

**Health & Well-Being Board (Croydon)**  
**Minutes of the meeting held on Wednesday 13 September 2017 at 2pm in The**  
**Council Chamber, The Town Hall, Katharine Street, Croydon CR0 1NX**

**DRAFT**

**Present:** Chair - Manju SHAHUL-HAMEED (Councillor)\*  
Vice-Chair - Dr Agnelo FERNANDES (NHS Croydon Clinical Commissioning Group)\*  
Alisa FLEMMING (Councillor - Cabinet Member for Children, Young People & Learning)\*  
Badsha QUADIR (Councillor)\*  
Barbara PEACOCK (Executive Director of People, Croydon Council)  
Callton YOUNG (Councillor)\*  
Jai JAYARAMAN (Healthwatch Croydon)\*  
Louisa WOODLEY (Councillor - Cabinet Member for Families, Health & Social Care)\*  
Mike BELL (Croydon Health Services NHS Trust)  
Rachel FLOWERS (Director of Public Health)  
Simon HALL (Councillor - Cabinet Member for Finance & Treasury)\*  
Yvette HOPLEY (Councillor)\*

(\*Voting members)

**Also present:** Councillor Maggie Mansell, Ashtaq Arain (Faiths Together in Croydon), Jack Bedeman (Public Health Registrar, LBC), Andrew Eyres (Chief Officer, CCG), Sarah Ireland (Director of Commissioning, Commercialism & Improvement, LBC), Steve Phaure (CEO, Croydon Voluntary Action), Stephen Warren (Director of Commissioning, CCG), Margot Rohan (Committee Manager, LBC)

**Absent:** Councillor Margaret Bird, Zoe Reed (South London & Maudsley NHS Foundation Trust)

**Apologies:** Councillor Margaret Bird

**A99/17 Election of Chair and confirmation of Vice-Chair**

Margot Rohan, Committee Manager, opened the meeting, requesting nominations for the Chair. There was one for Councillor Manju Shahul-Hameed, proposed by Councillor Simon Hall and seconded by Councillor Louisa Woodley.

Board members agreed and Councillor Manju Shahul-Hameed was duly elected Chair.

The Chair confirmed Dr Agnelo Fernandes as Vice-Chair, representing the Clinical Commissioning Group.

The members of the newly constituted Board then introduced themselves.

**A100/17 Minutes of the meeting held on Wednesday 5th April 2017**

**RESOLVED** that the minutes of the meeting held on 5 April 2017 were agreed as an accurate record, by those members of the Board who had been present at that meeting.

**A101/17 Disclosure of Interests**

There were no disclosures at this meeting.

**A102/17 Urgent Business (if any)**

There was none.

**A103/17 Exempt Items**

There were none.

**A104/17 Strategic Items:  
The new board and how it wants to work with the community and voluntary sector**

The Health and Wellbeing Board is a formal committee of the local authority, created by the Health and Social Care Act 2012, charged with promoting greater integration and partnership between bodies from the NHS and local government. It has a statutory duty, with clinical commissioning groups (CCGs), to produce a joint strategic needs assessment and a joint health and wellbeing strategy for the local population.

The April 2017 Local Government Association report 'The power of place' reported the increasing role of health and wellbeing boards to act as 'the anchors of place in a sea of Sustainability and Transformation Partnerships (STPs), integration and new models of care' (see attached).

The Chair introduced the report, pointing out the priorities of the Board:

- Progressing integration and devolution
- Reducing inequalities
- Increasing focus on prevention

With a priority around community and voluntary sector engagement and citizen voice as well as ensuring the priority of the Local Strategic Partnership (LSP) of children is also embedded into the work of the board, she welcomed Steve Phaure from Croydon Voluntary Action (CVA). The recommendation to add a member of

the CVA as a representative of the voluntary sector is going to General Purposes and Audit Committee on 20 September and, if ratified, he will join the Board at the October meeting.

Barbara Peacock, Executive Director of Place, elaborated further:

- Three priorities to be key
- The community and voluntary input is key
- The LSP priority of children has to be embedded in the work too
- How will this Board be different - how to engage the community to make the Board stronger

Cllr Yvette Hopley welcomed Cabinet Members back to the Board.

Mike Bell also endorsed the re-establishment of the Health & Wellbeing Board, to take a leadership role.

Steve Phaure thanked the Board for endorsing the addition of a CVA representative.

Cllr Alisa Flemming welcomed Dr Agnelo Fernandes as Vice-Chair.

Jai Jayaraman said he was looking forward to working with the Board and particularly colleagues in the voluntary sector.

The following points were highlighted by Board members:

- Bringing services together will improve the working of the Board
- Good workshops will work holistically together – need to have time away to develop the work of the Board
- There is a substantial transformation programme and the priorities in the paper have the best chance of moving forward
- Croydon has a young and old population, with fewer people in the middle
- Focusing on inequalities will lead to improvement in those communities which need it
- There is a need to work with the third sector to ensure people manage their own care better in the future – CVA has a good track record for articulating the community voice
- Need to work differently
- The voice of the child is important – need to look at how to meet needs of children.

The Chair confirmed that workshops will be held to see how to work as a Board, working with health professionals and communities in Croydon.

Having fully discussed the report and the issues raised, the Board endorsed the proposal of holding a workshop for developing the Health and Wellbeing strategy.

**A105/17 Review of the local strategic partnership and health and wellbeing board (including partnership group review)**

Barbara Peacock gave a verbal presentation:

- The Local Strategic Partnership (LSP) is the most senior partnership across Croydon with members including the CE of Council and CEs from across Croydon organisations
- The review is ongoing and will conclude at the end of September.
- The LSP agreed to sponsor young people as a priority for the next 18 months – starting with the Youth Congress
- Youth Congress was organised and arranged by young people and 3 key priorities were put forward:
  - Skills and training for employment
  - Mental health
  - Issues around feeling safe
- LSP would like the key partnership boards to sponsor as well
- Recommendation for Health & Wellbeing Board to take on board work around child mental health and wellbeing

Cllrs Alisa Flemming and Louisa Woodley attended the Youth Congress and were impressed by the young people of different ages and ethnicities. They were confident enough to speak out and form an agenda. Mental health needs a particular focus on young people to enable the opportunity to look at issues around jobs and finance.

Cllr Shahul-Hameed also summarised her experience at the Youth Congress and the importance of listening to young people.

A number of young people at the Congress wanted to create a roadshow to go to different parts of the borough. This could inform some of the work of the HWB.

Cllr Shahul-Hameed reminded Board members of the workshop on the Woodley Review on 20 September. She suggested inviting some young people to give input at the workshop on the HWB strategy.

**A106/17 Building on Integration and Devolution - My Vision of Croydon's Future**

Councillor Tony Newman, Leader of the Council, gave a verbal presentation, making the following points:

- The Health & Wellbeing Board needs to reflect on its role
- Strategic Transformation Plan (STP) – with NHS demands going up, there are even more pressures on budgets.
- There is a risk of having the same debate around healthcare, opening/closing hospitals, every few years. We need to move beyond this.

- Need to do things differently.
- Talking with colleagues in Manchester, which is on a similar scale, Croydon is one of the few boroughs sustaining health policy with a large population.
- Croydon has the scale and opportunity to look at how to provide differently - looking at how services can be devolved on more outcomes based basis, particularly to address health inequalities.
- Although his role is not operational control, Sadiq Kahn, Mayor of London, is keen to have more involvement with boroughs and how the health service devolves in years to come.
- In shaping the services for the health of the people of Croydon, it needs to be a true partnership between the Council and the NHS, with joint outcomes to see changes in the future.
- Croydon should begin to take forward discussions in a more public way, involving the voluntary sector and others as well as Council and health services.

The Leader concluded with a promise to come back to the Board at the end of 2017 or early 2018 to discuss the issue further.

Mike Bell fully endorsed the leadership position on this approach of driving improvements and inequalities. He announced that the CCG and Croydon NHS Trust has commissioned work looking at opportunities for integration of health and social care provision.

The Leader commented that discussions need to be more evidence based.

Councillor Simon Hall recommended that the over 65s work currently being progressed in the Outcome Based Commissioning programme will be able to inform the debate

The Leader stressed the need to reframe how we talk about the prevention agenda. A Prevention strategy is required.

The Chair, Councillor Shahul-Hameed, highlighted that the Board will be looking at integration as its highest priority.

Dr Agnelo Fernandes commented that there is now the opportunity to do things differently, working with the voluntary sector, setting an ambitious target and timeframe. Health & social care has to be more sustainable than now.

The Leader stressed the need for a Croydon first approach with strong cross-party co-operation. He made it clear that Croydon is working with the Mayor of London and NHS London. It is vital for Croydon to take the lead or someone will do it to us.

The Chair agreed that the Health & Wellbeing Strategy will come to

the next meeting and will incorporate all these views.

## **A107/17 Joint Strategic Needs Assessment (JSNA) key dataset 2017**

Rachel Flowers, Director of Public Health gave a Powerpoint presentation, stressing the importance of evidence based decisions and ensuring all members of the Board are familiar with the JSNA document.

- Key datasets - trying to make them more accessible
- Started producing little vignettes - Statistical bulletins (see example on slide 6)
- Croydon's population:
  - largest number of young people
  - second largest of working adults
  - third largest of people over 65
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- Monthly updates will be available
- Inequalities and demographic challenges - need to know where best to target
- Pharmaceutical Needs Assessment (PNA) is also a statutory requirement
- Previously the strategy had a wide range of priorities for action
- JSNA going forward will be evidence bases
- Health & Wellbeing Board workshop will provide soft granularity around what people are saying
- Looking at GP profiles
- Reconvening JSNA steering board to work with HWB

Issues raised by Board members:

- Not collectively agreed how to be targeting - which performance indicators to use
- Opportunity to move away from strategy and look at the data in a different way.
- Needs to be whole system approach.
- Those with the least voice don't get heard - people's voice is vital - particularly in terms of ill health and premature death.
- How can we get young people involved?
- Healthwatch gives intelligence on individual GP practices - how to match the data across the population.
- Part of task of CCG is to work with the Council to look at how to improve health intelligence.
- HWB needs to agree and prioritise where deep dives are in relation to JSNA.
- Contracts – what are the arrangements, particularly mental health? Better monitoring needed to measure exactly what is happening – where and how money is being spent.
- Health is complex and it is about the wider determinants of health such as employment, poor housing, living in fear
- How do we prevent ill health and help people to manage

health without decent homes etc?

- Where do substance issues go - HWB or Safeguarding boards or Safer Croydon board?
- Overarching themes for young people are safety, mental health, job and employment, leading to success.
- What are we doing to help young people gain that confidence?

The Chair stressed that the Health & Wellbeing Board wants to have workshops in the community to engage with the wider population; to talk to local people and get their views.

Rachel Flowers mentioned that there is a large evidence base about some interventions that work and those that don't. It requires between 12 weeks and a year before seeing changes in behaviour.

#### **A108/17 CCG and Council Commissioning intentions 2018/19 and Joint commissioning executive report**

The Joint Commissioning Executive (JCE) of the Clinical Commissioning Group (CCG) and the Council was established in 2015 to strengthen the effectiveness of joint commissioning within the Borough.

The report highlights the work being undertaken to develop joint commissioning intentions for 2018/21 that will focus on high impact opportunities, where there is the biggest potential to improve outcomes for residents, tackle high costs, or improve cost avoidance.

Andrew Eyres introduced the report and Stephen Warren elaborated:

- Successes over last year
- Work around children's services - taking forward
- Wider determinants to be factored into work
- Successes cover work around older people; integration agenda - healthy foods, improving discharge services - building blocks in place
- Disability services - moving accommodation into community based care
- Mental health - reduction in the number of bed days lost due to patients being delayed transfers of care and in the length of stay in mental health acute beds, with more people being effectively discharged into the community - more work to do but some improvements
- Separate piece of work around transformation opportunities. Need to look at how to pull everything together.

Sarah Ireland added that there will be a workshop for commissioners on how to move forward on 2nd October. There will be a detailed programme. We have started recommissioning with Healthwatch. There is rich data which we need to build into the process - user

view, community view etc. People's choices are central to the Council and work on integration.

The following issues were raised by the Board:

- Joint commissioning is incredibly helpful.
- The vast majority of women would like home birth – need to work together to respond to that choice.
- End of life care - majority would prefer to die at home. Need to improve real choice for people in Croydon.
- Need to explore the best use of personal budgets for young people.
- Are we making the best use of what we have? The McGinty report indicates we are not spending in the right place.
- People want to be healthy, independent, to live well and in comfort. We need to work with Healthwatch and others to get a more comprehensive take on what people want.
- Need for prevention not reaction - too many people in hospital where it could be avoided
- Need to get people out of institutions and back home - keep people well
- Opportunity for pooling resources to achieve outcomes wanted
- Improvement in the health and wellbeing of people is when you can't see the joins.

The Board endorsed the approach being taken by the Joint Commissioning Executive in strengthening its effectiveness and developing joint commissioning intentions that focus on high impact opportunities to improve outcomes for the people of Croydon.

**A109/17 Business Items:  
Strategic Transformation Plan (STP)**

Andrew Eyes gave a Powerpoint presentation, highlighting the following points:

- 5 STPs in London - partnership of individual organisations, CCGs, NHS and local authorities
- S W London STP is changing focus to prevention, getting people home from hospital quickly and supporting people in their own homes
- Looking at boundaries
- Focus of STP is around local transformation
- 4 areas of which Croydon is one
- 'STP is what we make it'
- Working on:
  - Urgent and emergency care
  - Cancer
  - Primary Care



- Mental health
- Integrated community care
- Planned care
- Maternity
- Digital programme
- Workforce
- Estates
- Finance
- How to modernise?
- How to engage with people?
- How to build the workforce?
- Communication & engagement plan
- All hospitals in SW London will be needed - to calm the fear of closures.

The Board noted the points raised in the presentation.

**A110/17 Better Care Fund (BCF) and Integration and Better Care Fund (iBCF)**

There has been improvement in permanent admissions for older people and non-elective admissions against target, whilst there is underperformance on the proportion of older people at home 91 days after discharge, and underperformance on delayed transfers of care from hospital. The report summarises the latest performance position against the BCF metrics for 2017/18 to date and the BCF finance breakdown for months 1-4. It also summarises the proposed iBCF spend plan for meeting adult social care needs, supporting hospital discharge, other hospital discharge projects, and stabilising the social care provider market.

Barbara Peacock introduced the report:

- The are now two funding streams - BCF and additional fund iBCF
- Money for actively encouraging health and social care to work together
- Health & Wellbeing Board is the point where senior officials come together in the health system and local authority
- Some of the changes needed are not easy
- This is money to produce change and to recognise the great pressures the local authority is under, with an ageing population and ever-reducing core funding
- Included in the report:
  - Performance data
  - Mitigating actions
  - Financial summary

Mike Bell: We would welcome any Members of the Board to have a tour of the hospital.

The Board noted the performance against Better Care Fund metrics for 2017/18 to date. The high level breakdown of the BCF and the iBCF schedule will be reviewed and finalised by the BCF Executive Group.

The meeting ended at 15:54pm.