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## HEALTH AND WELLBEING BOARD

27 JUNE 2023

(6.15 pm - 8.17 pm)

PRESENT Cllr Peter McCabe (Chair), Cllr Jenifer Goad, Cllr Brenda Fraser, Mark Creelman, John Morgan, Dr Laura Jarvie, Dr Karen Worthington, Sarah Goad, Dan Jones, Anna Huk (Young Inspector), Anthony Molloy.

ALSO ATTENDING Graham Terry, Phil Howell, Annette Bunka, Heather Begg, Priya Samuels, Gloria Jeyaraj, Julia Groom, Barry Causer, Jayde Watts

PRESENT ONLINE Jennifer Lewis-Anthony

### 1 WELCOME AND APOLOGIES FOR ABSENCE (Agenda Item 1)

The Chair expressed his thanks to Clarissa Larsen and Dr Dagmar Zeuner, who have now left the organisation, for their support and dedication to the Health and Wellbeing Board.

The Chair also welcomed Dan Jones, Executive Director of Environment, Civic Pride and Climate to the Health and Wellbeing Board.

Apologies were given by Dr Sy Ganesaratnam and Jane McSherry.

### 2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

None

### 3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

RESOLVED: That the minutes of the meeting held on 28 March 2023 were agreed as an accurate record.

The chair agreed to move Item 9 to the start of the agenda

### 4 BEAT THE STREET (Agenda Item 4)

Barry Causer (Public Health Lead for Adults, Health Improvement and Health Protection) introduced the item. Barry expressed how Beat the Street captured the imagination across the borough which resulted in people speaking more about sport, physical activity, travel and exploring communities.

Beat the Street gave Merton a good foundation to build on towards Actively Merton, increased physical activity and social activity levels. It was also important to look at the opportunities which being The Borough of Sport provided for residents to be more active within the borough.

The Beat the Street report was now complete and would be shared with member of the board after the meeting. Some of the highlights of the report were as follows:

- 10% of Merton took part in the game, approximately 20,000 residents during the six week period.
- 38% of those who took part in the game self-reported to be physically inactive before Beat the Street, of which 48% became more active.
- There was an increased proportion of adults and children meeting the Chief Medical Officer recommendations.
- Behaviour change was highest amongst women and girls and within wards in the East of the borough.

There were also mental health and social benefits to the increase in physical activity, with an increase in the number of people with improved resilience. This led to an increased bounce back ability among residents.

Overall the report was positive with colleagues wanting to replicate and learn from the Merton approach.

In response to questions, the following was stated:

- Evidence behind how often Beat the Street should take place was being reviewed and would be brought back to the committee.
- Schools across Merton were fabulous and it was great to see a SEN school win in their borough.

**RESOLVED:** That the Board noted the update.

## 5 HEALTH AND WELLBEING BOARD ROLLING PRIORITY 2023/24 – OUTLINE ACTION PLAN (Agenda Item 5)

Julia Groom (Consultant in Public Health) and Barry Causer (Public Health Lead for Adults, Health Improvement and Health Protection) introduced the report.

Julia reminded members it was agreed at the last meeting that the board would focus on a whole systems approach for tackling air pollution, tobacco and respiratory disease, as well as look at actions which supported a healthy workplace, particularly around active travel.

There was evidence around the impact of air pollution, tobacco and respiratory health nationally and locally. The report highlighted some of the following evidence:

- The Chief Medical Officers Annual Report 2022 focussed on evidence of air pollution and acknowledged the improvement of air pollution and air quality as well as solutions to take this further including indoor air quality.
- Locally, the latest Merton Annual Health Report focussed on the co-benefits of climate action. This was specifically around transport emissions and its direct impact on health conditions, health inequalities with those living in the 20 most deprived neighbourhoods and 20% of the population who were non-white that experienced higher concentrations of air pollution whilst having low car ownership.
- Over 20% of adults were physically inactive in Merton which highlighted the importance of active travel.
- The Merton Story gave an overview on the wellbeing and needs of the borough and highlighted that 1 in 7 Merton residents still smoked with a higher number of smokers in the East of the borough compare to the rest.
- Chronic Obstructive Pulmonary Disease (COPD) and Asthma were the main focus when looking at respiratory diseases. 9 out of 10 cases of COPD were linked to smoking and just under 5% of Merton residents are recorded as having asthma, with a higher prevalence in the East of the borough.
- The mayor has set a target for 80% of travel to be active or sustainable. At present Merton was at 61% of which 30% was walking and only 2% cycling.
- Merton routinely monitored air quality through its air quality status report, which showed Merton as exceeding government targets. It's estimated that between 54-100 people in Merton died due to air pollution.

Julia confirmed that the Air Quality Action Plan in Merton would be reviewed and updated shortly but there was a lot of activity taking place around auditing air quality in schools and school streets, expanding electric vehicle charging, working with TfL to roll out ULEZ as well as refreshing the walking and cycling strategy for the borough and developing a curb side strategy.

The NHS Green Plan set out ambitious targets for active travel for staff and patients.

