

**MINUTES OF
HEALTH & WELLBEING BOARD and
ICB SUB-COMMITTEE
(COMMITTEES IN COMMON)**

Monday, 26 June 2023
(5:00 - 6:45 pm)

Present: Cllr Maureen Worby (Chair), Elaine Allegretti, Pooja Barot, Matthew Cole, Selina Douglas, Cllr Syed Ghani, Dr Ramneek Hara, Ann Hepworth, Cllr Jane Jones, Cllr Elizabeth Kangethe, Manisha Modhvadia, Sharon Morrow, Elspeth Paisley, Charlotte Pomery, Dr Shanika Sharma, Sunil Thakker, Melody Williams, Dr Uzma Haque and Craig Nikolic

Invited Guests, Officers and Others Present: Anju Ahluwalia, Narinder Dail, Jane Leaman, Fiona Russell, Mike Brannan, Louise Hider-Davies, Annemarie Keliris, Debbie Harris, Yusuf Olow and Christine Brand

Apologies: Kathryn Halford, Dr Kanika Rai, Nathan Singleton, Fiona Taylor, Chetan Vyas, Dr Afzal Ahmed, Dr Natalya Bila, Dalveer Johal, Dr Jason John, Dr Deeksha Kashyap and Shilpa Shah

1. Declaration of Members' Interests

There were no declarations of interest.

2. Minutes of the Health and Wellbeing Board held on 14 March 2023

The minutes of the Health and Wellbeing Board held on 14 March 2023 were confirmed as correct.

3. Minutes of the Barking and Dagenham Place based Partnership Board held on 25 May 2023

The minutes of the Barking and Dagenham Place-based Partnership Board held on 25 May 2023 were confirmed as correct.

4. Action log

There was one residual action regarding capital programmes in relation the Barking and Dagenham Partnership Board estates programme and governance. It was envisaged that the matter would be addressed in a future finance paper. However, there was a paper that provided an update on the local infrastructure forum.

The ICB Sub-Committee noted the update.

5. Governance update and ICB sub-committee terms of reference

The Chief Participation and Place Officer (CPPO), NHS North East London, presented a report on governance arrangements relating to the new Health & Wellbeing Board (HWB) and Barking & Dagenham Integrated Care Board (ICB)

Sub-Committee 'Committees in Common' approach.

The CPPO thanked all those who had contributed to the establishment of the Committees in Common, commenting that bringing together the governance structures would enable decisions to be taken more efficiently and provide more time for the Adults and Children delivery groups to engage with communities and deliver services.

The report included revised Terms of Reference for the ICB Sub-Committee to reflect the new approach as well as the functions that the NEL ICB had delegated to the ICB Sub-Committee. The CPPO added that the new Committees in Common approach was a learning process and that it may be necessary to amend the terms of reference in future.

In response to a question from a member of the public regarding the membership of the HWB / ICB and the subject of domestic abuse, the Chair confirmed that a local senior Police officer was included in the HWB's membership, although one was not present at this meeting. With regard to a representative of the Council's Housing service being included in the membership, the Chair explained that whilst it would not be appropriate to extend the membership of the HWB / ICB to cover all potential interested parties, relevant officers would be invited to meetings to discuss specific issues.

The Health and Wellbeing Board and ICB Sub-Committee endorsed the proposed governance arrangements, including the new Terms of Reference of the ICB Sub-Committee.

The ICB Sub-Committee agreed to recommend approval of its new Terms of Reference of the ICB Board.

6. Progressing Our Ambition for Adults and Communities in Barking and Dagenham

The Director of Care and Community Health (DCCH), LBBB, invited the Committees in Common to discuss the delivery of the ambition to improve services for adults and communities in Barking and Dagenham. The intention of the discussion was to provide guidance to officers on the expectations that would enable the Council and NHS partners to develop relevant approaches.

The Council's Corporate Plan would follow the outcome of the Fuller Review which reviewed primary care integration in relation to general practice, community pharmacy, dentistry and optometry. The ICP strategy would follow the outcome of the Hewitt Review which related the review of integrated care systems and recommendations were made in relation to simplifying targets and focusing on prevention.

It was noted that the Care Quality Commission (CQC) would commence inspections in October 2023 and would have strong emphasis on adult care as well as the effect of the integrated care system.

Prevention and information guidance was the overall theme and over the next year development of the strategy would be undertaken which would involve:

- Co-production – with residents, staff and service users to ascertain what works and what does not, and which groups are most at need;
- Data analysis – rigorous analysis would be undertaken to ascertain which cohorts are at most risk and develop models to better support the most vulnerable; and
- Mapping – pathways and service provision would be mapped with a view to streamlining patient journeys in order to avoid unnecessary appointments and patients being ‘bounced around’.

