Agenda Item 3

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HEALTH AND WELLBEING BOARD 27 NOVEMBER 2018

(6.15 pm - 7.34 pm)

PRESENT Councillor Tobin Byers - Chair

Dr Andrew Murray - Vice Chair and Chair of Merton CCG

Councillor Janice Howard,

Councillor Kelly Braund - Cabinet Member for Children's

Services

Hannah Doody - Director of Community and Housing

Rachael Wardell – Director of Children, Schools and Families

Chris Lee – Director of Environment and REgeneration

Dr Dagmar Zeuner - Director of Public Health

Dr Doug Hing - Merton CCG

James Blythe – Managing Director of Merton and Wandsworth

CCGs

Lyla Adwan-Kamara -Community Engagement Network

Brian Dillon – Merton Healthwatch

Paul Angeli - Head of Social Care & Youth Inclusion

1 APOLOGIES FOR ABSENCE (Agenda Item 1)

Apologies were received from Dr Andrew Otley, Khadiru Mahdi and Dave Curtis

2 DECLARATIONS OF PECUNIARY INTEREST (Agenda Item 2)

There were no declarations of pecuniary interest.

3 MINUTES OF THE PREVIOUS MEETING (Agenda Item 3)

The Chair informed the Board that Dr Karen Worthington had left the Board. The Board wished to pass on its thanks for all her work with the Board.

Dr Andrew Otley will be taking Karen's place on the Board. He had given his apologies for this meeting but will be welcomed as a new member at the January meeting.

RESOLVED: The minutes of the meeting held on 26 June 2018 were agreed as a true record

4 ITHRIVE (Agenda Item 4)

The Head of Social Care & Youth Inclusion presented his report on implementing the iTHRIVE model in Merton which is currently being rolled out across 70 locations in England. The iThrive Framework, provides an integrated, person centred and needs led approach to delivering mental health services to children, young people and their families.

The Vice Chair welcomed the iTHRIVE model and the principles it is based on; removing barriers and focusing on prevention. He asked about neighbouring

borough approaches and whether there was a risk of varying terminology. The Head of Social Care & Youth Inclusion explained that subject to the HWBBs agreement of the report consultation would take place across the STP including stakeholders and young people themselves.

The Cabinet Member for Children's Services reminded the Board that one of the main priorities of the Merton Youth Parliament was mental health and that the iTHRIVE approach was welcome, and she was sure that Youth Parliament would want to be involved in the consultation.

Board members welcomed the iTHRIVE framework using language that children and parents could understand and helping to remove the stigma sometimes associated with Mental Health.

The Director of Public Health welcomed the iTHRIVE framework and said that it would need to be adapted to meet local needs but it provided a good starting point and was underpinned by evidence.

The Director of Children Schools and Families commented that there was congruence between the iTHRIVE approach and the feedback from the recent Merton Health and Care Plan deliberative design event so it seemed likely that there would be a positive response to the consultation.

The Board noted that the model will be consulted on in early 2019 and, depending on final timescales, could come back to the HWBB in March 2019

RESOLVED

That HWBB agree to:

- A. Adopt the THRIVE Framework and implementing iTHRIVE in Merton
- B. Members of the HWBB Championing this model going forward

5 MSCB ANNUAL REPORT (Agenda Item 5)

The Director of Children School and Families introduced the Merton Safeguarding Children (MSCB) Annual Report. She asked members to note the important work the MSCB does; in working with partners, delivering scrutiny, in driving the priority of safeguarding and focusing on performance data. The MSCB was evaluated by OFSTED as Outstanding with no recommendations for improvement but it has not been complacent and has continued to improve.

The Board noted that the 'Think Family' approach (see the child – see the adult; see the adult - see the child) is a key priority of the MSCB. A question was asked about the support that might be available for disabled parents. The Board noted that there was no specific answer because every case was different but the Think Family Approach should ensure that when an adult is supported support is also offered to the child. There was a request for a link to the Mental Health protocol.

As currently constituted the MSCB must change to conform with new legislation. Work is underway to have the necessary changes complete ahead of deadline of April 2019.

The CCG supported this report and note the proactive approach the Board takes to for example, inspections, and hopes this effective working relationship will continue.

