

HEALTH AND WELLBEING BOARD

MINUTES of the Health and Wellbeing Board held on Thursday 13 January 2022 at 12.00 pm

PRESENT: Councillor Kieron Williams (Chair)

Dr Nancy Kuchemann (Vice-Chair)

Councillor Evelyn Akoto Councillor Jasmine Ali

Sarah Austin Cassie Buchanan Shamsur Choudhury Sangeeta Leahy

Councillor David Noakes David Quirke-Thornton

Andrew Ratcliffe Anuradha Singh

OFFICER Chris Williamson – Head of Public Health Intelligence SUPPORT: Maria Lugangira – Prinicpal Constitutional Officer

1. WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

2. APOLOGIES

Advance apologies have been received from:

- Eleanor Kelly
- Clive Kay, subbing was Roxanne Smith
- Chris Mikata-Pralat, subbing wa Katherine de Kretser
- David Bradley, subbing was James Lyle

- Sam Hepplewhite, subbing was Martin Wilkinson

3. CONFIRMATION OF VOTING MEMBERS

Those listed as present were confirmed as the voting members.

4. NOTIFICATION OF ANY ITEMS OF BUSINESS 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 1 November 2021, be approved as a correct record of the meeting, subject to the following amendment, to note that;

Dr Robert Davidson was subbing for Nancy Kuchemann

7. HEALTHWATCH PRESENTATION

Shamsur Choudhry for Healthwatch Southwark presented the item.

He explained that there is a Healthwatch in every area of England (created under the Health and Social Care Act 2012). Healthwatch Southwark is an independent / statutory organisation (funded by the local authority) and is hosted by Community Southwark

The vision of Healthwatch Southwark for Southwark residents to be able to access and receive the best possible health and social care services, appropriate for our diverse communities.

With regards to what Healthwatch Southwark do Shamsur explained, that they are an independent champion for the patient voice, who;

- listen to local people about their health and social care needs and experiences
- voice patients and users views and concerns in order to make services better

- provide information and signposting
- promote patient and user involvement (involving local people in decision making bodies)

Their upcoming priorities consisted of

- Establishing 'key priorities' for the upcoming year by engaging with members and stakeholder (survey, focus groups)
- Engaging the Latin American/Caribbean /African Communities (health inequalities workstream) feedback and involvement in health and social care issues/projects.
- Engaging with young people (seldom heard group) establishing a youth health panel /board.
- Restarting in person Community Engagement build community presence and build our insight repository – this is essential to HWS.
- Restarting their Enter and View programme visit local health social care service to review service and make suggestions for improving services (resident lead visits)

The Chair thanked Shamsur for his presentations and thanked everyone for their contributions towards the discussion and for their ideas on how Healthwatch Southwark can support the H&WBB and vice-versa.

8. LOCAL CARE PARTNERSHIP DEVELOPMENT WITHIN OUR HEALTHIER SOUTH EAST LONDON INTEGRATED CARE SYSTEM

Anuradha Singh presented the report and provided the Board a summary of the key updates. She was supported by Mahua Nandi, Sophie Welling and Cheryl Rhodes.

The Partnership Southwark is made of partners who are Southwark Council, South East London Clinical Commissioning Group (CCG), Community Southwark, Guy's and St Thomas' NHS Foundation Trust, South London and Maudsley NHS Foundation Trust, Improving Health and Quay Health Solutions (GP Federations representing Primary Care Networks), and King's College Hospital NHS Foundation Trust.

The Partnership aims to bring partners from across health, care and the voluntary community sector to better join up care, improve health and wellbeing outcomes and reduce inequalities for Southwark residents.

The Local Care Partnerships will sit under the larger organisation called the

Interrogated Care Board, whose ambition is to join up care.

There was also work being undertaken with the support of Community Southwark and engagement leads from across the Partnership to engage with service users, carers and community representatives on how best to establish and constitute the Lived Experience Assembly (and whether this or another title would be appropriate for this forum) and to shape Partnership Southwark's approach to community engagement and involvement more generally.

RESOLVED:

1) The Southwark Health and Wellbeing Board note the update on progress with Partnership Southwark's leadership and governance arrangements, in the context of wider south east London Integrated Care System (SEL ICS) developments. This builds on the previous detailed update given to the Board in September 2021.

9. BETTER CARE FUND 2021/22

The item was presented by Martin Wilkinson and Genette Laws.

Martin explained that due the Pandemic, the annual planning requirements for 2020/21 were suspended and local areas were asked to roll forward existing agreed plans and provide an end of year BCF report to NHSE. As the planning guidance was not received until September, the 2021/22 plan reflected the existing range of budget commitment rolled forward from plans previously agreed by the Health and Wellbeing Board.

The plan was submitted and information had been received from NHSE that they were happy to send an agreement subject to today's H&WBB agreement.

Genette Laws explained that they wanted to make sure member across the H&WBB were sighted upon the discussions around the spend for 2022/23. The formal proposals for the 2022/23 BCF would be presented to the Health and Wellbeing Board in due course. She further explained that the timing of this would depend on the national process set out in the planning requirements. As a change in process for 2022/23 that the Health and Wellbeing Board would meet to discuss the BCF before it was submitted as a draft to NHSE. In the event that there was not a suitable scheduled meeting of the board, a special meeting would be convened.

RESOLVED:

1) That the Health and Wellbeing Board formally endorse the Better Care Fund (BCF) template and narrative plan for 2021/22 (signed off by the Accountable Officer of SELCCG, the Director of Adult Social Services and the SELCCG Place Director on behalf of the Health and Wellbeing Board) submitted to NHS England for assurance on 16/11/21 (appendix 1).

2) That the Health and Wellbeing board note the 2020/21 year end expenditure report as set out in paragraph 6 and appendix 2.

10. COVID-19 UPDATE

Chris Williamson, head of Public Health Intelligence for Southwark Council, presented the Covid-19 update item and outlined the following:

Key headline messages:

- Cases continued to decrease across both Southwark and London but infection levels remained very high. Southwark had 4,657 confirmed cases of COVID-19 in the week to 7 January.
- The number of hospital inpatients with COVID-19 across London remained high and across the capital, there are now around 3,800 hospital inpatients with COVID-19, with around 220 of these in mechanical ventilation beds in critical care.
- Vaccination numbers were increasing quickly for booster doses but very slowly for first and second doses; levels remain comparable to similar boroughs such as Lambeth.
 - Over 197,000 Southwark GP-registered patients have received their first dose vaccine, equivalent to 67% of the population aged 16 and over.
 - Over 187,000 have received their second dose, equivalent to 63% of the population aged 16 and over.
 - Over 125,000 have received their booster dose of the vaccine, equivalent to 72% of the eligible population.
- Cases remained stable in most Children and Young People age groups in the past week, but have increased in those aged 12-16
- Ethnicity-related dose one and two inequity persisted and was now reflected in booster coverage, though to a lesser extent

With regards to Horizon scanning, cases remained very high in London, with the R number now between 0.9 and 1.2

The ONS estimated that 1 in 15 people in London had COVID-19 in the week to 4

January. The national R number is 1.2–1.5, with London at 0.9--1.2. This indicated that the epidemic in London was either shrinking slightly, flat, or growing slightly.

The latest evidence showed that while vaccine effectiveness against symptomatic disease from Omicron does waned over time, protection from hospitalisation remained high. Vaccine effectiveness against hospitalisation was 72% up to 24 weeks after the second dose of the vaccine. This rose to 88% effective from 2 weeks after a booster dose.

RESOLVED - That the Health and Wellbeing Board note the COVID-19 Update.

11. VACCINATION UPDATE

Martin Wilkinson provided a brief verbal update. He explained that there was still some work to be done around encouraging people to come forward for their 1st, 2nd dose or booster.

Key messages:

- There are currently 4 pharmacies in the borough delivering vaccinations, with 2 in the pipeline
- There have been discussion around hyper local work as it is recognised the importance on providing information that will support people in their decision making and build trust with local communities and citizens. This is information not just on the Covid vaccine but also around cancer screening and other immunisations and preventions.
- Following some data work, 3 estates in Southwark have been identified for development work and pilot work. Within those estates, the aim is to identify the key groupss i.e public sector groups, the pharmacy, the tenants associations and other groups.
- There will be street work undertaken to go out and talk to people.
- Take up of the flu vaccination wasn't as high this year as in previous years, therefore uptake of this was being encouraged.
- With regards to schools work was still continuing to encourage take up of the 2nd dose for 12-15 year old, as well as the 1st dose
- Work was still ongoing to offer the vaccine to everyone i.e vulnerable groups, the homeless, asylum seekers, those with learning disabilities, social and care workers

RESOLVED - That the Health and Wellbeing Board note the Vaccination Update.