The Health and Wellbeing Board and ICB Sub-Committee noted the update.

7. Joint Local Health and Wellbeing Strategy 2023-28 Refresh Framework for Delivery

Further to Minute 50 of the Health and Wellbeing Board on 14 March 2023, the Interim Consultant in Public Health (ICPH), LBB, introduced the proposed Barking and Dagenham Joint Local Health and Wellbeing Strategy for 2023 - 2028.

The refreshed strategy set out a renewed vision for improving the health and wellbeing of local residents and reducing health inequalities at every stage of residents’ lives by 2028. The refreshed Health and Wellbeing Strategy aligned with the recently published NHS NEL Integrated Care Strategy and the Joint Forward Plan that had been submitted to NHS England, as well as linking to the Council’s Corporate Plan. The refreshed strategy set out a number of specific priorities including:

- Improving outcomes for those with long-term conditions (children and adults);
- Addressing obesity and smoking (children and adults);
- Providing the best start in life for our babies, children and young people;
- Preventing and addressing domestic abuse;
- Preventing exposure to and the consequences of adverse childhood experiences;
- Addressing wider determinants of health, such as poor housing, unemployment and low levels of training, education and skills development.

Development was still ongoing in delivering the priorities and how to measure outcomes. The IPHC advised that almost 30% of Barking and Dagenham adults were classified as obese and the Borough had the highest level of child obesity in London. In response to questions regarding tackling child obesity in the Borough, it was explained that the Borough had been selected for a pilot scheme that would involve a ‘Tier 3’ commissioning service being introduced, whereby a multi-disciplinary team provide targeted support to the individual and their family which would not require travel to the Royal London Hospital. The Director of Public Health (DPH), LBB, commented that up until now, this area had a fragmented commissioning path as the Council commissioned Tier 1 and 2 services, such as weight management, whilst NHS bodies commissioned Tiers 4 and 5 which involved medical intervention, without a Tier 3 service being in place which had meant that children went from Tier 2 to Tier 4.

Members commended the Health and Wellbeing Strategy 2023 - 2028 and the Chair encouraged all stakeholders to disseminate the document and the

accompanying presentation.

The Health and Wellbeing Board approved the Joint Health and Wellbeing Strategy 2023-28 as set out at Appendix A to the report.

8. **Better Care Fund 2023-2025**

The Head of Adults' Commissioning (HAC), LBB, introduced a report on the Better Care Fund (BCF) submission for 2023-25.

The HAC confirmed that for 2023/24, Barking and Dagenham had been allocated £33.69m by the Government, of which £18.4m was allocated to the ICB for out-of-hospital and community health services, reablement, independent / voluntary sector, Care Act implementation and Carers' Break funding. The remaining funding was allocated to the Council, to support Improved Better Care Fund (iBCF) projects, Disabled Facilities Grant and the new Discharge Fund. The provisional allocation for 2024/25 was £35.43m.

The HAC advised on changes to Better Care Fund arrangements, including the new Discharge Fund and a two-year planning process. There were also two further national conditions set by Government, covering how services the area commissions will support people to (1) receive the right care in the right place at the right time, and (2) remain independent for longer and, where possible, support them to remain in their own home.

It was noted that two key documents would need to be submitted to NHS England for approval, namely the Joint BCF Plan 2023-25 for Barking and Dagenham, Havering and Redbridge, which had been jointly developed by the three Boroughs and NHS NEL, and the BCF Planning Template 2023-25, which set out targets and a breakdown of how the funding would be allocated. All funding had been fully committed and would be reviewed as local plans were developed.

The HAC also highlighted that the discharge component of funding would be used to implement phase 2 of the reablement pilot. The Borough did not, at present, have a reablement service and it was intended that the lessons learned from the pilot would be used to establish one. Additionally, capacity would be increased for complex discharges, including mental health and homeless step-down beds, whilst provision would also be made for:

- homecare and crisis intervention; and
- nursing and supported living placements; and
- workforce initiatives to support market challenges.

In response to questioning regarding the rising number of people being admitted to rehabilitation homes or care homes following hospital discharge, the DIC noted that acuity, complexity of need and additional 1-2-1 support were the main reasons for the increase. This was connected to long term conditions.

The Health and Wellbeing Board and ICB Sub-Committee agreed:

- (i) The Better Care Fund submission to NHS England, as set out at Appendices 1 and 2 to the report; and

- (ii) To enter into a variation to effect the changes to the Section 75 Agreement governing the BCF, to reflect the BCF 2023-25 submission.