Merton had a tobacco control steering group and a southwest london respiratory group led by the ICB, which had activities taking place around respiratory disease.

It was proposed that the skills, strength and drive of HWBB was used to take a whole systems approach to look at the issues raised together.

Barry Causer outlined the proposal and referred to point 4.3 in the report which highlighted four key themes. These themes were Holistic Support and Pathways, Individual and Community Prevention, Healthy Place and Workforce and Awareness, Learning and Collaboration.

The report detailed options and the potential to work together on the four themes. For Holistic Support and Pathway there was the Love Clean Air Website and air text which when registered, you would receive a text if the air quality in London was poor. Greener inhalers had also been introduced which significantly reduced carbon emissions whilst providing the same drug and dose whilst also being more cost effective.

To address Individual and Community Prevention, which specifically addressed smoking, they were working to have outreach and engagement across the borough to raise awareness of services available within the borough. Vaping was 90% less harmful than smoking and helped people over 18 to stop smoking, but it was important to remember that it was not harmless and not for young people under 18.

Healthy Place and Workforce related to active travel. The council were developing a walking and cycling plan and the Mayor published a Good Work Standard which asked that every London employer worked towards the scheme.

A pilot was about to start to address schools, air quality and asthma which was an innovative approach to monitoring air quality and provided important research and learning.

For Awareness, Learning and Collaboration the communications team continued to work closely with the community. The combined reach of the organisation within the board to raise awareness would be a priority for the board and it remained important to provide training for frontline staff.

In response to questions, the following was stated:

- As part of the pilot, the on-street engagement team received Level 1 training in Stop Smoking Advice which allowed effective brief interventions. The pilot had begun and would run until the end of March 2024, with analysis taking place in the new year.
- A task and finish group were proposed within the papers to ensure there was an ongoing process of feeding back and informing people.

Dan Jon, Director of Environment, Civic Pride and Climate informed the board of the following work which complimented the board.

To support and improve our green infrastructure, mitigate existing emissions and improve air quality, more trees will be planted. There was a plan in place to improve parks and open spaces which helped with CO2 capture and provided spaces for residents to enjoy and get active as part of the borough of sport plan.

More EV charging points would be provided within the borough alongside a commissioned EV charging strategy to help meet the demand in EV cars within the Borough of London.

**RESOLVED:** That the Board noted the report.

Heather Begg (Commissioning Officer, Adult social Care) introduced the paper which had been circulated to members.

There were now four task and finish groups which focussed on Young Carers and Parent Carers Pathway, NHS Commitment to Carers Programme, Carers of Adult Pathways and Website Review.

More representation on the Implementation Board was needed, specifically from young carers.

Carers Support Merton were commissioned for specific work looking at ways to support young carers and planned to recommission young carers services from April 2024.

The current contract with Carers Support Merton and the Adults Grant Agreement would end in March 2024.

There was an improvement in knowledge of the support available for carers locally which was demonstrated by the increased referrals to partner agencies.

St Georges and Kingston Hospital continued to look at ways to support carers with the discharge process using the Hospital Discharge Toolkit.

The six-month project with Carers Support Merton and St Georges Hospital was paused to allow for an evaluation and rethink on how to get the best value.

It was important that support for carers of adult pathways was timely, proportionate and appropriate to their needs. Processes were being reviewed to create a more standardised approach across all partners to ensure they could continue to support the growing demand.

As part of the Website Review, work was completed with carers to help identify what was needed on the Merton Council Website. Information on employment and training, carers entitlements, short breaks to give carers respite, local health and wellbeing support and young carers support had been improved on the website.

The Multi-Agency Carers Implementation board met every two months and would be looking at Carers Cards. Once implemented, more information to be provided.

In response to questions, the following was stated:

- The carers card helped to identify individuals as carers, particularly young carers. They also offered discounts as well as a contingency plan. Historically this was physical card but they are exploring putting these on apps.
- Some carers received free bus travel but not all. The Assisted Travel Policy was being reviewed and it would be useful to have something in there for informal carers also.

**RESOLVED:** That the Board noted the report.

## 7 RIGHT CARE RIGHT PERSON (Agenda Item 7)

Graham Terry (Interim Assistant Director Adult Social Care, Community and Housing) and Jennifer Lewis-Anthony (Associate Director) introduced the report.

A letter from the Met Commissioner, Sir Mark Rowley was received on 24<sup>th</sup> May 2023 which advised that from the end of April the police would introduce Right Care Right Person. The Police were concerned with the growth in different mental health scenarios that they were not skilled to deal with and subsequently took resources away from policing.

This approach was rolled out in Humberside in 2019 and was found to be beneficially across services. The call handlers would triage the requests received and decide whether the police were best to respond.

The police sought legal advice which concluded that police duties were more specific and cited human rights duties and argued for the police to draw back from some of the things that they were asked to be involved with.

Across the board there was recognition of the Police spending too long on psychiatric emergencies or crisis but there was a concern around implementing this approach by August. Another concern was that there was no analysis which compared Humberside to London which resulted in questions on whether the same approach would fit with London. Initiatives to support the Police were already in place or being worked on so an opportunity to work alongside the police to better understand the model and how this could best be introduced in London, working to a realistic timeframe would be preferred.

If this model was introduced, the police would no longer carry out welfare checks which would have implications across agencies. This model could also have an adverse effect on Mental Health Act Assessments where a Police presence currently supported the process.

Cllr Peter McCabe, Chair of the Health and Wellbeing Board, proposed writing to the Commissioner to reiterate the challenge of meeting the given timetable. The board agreed to this proposal.

Priya Samuels (Integrated Partnership Manager for Southwest London St Georges Health Trust) informed the committee that the Trust had published a response which was available on their website. A Southwest London five borough meeting with Metropolitan police colleagues was arranged for the end of July. Representation from the Council at the pre meeting would be welcomed to ensure all views were heard.

**RESOLVED:** That the Board noted the report.

## 8 ICP STRATEGY AND ICB JOINT FORWARD PLAN (Agenda Item 8)

Mark Creelman (Local Executive Director) noted the report which had been circulated as part of the agenda.

Mark confirmed that there was a ICP strategy workshop held four weeks prior which brought 300 stakeholders together to turn the strategy into action plans.

The ICB Joint Forward Plan was now available online and would be circulated to members.

Mark informed the board that Cllr McCabe received a copy of the report prior to publication and if the Board agreed, asked that Cllr McCabe submitted a comment which could be included in the strategy, which would then be presented to the Board in September. Cllr McCabe agreed to this action.

**RESOLVED:** That the Board noted the report

## 9 NHS PROPOSAL FOR PAEDIATRIC CANCER CARE IN THE SOUTH EAST (Agenda Item 9)

Ralph Michell, Director of Strategy and Sijo Francis, Consultant Neonatologist and Divisional Chair for Children's, Women's, Diagnostics, Therapies, Outpatients, Pharmacy, Critical Care gave an update on changes made by NHS England on Paediatric Cancer Services.

St Georges and the Royal Marsden had one centre which provided specialist treatment for South London, Kent, Surrey and Sussex.

The challenge of having two hospitals was that when a child became very sick they had to be transferred to St Georges, which clinicians strongly felt was not the right set up and would benefit from all services being in one site. For that reason, NHS England decided that the service should move to St Georges or Evelina in central London. This decision would shortly go to public consultation due to the impact on children and families as well as St Georges and the Royal Marsden.

For the last 25 years, St Georges provided children's cancer services for the more complex patients of both St Georges and the Royal Marsden. Such services were a significant component for the services developed for specialised care.

As Oncology formed a significant component of their workload, St Georges were concerned that if the children's cancer service was move from St Georges, the specialist services would also have to move. This would have a detrimental impact on

them being able to provide such services in the future and impact children within their regions.

The expertise developed at St Georges was an important factor for the quality of care provided. St Georges proposed the only model where paediatric neurosurgery and oncology surgery would be provided by specialist's on site, other options would have a reduced ability to provide such services due to the lack of paediatric specialties.

St Georges developed a working relationship with the Royal Marsden and although the Royal Marsden could not host a children's principal treatment centre, they had developed both clinical and research expertise in children's cancer. Based on this and the location of both sites, they believed retaining the services at St Georges provided the greatest opportunity for the relationships built to be maintained and the research carried out at the Royal Marsden to continue.

The strong estates plan developed was considered deliverable within the required timeframe and financial constraints, which positively impacted children with cancer and improved the overall estate and care provided.

NHS England attended the Southwest London and Surrey Joint Health Overview and Scrutiny Committee to present their plans for consultation. This required further work to ensure that the public was given a full picture to be able to make an informed choice. The consultation period should start in September for a period of 12 weeks before a final decision was made in the winter.

In response to questions, the following was stated:

- The consultation was originally planned to take place over the summer but NHS England felt that it would be better to take more time and start the consultation in September.
- The chair of the Health and Wellbeing Board agreed to write a letter to express the views of local residents.

**RESOLVED:** That the Board noted the report.

## 10 BETTER CARE FUND (BCF) PLAN 2023-25 (Agenda Item 10)

Annette Bunka (Assistant Head of Transformation Integrated Care) introduced the report.

Annette confirmed that the papers gave a summary of what the Better Care Fund was and how everyone could work together in a single pool budget. The focus was to have joint services and ringfenced budgets to focus on specific funding for certain areas.



The papers provided a summary of the funding available which, since last year, included the adult social care discharge fund.

Although they have been asked to provide a two-year plan, the money for 2024/2025 still needed to be finalised.

This was the first time that a multi-year settlement had been agreed. This provided an opportunity to look across the three core themes and gain further understanding on the impact of all the schemes within the Better Care Fund and whether they were working effectively together.

**RESOLVED:** That the Board noted the report

#### 11 HWBB YOUNG INSPECTOR PILOT (Agenda Item 11)

The chair thanked Anna for her support thus far and agreed to the recommendation to extend Anna's time on the Board.

**RESOLVED:** That the Board agreed the recommendations