon Williams)

13.1 Jon Williams introduced the report proposing the extension of the Charter to other local health care providers: General Practitioners, Dentists and Opticians. Current signatories were asked to review their implementation of the Charter in their organisations and report back to the next meeting. Jon Williams told the Board that he had had engagement with the Local Medical Committee with no formal response to date. The Chair told the Board that the GP confederation was working on feedback for patients. A number of practices had engaged on an ongoing pilot and outcomes could be incorporate into the current thinking.

RESOLVED to note:

- 1. That Healthwatch Hackney Board member will write to current signatories after this meeting asking them to review they use and promotion of the charter for reporting at the November Board.
- 2. That Healthwatch Hackney Board member will write to local leads for GPs, Dentists and Opticians after this meeting explaining the November Board will consider the extension of the Charter in Hackney

Action: Healthwatch Hackney

- 14 Reflective space on our approach in collaborating and thinking of how the Board can operate more optimally to adopt a HiaP approach (10 Minutes) (Verbal) (Dr Sandra Husbands)
- 14.1 Dr Husbands introduced the item, stating that it was an opportunity to explore whether the Board was functioning better in health for all policies.
- 14.2 Councillor Kennedy stated that referred to the need to look at how the Board fits in to the overall all health system and discussing the priorities for the wider health system. He considered that the Board was going in the right direction and that the slot should be retained to discuss progress.
- 14.3 Mayor Glanville referred to the fact that an additional two Sub Boards had been established and that there was a need to carry out a mapping exercise to ensure effective interaction with the process, measuring impact, considering how data is presented and where policies are held.

Action: Dr Sandra Husbands

- 14.4 Deputy Mayor Bramble thanked Dr Husbands and her team for her work in relation to the Board and that there was a good structure in place with potential to make a difference to the Community. She said that there was a consider priority groups when bringing papers and recommendations to the Board and stressed the importance of having a resident's voice at the Board and consider if it as necessary to rethink priorities in the light of opinions presented.
- 14.5 Raj Gupta stressed that it was important to consider the people that the Board served and how construct services to support the service needs, encompassing this work collaboratively.
- 15 Date of next meeting 11 November 2020
- 15.1 The next meeting was scheduled for 11th November 2020.
- 16 Any other business that the Chair considers urgent
- 16. There was no other business.

Duration of the meeting: 6:30 - 8:00