12. UPDATE ON SOUTHWARK COUNCIL'S OUTBREAK PREVENTION AND CONTROL PLAN, WINTER 2021/22

Richard Pinder introduced the item and provide a brief summary of the plan. He explained that this was the third version of the Outbreak Prevention and Control Plan (OPCP) and its aim to continue to mitigate the impact of coronavirus on Southwark's population and communities, providing a robust framework for the delivery of actions, and prepare the way for a safe, healthy and confident return to a new way of life.

In order achieve this the refreshed focus would continue to be on

- 1. Working with local communities, institutions and partners from across sectors to maximise the impact of COVID-19 prevention measures across the borough, recognising the inequitable impact of the pandemic.
- 2. Supporting the implementation of testing, tracing and isolation of local residents with support through practical and financial assistance.
- Working with UK Health Security Agency and other specialist partners in the management of outbreaks and instituting local control measures as they may be required.
- 4. Supporting the roll out of the NHS COVID-19 vaccination programme, with a focus on tackling vaccine hesitancy and underserved groups.
- Managing a single point of contact for the exchange, management and interpretation of intelligence and other epidemiological evidence with local, regional and national assets.
- 6. Providing appropriately governed assurance and oversight of how the pandemic is handled in Southwark to local, regional and national stakeholders.
- 7. Using lessons from the pandemic to inform the recovery process and to strengthen local approaches to tackling health inequalities.

RESOLVED – That Health and Wellbeing Board;

3) Note the updated Outbreak Prevention and Control Plan that outlines the actions being taken to prevent, identify and control the novel coronavirus

pandemic in Southwark.

13. PHARMACEUTICAL NEEDS ASSESSMENT (PNA) BRIEFING AND UPDATE ON TIMELINE

Dr Ana Llamas (the new PH registrar) presented the item with additional input from Dr Leidon Shapo

The current PNA for Southwark was due to be refreshed in 2021 but due to pressures in response to the COVID-19 pandemic, the Department of Health and Social Care agreed that the requirement to publish renewed PNAs would be suspended for all local authorities until 2022. The requirement now was that PNAs would be renewed and published by October 2022.

The PNA refresh for Southwark and due for publication in October 2022 seeks to:

- Identify current and expected future pharmacy needs for Southwark's population including by reviewing population demographics and services within neighbouring areas;
- Engage with stakeholders including health professionals and the public to identify whether unmet need is experienced;
- Review services to ensure effective allocation of resources to best meet population needs;
- Present current pharmacy provision in Southwark including dispensing, advice on health, medicine reviews and local public health services (such as stop smoking, sexual health and support for drug users).

From April 2022, Integrated Care Boards (ICBs) will take delegated responsibility for pharmaceutical services; by April 2023 NHS England and NHS Improvement expects all ICBs will have done so.

It was explained that Health and wellbeing boards have to be aware that some services that are commissioned from pharmacies by clinical commissioning groups (and are therefore other NHS services) would be moving to the integrated care boards and would fall then within the definition of enhanced services.

With regards to the needs of the local population, its health and wellbeing needs are described in Southwark's Joint Strategic Needs Assessment. The PNA would not duplicate these detailed descriptions of health needs and as such should be read in conjunction with the JSNA.

The Southwark profile would include demography including age/ gender (including population projections), ethnicity and deprivation; and health needs of the local population (including healthy lifestyles) compared to England average / inequalities within the borough.

The PNA would link into national and local strategic plans, including the local commissioning strategy, CCG Primary Care Plan and the local joint Health and

Wellbeing strategy.

RESOLVED - That the Health and Wellbeing Board:

- Agree the scope, process and timeline set out in this document for the refresh of the Pharmaceutical Needs Assessment (PNA).
- Receives regular updates on development of the PNA.

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The next meeting of	of the Health	n and We	llebing Boa	ard was	scheduled	for	Monday
7 March							

Meeting ended at 2.00 pm

CHAIR:

DATED: