



DRAFT Barking and Dagenham Partnership Board Thursday 30 March 2023 Committee Room 2, Barking and Dagenham Town Hall and Via Microsoft Teams

Members:	
North East London ICB	
Dr Rami Hara (RH)	Clinical/Care Director, NHS North East London
NHS Trusts	
Melody Williams (MWi)	Integrated Care Director, NELFT
Ann Hepworth (AH)	Director of Strategy & Partnerships, BHRUT
Local Authorities	,
Cllr Maureen Worby (MWo) Co-Chair	Councillor, London Borough of Barking & Dagenham
Matthew Cole (MCo)	Director of Public Health, LBBD
Rhodri Rowland (RR)	Director of Community Participation and Prevention – ComSol, LDDB
Charlotte Pomery (CP)	Chief Participation and Place Officer, NHS North east London (Standing for Sharon Morrow)
Together First CIC, B&D GF	
Primary Care	
Dr Shanika Sharma (ShaS) Co-Chair	Primary Care Network Director, West One
Dr Kanika Rai	GP Provider/ PCN representative
BD Collective	
Elspeth Paisley (EPa)	Health Lead, Lifeline Community Resources
Georgina Alexiou (GA)	Founder & Project Manager, BDYD
Healthwatch	
Agne Pilkauskiene (AP) Rep for Manisha Modhavia	Healthwatch, Engagement and Project Officer
Care Provider Voice	
Pooja Barot (PB)	Director, Care provider Voice
Attendees:	Director, Gare provider voice
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Jane Leaman (JLe)	Consultant in Public Health (interim), LBBD
Debbie Harris (DH)	Governance Officer, NHS North east London
Dotun Adepoju DA)	Senior Governance Manager, NHS North east London
Matt Cridge (MCr)	Head of Borough Partnerships, LBBD
Sugarna Knacrr (SK)	Hood of Sarvina Integrated Cara
Susanne Knoerr (SK)	Head of Service, Integrated Care
Apologies:	Drimany Caro Naturaly Director North
Dr Narendra Teotia (NT)	Primary Care Network Director, North
Fiona Taylor (FT)	Acting Chief Executive, LBBD
Sharon Morrow (SM)	Place Director, NHS North East London
Sunil Thakker (ST)	Finance, NHS North East London
Elaine Allegretti (EA)	Strategic Director Children and Adults, LBBD
Dalveer Johal (DJ)	Pharmacy Services Manager, NEL LPC
Dr Jason John (JJ)	Primary Care Network Director, New West
Dr Afzal Ahmed (AA)	Primary Care Network Director, East

Dr Bhawnesh Liladhar (BL)	Dental Lead
Dr Kashyap (dG)	Primary Care Network Director, North West
Craig Nikolic (CN)	CEO, Together First CIC, B&D GP Federation
Manisha Modhvadia (MM)	Healthwatch Acting Manager
Selina Douglas (SD)	Director of Partnerships, NELFT
Dr Natalya Bila (NB)	Primary Care Network Director, East One

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Item	T	
1.0	Welcome, introductions and apologies	
1.0	The Chair welcomed members/attendees to the meeting.	
	All members/attendees joined the meeting in person.	
	Apologies were noted as above.	
1.1	Declarations of conflicts of interest	
	Members were reminded to complete their Declaration of Interest form if they had not	
	already done so.	
	No additional Conflicts of Interests were noted.	
1.2	Minutes of the meeting held on 27 October 2022	
	Notes from the previous meeting were agreed as an accurate record.	
1.3	Action Log	
	The action log was discussed and noted.	
2.0	Community based localities	
	Elspeth Paisley (EP) presented the Community based localities paper that outlines the	
	rationale, learning and outcomes behind BD_Collective's/civil society's approach to	
	building community system resilience in Barking & Dagenham after six months.	
	Highlights included:	
	The Board/Committee is asked to consider their contribution to this 10-year piece	
	of work to build a connected, effective infrastructure, where resources are	
	maximised, residents are empowered and healthy life expectancy is improved by	
	5 years.	
	 A well-established evidence base shows us that relationships are as important to 	
	our health as hospitals and council services, and that powerlessness is a killer.	
	BD Collective is a network of networks of the social sector in B&D. Its values of	
	connection, trust, accountability and power-sharing drive the localities work, the	
	heart of which is creating environments for collaboration, placing the citizen in the	
	driving seat.	
	The localities work is measuring connection, trust and belonging as a means of The localities work is measuring connection, trust and belonging as a means of The localities work is measuring connection, trust and belonging as a means of	
	evaluating the depth of relationships that are being established across the	
	borough, and the journey of moving from an 'l' lens to a 'we' lens across all	
	organisations.	
	Comments from the Board:	
	 How are you ensuring that we are reaching the groups in the community that are not currently accessing your services? 	
	 We have previously tried working with the Voluntary sector but they are not set up to work within our governance framework, so what is the offer from BD_Collective 	
	to be the overarching governance framework for these smaller groups?	
	There is a need to look at the delivery element too along with what is meant by	
	Commissioning.	
	 There is a need to be aware of our changing population. 	
	 Are we linking in with Social Care Co-Ordinators as practices will be aware of 	
	their patients who are isolated and suffering from loneliness but with no medical	
	conditions? Is there a plan to get these residents out of their homes to socialise	
	them?	
	 Can we utilise our Health Inequalities funding to help us identify lonely residents? 	
	There is a need to do a commissioning piece of work on 'what does it look like in	
	the New world'.	
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 Do we have any data on how many people we manage to support back into work?

Action: BD_Collective to bring quarterly updates back to the Board.

The Board noted the update.

3.0 Acute Collaborative update

Ann Hepworth (AH) presented the Acute Collaborative paper that provides an update on the development of the acute provider collaborative across NEL. Highlights included:

- The NEL Acute Provider Collaborative will sit alongside four other NEL collaboratives (community health, primary care, mental health and VCSE organisations) within NELs integrated care systems.
- The collaboratives will work at scale across multiple places, with shared purpose and effective decision-making arrangements, to:
 - Reduce unwarranted variation and inequality in health outcomes, access to services and experience, and:
 - Improve resilience by, for example, providing mutual care.
- A framework, based on national guidance has been produced that articulates the overarching purpose and benefits of the Collaborative focusing on the Why, How and What.
- How we work together will be developed through discussions on core principles of Why/How with a proposal for learning partner to support us through this process as the Acute Provider Collaborative (APC) develops and matures.

Comments from the Board:

- The Thames Gateway growth in population was mentioned, with a challenge that the acute sector would not be prepared to look at what 'has to be' provided in hospitals. We built LIFT buildings to take services out into the community, also looking to ease pressure on General Practice with other referral routes into specialist, either based in the community or hospital.
- A challenge for Barking and Dagenham residents is that we do not have a Trust in our Borough. Residents have to attend different Trusts for different treatments with no communication between the two resulting in duplication. However, a procurement process is in place for Queens and King Georges for an electronic patient record system.
- Newham have a portal that allows GPs to see all investigations that have taken place for a patient but this is not the case in Barking and Dagenham.
- It was felt that innovation happens at Barts leaving BHRUT as a standalone Trust which makes it a challenging place to work and for career development. How will the Collaboratives ensure that Barking and Dagenham residents have access to all treatments that are available in NEL?
- Where we have taken some services out into the community there is a need to double check the pathway to ensure patients are not being put back to the beginning of the process.
- A need to look at reconfiguring Barking Hospital space for out-of-hospital services to use.

The Board noted the update.

4.0 Health and Wellbeing Strategy refresh Consultation

Jane Leaman (JL) provided an update on the Health and Wellbeing Strategy refresh Consultation.

Highlights included:

- The current Barking and Dagenham Health and Well Being Strategy (HWBS) ends in 2023.
- This draft refreshed strategy sets out a renewed vision for improving the health and wellbeing of residents and reducing inequalities at every stage of residents' lives by 2028.

- The Strategy provides a framework for action, drawing upon a range of other relevant strategies including the NEL Integrated Care Strategy; LBBD Corporate Plan (currently in production); LBBD equality and diversity policy statement and B&D's Best Chance Strategy.
- The Strategy is being developed alongside the evolving ICB joint forward plan (JFP) which needs to be published by June 30th 2023. A Local Forward Plan will be produced which will include actions required to deliver this strategy.
- There is an emphasis on co-production with residents being part of decisions and development.
- There is a need to develop some common indicators to measure our collective endeavour.
- We have begun the consultation on this draft and are inviting feedback from residents and other stakeholders until the 16th April.
- Rhodri Rowlands (RR) to produce a follow up note for the Board that sets out the steps in the consultation which includes a link to an On-Line survey. There is an ask for this group to utilise their networks and groups to support and promote this consultation.
- We will also be hosting a Q&A open session as part of the consultation.

Comments from the Board:

- Will delivery metrics be available?
- Will this strategy be aligned to other strategies e.g. Diabetes?
- In terms of turning the strategy into provision, funding will be a big consideration so how, as a collective group, will we resolve this? With NEL ICB cuts, we will have to look locally at what we are doing and why we are doing it!
- There is an agreement that we will work together on a new formula to reflect the inequality between inner and outer NEL funding. There is a principle agreement with inner London that they will not get any growth in allocated funding for the foreseeable future to allow outer London to catch up.

Action: a follow up note will be issued for members to:

- 1. Review the attached the stakeholder JHWS consultation document with colleagues and collate any feedback on behalf of your organisations- sending back to myself or Jane.
- 2. Share the following link through channels & networks etc. so residents can feedback on a shorter version: https://oneboroughvoice.lbbd.gov.uk/healthy-and-well-2023-2028

Action: consider setting up some workshops to allow time for some frank conversations.

The Board noted the update.

5.0 Joint Forward Plan

Charlotte Pomery (CP) provided an update on the Joint Forward Plan. Highlights included:

- The Joint Forward Plan (JFP) is a five-year plan describing how we will, as a system, deliver our Integrated Care Partnership Strategy as well as core NHS services – and a supporting reference document providing further detail on the transformation programmes described in the main plan.
- We need to submit a draft of the plan to NHSE by the end of March, before further work and engagement across the system during April and May so that we can publish in June 2023.
- The plan will then be refreshed on an annual basis.
- The Partnership Board is asked to provide comments on the plan so that these can be incorporated into the April-June process.

Comments from the Board:

Board members noted the update.	
Action: DH to share key documents in a zipped folder in word/presentation form to allow sharing of some parts of the documents with colleagues.	
 There is a need to have some meeting papers such as this one sent separately, aside of the grouped meeting pack, so that copies can be retained for individual retention. 	
 The Strategy lays out the challenges in NEL. We can use our collective force to lobby for inequalities that don't help us as at Place e.g. the difference in London weighting. 	