The Board thanked Keith Makin and the Children's Safeguarding Board Team for all their work and for their report.

RESOLVED

The Health and Wellbeing Board agreed to:

- A. To note the MSCB annual report 2017/18.
- B. Continue to contribute to the MSCB priorities and to ensure that safeguarding children is a golden thread that is maintained through all the work of the Health and Wellbeing Board.

6 SUICIDE PREVENTION FRAMEWORK (Agenda Item 6)

The Director of Public Health presented her report on the Suicide Prevention Framework.

Cllr Janice Howard welcomed the report on this important issue and asked how stakeholders were identified. It was confirmed that future stakeholders can be broadened through the proposed Task Group.

The Vice Chair said the actions look sensible but is interested in looking at root the causes of suicide in Merton especially relating to the crucial need for joined up interagency working and good communication between providers.

The Director of Environment and Regeneration found it an interesting and shocking report. Though Environment and Regeneration was not part of the task and finish group the read across to their work is clear.

The Managing Director of Merton CCG supported the report, had heard of the meeting with LMC and can see comments have fed back. He asked if, as an early priority, can we explore the new primary care mental health service and that people are accessing services early enough. He also commented that social prescribers and connectors will come into contact with isolated people from high risk groups and this is an opportunity for prevention.

The Director of Community and Housing commented that it is very important to raise awareness throughout the borough for example through training on what we should do when someone is at risk to raise vigilance.

The Board commented on the difference between men and women at risk and opportunities to target these people in the work place. For example, health work force (e.g. nurses) were keen to make suicide awareness / prevention an explicit part of mental wellbeing promotion in the workplace.

Thanks were given to Dagmar and her team and it was asked that the Framework report back in twelve months.

RESOLVED

The Health and Wellbeing Board agreed to:

- A. Consider and endorse the Suicide Prevention Framework 2018-23 and the first year's action plan.
- B. Note involvement of partners to date, including the voluntary sector, CCG and Council, in the Task and Finish Group. To note the role of the Suicide Prevention Forum, the Mental Health Programme Delivery Group and CAMHS Partnership Board which will have oversight of the Suicide Prevention Framework.
- C. Consider opportunities for members to champion the Suicide Prevention Framework objectives and actions as system leaders.

7 HEALTH AND WELLBEING BOARD STRATEGY (Agenda Item 7)

The Director of Public Health presented her report that provided an update on the refresh of the Merton Health and Wellbeing Strategy 2019-24. The Board noted that the four key themes will be; Start Well, Live Well, Age Well, in a Healthy Place.

Examples of healthy place in current work include parking charges and proposed Superzones around schools seeking to create an environment where the healthy choice is the easy choice.

There will be an engagement workshop on each of the themes led by a HWBB member so that the HWBB owns the strategy and develop the priorities jointly with community connectors and stakeholders are developing the themes.

Cllr Kelly Braund and Rachael Wardell fed back on the first Start Well workshop as having good participation and strong engagement strong. There was a clear link between start well and healthy place was clear and it would be helpful to invite Start Well workshop participants to the Healthy Place workshop.

Engagement will complete in February 2019 and draft priorities will be brought to the Health and Wellbeing Board in March with draft strategy and launch later that year.

RESOLVED

The Health and Wellbeing board agreed to:

- A. Note the continuing refresh of the Merton Health and Wellbeing Strategy 2019 24.
- B. Note the links and synergies between the Health and Wellbeing Strategy, the Merton Health and Care Plan and other strategies.
- 8 LOCAL PLAN (Agenda Item 8)

The Director of Environment and Regeneration presented his report on The Local Plan. He explained that the Local Plan will be a Development Planning Document that will set policies for neighbourhoods in Merton and that it promotes the Health in All Policies approach. He encouraged all HWBB members to take part in the consultation and will circulate a link.

He was asked if it was possible to control fast food outlets and betting shops near to Schools, and answered that there were only limited powers to do this. He was then asked about Air Quality and what is considered for new developments. The Director replied that there was a huge move to encourage more sustainable transport by building car free cycle infrastructure, encouraging cycling and development of the new parking strategy.

RESOLVED:

That the Health and Wellbeing Board Participate in the draft Local Plan consultation which will finish on 6th January 2019 www.merton.gov.uk/newlocalplan

9 MERTON HEALTH AND CARE PLAN & COMMISSIONING INTENTIONS 2019/20 (Agenda Item 9)

NOTE: This item was withdrawn from the agenda and replaced by items 12 and 13

10 HEALTH PROTECTION PROTOCOL (Agenda Item 10)

The Director of Public Health presented her report on the Health Protection Oversight Function, and noted that oversight of the local health protection system was a statutory function, and the Health Protection Oversight Protocol was would help to deliver in these duties.

The Chair asked about childhood immunisation and what can be done to increase uptake. The Director of Public Health replied that PHE and NHSE, which have responsibility for immunisation, are invited annually to Health Overview and Scrutiny and it was important to use as much local knowledge as possible to support them. The councils Communication team and the CCG have supported social marketing programmes on the immunisation programme and where necessary concerns can be escalated, as has happened on the low uptake of cervical screening.

The Director of Public Health was asked about Business Contingency Planning and if this should be used in partners' own polices. She replied that it was for partners to decide what was relevant for their own organisation, particularly for Health care partners.

The Director of Communities and Housing said that it was very useful to have Winter Planning built into contingency plans.

RESOLVED:

- A. The Board noted the report
- B. Board members will consider how this approach might be useful to their own organisations, and whether they would benefit from any further information on the oversight function or feedback on its operation
- 11 FUTURE DATES OF HWBB AND DEMENTIA FRIENDS TRAINING (Agenda Item 11)

The Chair announced the following as the proposed dates for HWBB 2019-2020. (Note: these dates are to be approved by Council in February 2019). All dates are Tuesdays and the meeting will start at 18.15:

25 June 2019 8 October 2019 26 November 2019 28 January 2020 24 March 2020

12 MERTON HEALTH AND CARE TOGETHER (Agenda Item 12)

The Managing Director of Merton and Wandsworth CCGs presented his report the Merton Health and Care Together programme. The Board noted the additional detail contained within the programme since it had last been presented to the Board in June 2018. The Board noted that the priority areas had been tested at the Health and Care Plan design event in November

The first initiative of the Merton Health and Care Together is an integrated single point of access for people leaving hospital this winter. The Director of Community and Housing added that it was important that this initiative was piloted this winter and that it would be welcomed by the acute hospitals. She said that the teams from CLCH and the social work teams were ready. She also asked the Board to note that the Government Green Paper on Health and Social Care and the NHS 10 year plan were still awaited.

The Director of Children, Schools and Families explained that no children or young people were able to be involved in the Health and Care Plan event, but that some additional events will be held to ensure that their voices are heard. She explained that the pathways to adulthood transition is the least well understood and is about understanding that there should not be a sharp cut-off at 18. This work would be about the wellbeing of all those in late adolescence/early adulthood.

The Managing Director of Merton and Wandsworth CCGs was asked if there were shared priorities across South West London . He replied where possible yes, but there are differences across and between boroughs and implementation needs to be locally wired. The Director of Public Health agreed with this approach.

A draft Local Health and Care Plan will be brought to the HWBB in January 2019.

RESOLVED

The Health and Wellbeing Board agreed to note the progress on Merton Health and Care Together (MHCT)

13 MERTON CCG COMMISSIONING INTENTIONS (Agenda Item 13)

The Chief Executive of Merton and Wandsworth CCG presented his report on the CCG Commissioning Intentions 2019/20. He reminded the Board that this is an annual process by the CCG, and although there is some continuity there is a slightly different context this year with the development of Local Health and Care Plans. Some areas work across a wider area, for example, acute configuration and mental health services which are summarised in the slide set.

The Director of Children, Schools and Families noted there are currently no intentions relating to the Pathway into Adulthood approach. She would like to see continuity of services for those beyond 18 who are already accessing a service to be open to consideration.

James Blythe confirmed that this is now a priority for Merton Health and Care Together so he would anticipate they will look at when areas for focus are clearer.

RESOLVED

A. The Health and Wellbeing Board notes the commissioning intentions, in the context of Merton Health and Care Together, pending further developments and quantification of benefits, as set out in the report and annexe.