9. Health Inequalities Programme Plan 2023/24

The Consultant in Public Health (CHP), LBBD, presented a report on the Health Inequalities Programme Plan for 2023/24.

It was noted that NHS NEL would receive £6.6m funding annually for health inequalities for three year period 2023/24, 2024/25 and 2025/26, while the sum of £777,000 had been allocated to the Council for each of those three years. Up to an additional £400,000 would be contributed from the Council's Public Health Grant in 2023/24, should the need arise.

The aim of the funding was to tackle health inequalities in deprived areas including carers, people with learning disabilities, autism or are homeless. Among the services provided would be social prescribing, targeted debt advice, community leads, PCN health inequality leads, grants for children and adolescent mental health. The next step, subject to approval, would be to establish a B&D Health Inequalities Working Group followed by the establishment of a workstream pipeline.

The Health and Wellbeing Board and ICB Sub-Committee approved the Barking and Dagenham Health Inequalities Programme Plan for 2023/24, as set out at Appendix 1 to the report.

10. Improving Urgent and Emergency Care (UEC) across Barking and Dagenham, Havering and Redbridge

The Chief Participation and Place Officer (CPPO), NHS NEL, presented a report on the development of several improvement programmes aimed at resolving some of the significant pressures being felt across Barking and Dagenham, Havering and Redbridge in the Urgent and Emergency Care (UEC) service.

The CPPO referred to the unprecedented demand arising from the current high temperatures, which were causing air pollution and created a 'pollen bomb' which was adding to the pressures within UEC.

The Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT) had been placed under the Single Oversight Framework level 4 (SOF4) as the result of a combination of non-elective performance challenges and financial sustainability issues. A Care Quality Commission (CQC) inspection took place in November 2022 at BHRUT, focused on urgent and emergency services. This was a follow-up to a visit in November 2021 where issues were identified within the UEC pathway. At the same time, all four urgent treatment centres provided by the Partnership of East London Cooperatives (PELC) were inspected along with both emergency departments and medical care provided by BHRUT.

The CQC was critical of BHRUT over quality of care and waiting times. The CQC also found that all four Urgent Treatment Centres (UTCs) delivered by PELC were inadequate and enforcement actions were issued. Inspection findings covered areas such as access to care and treatment in a timely way, a need to improve governance and accountability, a need for clearer vision and strategy and

leadership capacity and skills.

BHRUT have drawn up a plan of action to address the CQC's concerns. PWC was commissioned to provide an external perspective on the requirements necessary to improve the resilience of the system. Their report would be brought to the Committees in Common for consideration. The CPPO emphasised that the plan would address the entire system and not just emergency care services.

NEL ICB had been designated as an ICS in Tier 1 for urgent emergency care by NHS England. The CPPO explained that this was because of NEL ICB was an outlier in terms of its performance and that the designation would result in NHS England providing additional support. Keeping residents well at home in order to minimise avoidable admissions was a priority, as was ensuring that patients were not discharged until they were well enough and a care plan had been agreed.

The Executive Director of Partnerships (EDP) at North East London Foundation Trust (NELFT) noted that when people were in crisis, they often turn up at A&E and, as part of the mental health planning process, additional beds were being prioritised. It was acknowledged, however, that this would not address systemic issues as, overall, there was still a shortage.

There was a considerable debate on the issues and the role of all stakeholders in reducing demand for UEC, and how to communicate to the local community what services were available. The Chief Operating Officer for the B&D GP Federation asked that the Federation be involved in the process due to the integral role that GPs have in urgent care provision and the similar pressures on demand that they are experiencing. The Executive Director of Partnerships, NELFT, also referred to the challenges within the mental health service and the important role that the voluntary sector could play through the provision of community-based services. The DPH, LBBD, added that the issue was not necessarily the UEC service itself, but rather what was being done to prevent admissions to hospital and diagnose disease earlier.

The Chair suggested that further discussions take place over the Summer on the preferred model of access and the most appropriate way to communicate with residents on how to access the appropriate service.

The Health and Wellbeing Board and ICB Sub-Committee noted the report and UEC Improvement Plan, as set out at Appendix 1 to the report.

11. Questions from the Public

There were no additional questions from the public.

12. Yusuf Olow, Senior Governance Officer

The Chair advised that Yusuf Olow, LBBD Senior Governance Officer, would be leaving the Council in July. The Chair expressed the HWB's thanks for Yusuf's support and wished him well in his new role.