

HEALTH AND WELLBEING BOARD

MINUTES of the Health and Wellbeing Board held on Thursday 23 September 2021 at 9.30 am at This will be a virtual meeting. A meeting link will be circulated in advance.

PRESENT: Councillor Kieron Williams (Chair)
Dr Nancy Kuchemann (Vice-chair)
Councillor Jasmine Ali
Paran Govender (substituted for Sarah Austin)
Rod Booth (substituted for David Bradley)
Cassie Buchanan
Shamsur Choudhury
Sam Hepplewhite
Roxanne Smith (substituted for Clive Kay)
Councillor David Noakes
Sangeeta Leahy
Anuradha Singh
Andrew Ratcliffe

OFFICER Jin Lim – Deputy Director of Public Health
SUPPORT: Chris Williamson – Head of Public Health Intelligence
Freya Tracey - Health Intelligence Analyst
Maria Lugangira – Principal Constitutional Officer

1. WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

2. APOLOGIES

Apologies for absence were received from

- Cllr Evelyn Akoto
- Eleanor Kelly
- David Quirke-Thornton
- Clive Kay – Roxanne Smith attending on his behalf
- Sarah Austin – Paran Govender attending on her behalf
- David Bradley – Rod Booth attending on his behalf
- Chris Mikata-Pralat

3. **CONFIRMATION OF VOTING MEMBERS**

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

4. **NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT**

There were none.

5. **DISCLOSURE OF INTERESTS AND DISPENSATIONS**

There were none.

6. **MINUTES**

RESOLVED - That the minutes of the meeting held on 21 July 2021, be approved as a correct record of the meeting.

7. **PUBLIC QUESTION TIME (15 MINUTES)**

The Health and Wellbeing Board acknowledged the following written submitted by Sharon Noonan-Gunning on behalf of SE16 residents:)

Question: Given this reality, how is malnutrition among the vulnerable and others in need our communities being identified? How are food and nutritional needs of communities being investigated and met this winter?

The Deputy Director of Public Health Provided a response (summarise below) and agreed to provide Sharon Noonan-Gunning with a more detailed written response and meet up to discuss this matter further and address concerns raised and follow up on suggestions.

- There are arrangements in place for any residents who are vulnerable and need urgent support to contact the council:
- There is a telephone number to call, email contact details and a web based referral form - all the information is on the council webpages

- There is in place a Southwark a good network of voluntary and community sector partners also providing a range of services to meet welfare needs among vulnerable residents- again information is on our webpages as well as Community Southwark
- The support that's provided includes urgent food support
- As part of longer term work on the Southwark Community Support Alliance, we will be trialling new ways of providing advice and support at a neighbourhood level.
- There is also ongoing work on developing more sustainable approaches to food insecurity through the Southwark Food Alliance. This includes building personal reliance, improving signposting to services, strengthening neighbourhood networks and provision such as community kitchens and local cooking clubs, supporting a Beyond the Food Bank approach such as community larders and working with big businesses on reducing food waste and effective distribution of surplus food. There are also innovative initiatives to promote affordable food such as with the support of Impact on Urban Health, the introduction of Alexander Rose vouchers for fruit and veg at local markets (£3 a week for each child every week and £6 if the child is under 1 years old for low income families).

Nancy Kuchemann, added that this could be taken up under the Start Well theme as the issue raised was around malnutrition and pathways

The Chair thank the organisations across the borough that were working incredibly hard to ensure people have the food they needed.

8. COMMUNITY EXPERIENCE - HIDAYA WOMEN'S ASSOCIATION: PRESENTATION

Felicity Reed, Clinical Lead Adults Facing Multiple Disadvantage provided a brief introduction.

The Board then heard from Sadiyo Awale who gave a personal account of her background and her journey that led to her setting up the Hidaya Women's Association.

Sadyio explained that she came to the UK from Somalia as young woman with her children, leaving family and friends behind. Of the many challenges she faced isolation was one of the bigger ones and she explained this was in part due to the language barrier. She eventually started ESOL classes where she began to make friends and meet people in a similar situation to herself. It was through this experience that led Sadiyo to establish the Hidaya Women's Association when she moved to Southwark. She did this with the support of other women she got to know in the Southwark area.

They set up various social activities to help women get know to each other and essentially help improve each other's lives

Amongst the key focuses of the Association is to help young women and mothers;
 (i) integrate to avoid that feeling of isolation,

- (ii) get to know the local area
- (iii) support each other through sharing experiences
- (iv) providing mental health support

The Chair thanked Sadiyo for her presentation and acknowledged all the work that was being done by the Hidayah Women's Association and the support it provides.

9. EMERGING KEY FINDINGS - UNDERSTANDING SOUTHWARK: DAILY LIFE & THE IMPACT OF COVID-19 ACROSS THE BOROUGH

Michael Gozo - Public Health Policy Officer (Healthy Places) introduced the report and provided some background and context for the research. He explained that the research emerged out of an approach adopted by Cabinet in the 2019 *Regeneration That Works For All Framework*. He further explained that the framework was to ensure that places where people lived, now and in the future, created new life opportunities, promoted wellbeing and reduced health inequalities. The key mechanism to implementing the framework was through Social Regeneration Charters (SRC).

In order to inform the development of the SRC, Social Life was commissioned to carry out social economic benchmarking in social generation areas.

One of the key points to highlight was that the research was due to start in 2020 but due to Covid-19 pandemic the research was reframed to also explore the impact of Covid-19 on Southwark's residents and businesses

Dr. Olimpia Mosteanu - Senior Researcher at Social Life, explained the research had two different components of the research, to examine;

1. the impact of COVID-19 across the borough, and
2. daily life in following six areas going through change
 - Elephant and Castle
 - Walworth
 - Camberwell
 - Dulwich
 - Peckham
 - Old Kent Road

The research across the borough happened in summer 2020 (June – August) and included various ways of collecting data. This included;

- commissioning a borough wide survey to explore the impact of the pandemic.
- in-depth research into the experience of vulnerable groups across the borough
- online survey of business to explore impact of Covid-19

In conclusion, Dr. Olimpia Mosteanu summarised that the research findings would help shape the Council's neighbourhood and social regeneration work in the future, and inform strategies to improve health and wellbeing, and reduce

inequalities.

The Chair thanked Michael and Dr. Olimpia Mosteanu for their presentation. He reiterated the point to all partners, that if they would like the opportunity to look at this in more detail they should get in touch with the Public Health Team.

The Chair also requested that in the development of the Joint Mental Health and Wellbeing Strategy it's made clear how the strategy responds to the findings and issues identified in this research.

RESOLVED - The Board noted:

1. The dissemination of the final research and report to officers within the Council and associated external partners.
2. The dissemination of the final research and report at a community launch event in the autumn.
3. That the Understanding Southwark research should inform the updated Joint Health and Wellbeing Strategy.
4. That the feedback from the Health and Wellbeing Board on the emerging key findings should inform the Understanding Southwark final report

10. VACCINATION UPDATE

Sam Hepplewhite - Placed Based Director (Southwark), NHS SE London CCG provided an overview of the vaccination programme. She explained the programme had 4 key areas:

1. First key area: The 12 – 15 year old programme, which was going to be broadly school based to help restrict the amount time children would need to be away from school.

The vaccination teams would be administering the Covid vaccination alongside the flu vaccination. There would also be a mop up at other sites for those children who were unable to have their vaccination at school.

She explained that the process would be slightly different due to age of the individuals and as there needed to be a consenting process. The ambition was that everyone would have been invited by the end of October to have their vaccine.

2. Second key area: The Booster campaign for the key cohorts;
 - 50 year olds and over
 - Health and care staff
 - 16-49 year olds who have an underlying condition
 - Those living in a residential care home and other residential homes

- Immunosuppressed individuals
3. Third key area: To make sure that those people who hadn't taken up the offer of their first or second vaccination continued to get that offer. In Southwark that was about 90,000 people who hadn't taken this offer. Therefore, it was important to ensure that when they made that decision it was as easy as possible for them to access a Covid vaccination whether it was their first or second.
 4. Fourth key area: the flu vaccination programme: The criteria had opened up this year with more people being invited. The numbers were expected to be high this year as last year was a suppressed due to people mixing less. The programme aims to encourage as many people as possible to have their flu vaccination. There would also be the opportunity to have both covid and flu vaccination at the same time.

Councillor David Noakes asked the question as to whether Public Health had a statement in response to the dilemma for those who were being offered the booster jab and didn't wish take up the offer but instead would prefer that the vaccine is instead redirected directed to where there is a shortage of covid vaccines..

The Director of Public Health acknowledged that over 50s not taking up the booster offer would unfortunately result in vaccine being wasted.

Sam Hepplewhite further explained that they had gone through the process of identifying a vaccine potentially going out of date before it could be used. The NHS working with Department of Health and Social care would organise for it to be collected (where it's very clear that it's not going to be used) and redistributed to ensure there is limited waste.

Board member Cassie Buchanan who represents Southwark Head raised the questions around the publicity and information being planned to accompany the 12 – 15 year old programme. She explained that secondary schools were already dealing with a lot of questions about how suitable vaccines are and actions around consent and that schools didn't really have the information to adequately answer those questions. She suggested that it would be helpful if schools had that information or someone who could provide that information directly to parents.

Regarding the issues raised above Sam Hepplewhite agreed it would be useful to link in with schools on specific questions as they were developing a question and answer sheet. Consideration was being given to webinars so again it would helpful to cover the schools experiences in the webinar. This could also be linked into questions raised by parent about the flu vaccination.

11. COVID-19 PANDEMIC OVERSIGHT

Freya Tracey, Health Intelligence Analyst with the Public Health gave a presentation that provided a current picture of Covid 19 within Southwark.

The key finding highlighted included;

- There'd been a recent decline in the number of cases in Southwark and London overall. Southwark had 474 confirmed cases in the week up to 17 September.
- Testing rates between different ages across the borough - the number of PCR test across the age groups had stayed largely similar since the beginning of August with some decline in the 18-29 age group.
- Lateral flow testing increased sharply with the return to school. Secondary school pupils were asked to do 2 LFTs for their return to school.
- With contact tracing there was a continued level of high case completion, which was similar to the London average and also Lambeth and Lewisham
- Activity at local hospitals within the borough was looked at to help understand both the number of new people being admitted with Covid 19 and the number of those who were currently in hospital receiving care.
- There had not been a large increase in unwell people after the relaxing of restrictions in July.
- In week to the 11 September, it was estimated that 1 in 90 people in London had Covid 19. The R number across London and nationally was 0.9-1.1. R number of 1 meant that the pandemic was neither shrinking or growing. This however it did indicate there was some uncertainty about whether were seeing an increase or decrease trend with the pandemic.

Roxanne Smith the Director of Strategy at Kings explained that across the Trust they'd had consistent numbers since the end of wave 2. There hadn't been the significant increase in really sick people which was one of the concerns over the summer. She further explained that (i) they were still managing to make progress on the waiting list and elective backlog, (ii) they monitored on daily basis what the operational requirements were across the hospital site and (iii) They are working together as South East London collaborative looking at ways to provide mutual aid and manage the Covid pressures.

Paran Govender, Director of Operations and Partnerships at Guys and St Thomas' explained that in terms of daily presentation of younger patients who were Covid positive, this remained a constant challenge on a daily basis but that many of them were not unwell so as to require admission. With regards to admissions there been 49 people admitted on that day who were Covid positive. These tended to be individuals (from observational staff) who had not been vaccinated or had had their

first vaccination but not the opportunity to develop immunity. Of those 49 admitted 19 were in critical care and the median age of those in critical care was 33 which was change to what the case was last year.

12. UPDATE ON HEALTH AND WELLBEING BOARD STRATEGY REFRESH

Chris Williamson - Head of Public Health Intelligence introduced the report and provide the Board with a brief overview.

He explained that the Joint Strategic Needs Assessment (JSNA) is the ongoing process that seeks to identify the current and future health and wellbeing needs of the boroughs local population. The JSN also informs and underpins the Joint Health and Wellbeing Strategy and other local plans that seek to improve the health of Southwark residents.

In Southwark, the annual work programme for the JSNA is aligned to four themes to ensure it covers the breadth of issues affecting health and wellbeing:

- population groups
- behaviours and risk factors
- wider determinants of health
- health conditions and healthcare

Key headlines

The main focus for the last 18 months has been understanding the impact of Covid, by working with teams across the council and also engaging with residents

Another needs assessment has focused on severe and multiple disadvantage. This has resulted in a series of policy and practice recommendations focused around data and digital, service delivery, commissioning and embedding lived experience.

Going forward the aim is to engage with partners across the council, NHS (including ICS) and community & voluntary sector in the coming months to identify priority JSNA projects for the future. It is recommended a draft work programme is brought to the board early in the new year for consideration and approval.

RESOLVED – That the Board

1. Noted the findings of the JSNA projects completed in the last year
2. Received and agreed a JSNA work programme early in 2022 for the financial year ahead.

13. JOINT MENTAL HEALTH AND WELLBEING STRATEGY 2021-24 UPDATE

This item was deferred was to the next meeting of the Board

14. INTEGRATED CARE SYSTEM DEVELOPMENT - PARTNERSHIP SOUTHWARK LEADERSHIP AND GOVERNANCE PROPOSALS

Anuradha Singh presented the item and provide a brief overview;

She explained that Partnership Southwark is an important collaboration that has the ability drive real change in the way services and support are delivered for the benefit of residents.

There is a clear logic to the integration of health and care services -with the potential for ICS and place-level partnerships to drive improvements in population health, and tackle inequalities, by reaching beyond organizational boundaries and working with the voluntary and community sector and other non-statutory partners to address social and economic determinants of health.

RESOLVED

1. The Southwark Health and Wellbeing Board noted the proposals in the appended slide-pack on leadership and governance arrangements within Partnership Southwark, which functions as Southwark's Local Care Partnership (LCP) within the Our Healthier South East London Integrated Care System (SEL ICS).
2. The Southwark Health and Wellbeing Board endorsed the direction of travel for leadership and governance arrangements within Partnership Southwark, including:
 - a) The partnership's ambition to deepen integrated planning and delivery arrangements within Partnership Southwark over the next 2-3 years, through an inclusive whole-system partnership that works collaboratively for the benefit of our population and communities. This includes working towards:
 - i) a joint committee of the ICS NHS Body and one or more statutory provider(s), with delegated decision making on specific functions/services/populations to this committee; and
 - ii) a joint Executive Place Lead ('LCP Director') recruited by the partnership who will lead partnership working at 'place' level and work with the joint committee to receive and manage agreed delegations.
 - b) The need to facilitate a realistic landing point for 1 April 2022 (given 2(a) will take time to work through with partners), when ICS arrangements are intended to be formalised nationally (subject to legislative changes currently progressing through Parliament). The partnership is committed to ensuring this landing point is buildable and sets the partnership up to move forward rather than restrict opportunities to deepen our integrated working arrangements. This includes:

- i) The establishment of the Partnership Southwark Strategic Board (PSSB), which will operate in shadow form in tandem with the Southwark Borough Based Board for 21/22 and transition to a formal committee of the ICS NHS Body from 1 April 2022. The PSSB will also operate as a sub-committee of the Health and Wellbeing Board as previously agreed by this Board.
 - (ii) The recruitment of an LCP Director by the partnership, as an individual ICS NHS Body appointment who will receive delegation from the ICS NHS Body. This will initially open to executive-level staff from within constituent partner organisations on secondment basis; and externally thereafter if no suitable candidate is found.
 - c) The establishment of a lived experience assembly or similar, to support the service user/carer voice in Partnership Southwark's governance arrangements.
 - d) The commitment of time and leadership resource from all partners within Partnership Southwark to collectively work through and shape our place-based arrangements as we move forward.
3. The Southwark Health and Wellbeing Board noted that the multi-agency task and finish steering group that has been meeting to work through these arrangements, will continue to support this next phase of activity. Key actions for this group to own will include:
- a) Finalising the Terms of Reference for the PSSB
 - b) Developing role descriptions and recruitment processes for both the LCP Director and Partnership Southwark Chair posts, which will be via open and transparent recruitment processes with input from all partners and inclusion of a stakeholder panel
 - c) Shaping the wider borough partners leadership team which will work with, and provide support to, the LCP Director to secure the best outcomes for the Southwark population. This will be shaped in line with ICS guidance with designated leads from social care, primary care, community physical and mental health services, acute services and public health as a minimum.
 - d) Facilitating the development of the response to the SEL ICS and Integrated Care Board (ICB) Chair (Designate), confirming the governance model for the Partnership Southwark Strategic Board and the process to secure place leadership in Southwark.

In parallel to the task and finish group discussions, partners will progress strategic conversations within their organisations to ensure we come to an agreed LCP position on our place-based arrangements by the end of October and are co-shaping the roadmap for the partnership to deliver on its ambitions.

15. PARTNERSHIP AND RECOVERY

The subject matter of this item had been covered and discussed in detail in the previous items.

16. ANY OTHER BUSINESS

There was none.

17. NEXT MEETING

1 November 2021

Meeting ended at 11.34am

CHAIR:

DATED: