

Health and Wellbeing Board

MINUTES of the OPEN section of the Health and Wellbeing Board held on Monday 4 March 2019 at 11.30 am at Ground Floor Meeting Room G02C - 160 Tooley Street, London SE1 2QH

PRESENT: Councillor Peter John OBE (Chair)
Councillor Evelyn Akoto
Councillor Jasmine Ali
Cassie Buchanan
Sally Causer
Kevin Fenton
Ross Graves
Eleanor Kelly
Catherine Negus
David Quirke-Thornton
Dr Yvonneke Roe

OFFICER Everton Roberts, Constitutional Team
SUPPORT:

1. APOLOGIES

Apologies for absence were received from Andrew Bland, Councillor David Noakes, Dr Jonty Heaversedge, Dr Matthew Patrick, Paul Rymer and Ian Smith.

2. CONFIRMATION OF VOTING MEMBERS

Those listed as present were confirmed as the voting members for the meeting.

3. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT

The following items were circulated after the main agenda despatch.

Supplemental Agenda No.1

- System wide approaches to tackling inequalities in Southwark

- NHS Long Term Plan and Inequalities
- Brexit preparedness: preparations for a 'no deal' EU exit

Supplemental Agenda No.2

- Minutes – 21 November 2018
- Health Inequalities in Southwark – Public Health
- Healthy Communities Scrutiny Commission: Bells Garden Estate Approach
- Brexit preparedness – Council Update
- Youth Violence and Knife Crime in Southwark

4. DISCLOSURE OF INTERESTS AND DISPENSATIONS

There were no disclosures of interests or dispensations.

5. MINUTES

Due to the late circulation of the Minutes it was agreed that they be deferred to the next meeting to enable board members the opportunity to review them.

6. THEME: TACKLING HEALTH INEQUALITIES

The board received presentations on tackling health inequalities from Jin Lim, Consultant in Public Health, Ross Graves, Managing Director, NHS Southwark Clinical Commissioning Group, Councillor Barrie Hargrove, Chair of Healthy Communities Scrutiny Commission and Professor Kevin Fenton, Strategic Director of Place and Wellbeing.

Jim Lim highlighted the following:

Smoking

- Considerably higher prevalence in both routine and manual workers, 1 in 4 estimated to be smokers compared to 1 in 10 for other occupations.
- Higher smoking prevalence for people on lower incomes

Obesity

- Southwark has higher rates, but seen a slight fall over the last 2 to 3 years. Strong association with deprivation, higher obesity rates in more deprived areas. Implications for the sort of services required and how the services are targeted.

Sexual health and reproductive health

- Strong inequalities dimension
- Black women have poorer reproductive and sexual health
- Higher STI and HIV rates in MsM communities
- Late diagnosis in black African and other ethnicities

Cancer screening and bowel cancer screening

- Noticeable inequalities around bowel cancer screening, incident rates tend to be higher for people living in the most deprived areas.
- Bowel screening uptake is lower amongst people in more deprived areas,

particular from people who don't speak English as their first language and people from a black ethnic background.

Breast cancer screening

- Differential in survival rates – much lower in areas of high deprivation.
- Black women less likely to attend for breast cancer screening

Cervical cancer

- Women from most deprived groups, less likely to attend cervical cancer screening, also other groups, women with learning disabilities and women with disabilities are less likely to take up the screening service.

Hunger and food poverty

- Doing quite a detailed joint strategic needs assessment on food poverty, in process of developing a food poverty strategy. It's estimated that in London about a third of children have problems concentrating at school due to hunger. Relatively large proportion of children in Southwark (just under 10,000).
- Local data around food bank use, just under 50% of the recipients are children. High food bank use during the summer months.

Key actions short term / immediate impact

- Improving access to maternity services, early registration for pregnant women.
- Detection of common conditions and management, such as diabetes and vascular diseases.
- Increase uptake of cancer and sexual health screening across all communities for detection and treatment.
- Work that can be done around Health Improvement Services to address inequality - Smoking cessation, alcohol interventions, increasing physical activity, health eating, addressing poverty in general and income

Wider determinants

- Building strong cohesive neighbourhoods,
- Good quality employment, housing and education

Jin Lim also report on a presentation on health inequalities to the Healthy Communities scrutiny commission. The discussion around the presentation was that while there was good quality data across the borough, there was an opportunity to drill down into a neighbourhood, and to pilot an estate based approach to looking at inequalities. Looking at data held by services, such as health improvement services, local providers (GPs) and the uptake of the services and outcomes, and to also hold some focus groups with local people to understand their experiences and how inequalities and health inequalities is affecting them.

Councillor Barrie Hargrove gave a presentation on the scrutiny commission into health inequalities.

Councillor Hargrove reported that in terms of health, the commission wanted to focus on 'social health' not just physical health and mental health, as they were all integral to each other.

He informed the board that the commission looked at an estates based project around one

estate (Bells Garden Estate, Peckham), with a view to building on the strengths that were already there. The estate had its own community centre and had a number of activities taking place including some exercise activities, and some healthy eating activities.

The idea was to see how the council could assist them to reinforce healthy initiatives on the estate and actually get the residents themselves to take ownership of their own public health with support. Recognising that one of the problems with people's poor health outcomes was their knowledge of the importance of making healthy lifestyle choices in terms of exercise and eating, etc., this is where the scrutiny commission members felt that they could add some value to what was already going on and try to give the local residents more awareness of public health. They would be meeting with the tenants and residents association on 13 March 2019.

The scrutiny commission was due to meet again in April where they would be finalising their scrutiny commission report.

Ross Graves gave a presentation on system wide approaches to tackling inequalities and the delivery of the Southwark Five Year Forward view, which was the key strategic document for both the CCG and the Council and had the support of system partners.

Ross reported on three areas, the work that they were doing as part of the STP and emerging integrated care system across south east London, what they were doing at place and neighbourhood level within the borough, and Southwark Bridges to health and Wellbeing which was the strategic approach to commissioning between the council and the CCG.

Professor Kevin Fenton reported on the NHS long term plan which had been released earlier in the year, which gives a strategic vision of the direction of the NHS. Within the plan there had been a strong focus on health inequalities from NHS nationally, with the creation of new structures, new ways of working and new ways of engaging communities.

Professor Fenton informed the board that he had given the presentation to the King's Fund very recently and was on the health and wellbeing board agenda for reference as it critiqued the plan, identified opportunities for those working in local government to work with the NHS on inequalities, and highlighted some gaps in the long term plan and what was important for the local systems to be doing to help to bridge that gap. He stressed that the NHS was taking this seriously and that this was one of the strongest narratives that he had seen on health inequalities coming from an NHS strategic plan.

The board discussed issues arising from the presentations and asked questions.

In summing up the discussion Professor Fenton highlighted the following take away points:

- Firstly was to acknowledge the progress that had been made, (acknowledging the stark data). Improvement was being made on many indicators and that improvement was being driven by change 'place' through regeneration, the focus on educational attainment, the strengthening that has been happening within the health service, GP practices were better and are improving.
- But with the acknowledgement that the purpose of the session was to highlight that there is more to do and a bit of a way to go, and the more that the system leaders understand the nature of the problem and where there should be focus and

collaboration, the higher the likelihood of success. What Professor Fenton was hearing from board members is that they should use their assets, schools, businesses, the community themselves in order to help address these inequalities. To use information differently and more smartly and share data to identify where the inequalities are and address them.

- The presentation on the scrutiny commission highlighted the importance of identifying some exemplars, where the system goes a little bit deeper (in addition to the universal programmes already in place), to try to demonstrate what does more coordinated and targeted efforts look like and what impacts it could have, so whether it's through regeneration programmes or through Great Estates programmes the system is able to touch the lives of some of the most deprived residents in the borough. This thinking and approach should be built on.

7. COUNCIL POLICY AND RESOURCES REVENUE BUDGET 2019-20

Councillor Victoria Mills, Cabinet member for finance, performance and Brexit informed the board of the decisions taken by the council in respect of its annual policy and resources revenue budget 2019-20.

8. BREXIT PREPAREDNESS

Ross Graves, Managing Director, NHS Southwark Clinical Commissioning Group introduced the report.

RESOLVED:

That the progress being made by the CCG and partners in responding to and implementing national guidance be noted.

9. LAMBETH, SOUTHWARK AND LEWISHAM SEXUAL AND REPRODUCTIVE HEALTH STRATEGY 2019-24

Kirsten Watters, Consultant in Public Health introduced the report.

RESOLVED:

1. That the new Lambeth, Southwark and Lewisham (LSL) Sexual and Reproductive Health Strategy 2019-24 be approved.
2. That it be noted that separate detailed action plans will be produced on a yearly basis, delivery of which will be overseen by the LSL Sexual Health Commissioning Partnership Board.

10. COMMUNITY SAFETY - YOUTH VIOLENCE

The board received a presentation from Stephen Douglass, Director of Communities on youth violence and knife crime in Southwark. The board also heard from some Southwark Youth Advisors.

11. HEALTH AND WELLBEING BOARD WORK PLAN 2018-20

RESOLVED:

That the work plan for 2018 – 2020 be noted.

The meeting ended at 1.35pm

CHAIR:

DATED: