MINUTES

Meeting: London Health Board
Date: Tuesday 18 December 2018
Time: 11.00 am
Place: City Hall, The Queens Walk, London SE1 2AA

Copies of the minutes may be found at:
http://www.london.gov.uk/who-runs-london/the-london-assembly/meetings/whole-assembly

Members present:
Sadiq Khan, Mayor of London (Chair)
Dr Tom Coffey, Mayoral Health Advisor
Professor Jane Cummings, Director, NHS England, London
Professor Yvonne Doyle, Regional Director, Public Health England
Daniel Elkeles, Chief Executive, Epsom and St Helier Foundation Trust
Sir Sam Everington OBE Chair, London-wide Clinical Commissioning Council
Philip Glanville, Mayor, London Borough of Hackney
Claire Murdoch, Cavendish Square Group (London Mental Health Trusts)
Cllr Ray Puddifoot, Leader, London Borough of Hillingdon
Cllr Danny Thorpe Leader, Royal Borough of Greenwich
Cllr Richard Watts, Leader, London Borough of Islington

Apologies:
Cllr Ruth Dombey, Leader, London Borough of Sutton

In attendance:
Lynne Abrams, Interim Head of Services and Commissioning, MOPAC
Nick Bowes, Mayoral Director for Policy, GLA
Tristan Brice, Programme Manager, London ADASS
John Brouder, Chief Executive, NELFT
Una Carney, Head of Partnership, Communications and Engagement, Healthy London Partnership
Sally Copley, Director of Policy, Campaigns and Partnerships Alzheimer's Society
Shaun Danielli, Healthy London Partnership
Bernie Flaherty, ADASS Dementia Lead
Welcome, Introductions and Apologies (Item 1)

1.1 The Chair welcomed attendees to the meeting, including new Members Mayor Philip Glanville and Sir Sam Everington OBE. Cllr Danny Thorpe, who was attending his first meeting, Mary Harpley, attending her first LHB meeting as GLA’s Chief Officer, and John Brouder, who would be replacing Claire Murdoch as member from the next meeting, were also welcomed.

1.2 The Chair noted that the meeting was the first London Health Board meeting to be webcast as part of new transparency arrangements.

1.3 Professor Jane Cummings and Claire Murdoch who were attending their last meeting as Members, were thanked for their work and contributions during their time on the Board.

1.4 Apologies for absence were received from Cllr Ruth Dombey.

Declarations of Interest (Item 2)

2.1 There were no declarations of interest.

Minutes of the Previous Meeting (Item 3)

3.1 DECISION:
The minutes of the previous meeting were agreed as an accurate record.

Matters and Actions Arising (Item 4)

4.1 The Board received a report setting out completed and outstanding actions arising from previous meetings.
4.2 DECISION:
The Board noted the update.

4a Update report - Changes to membership, and measures to Improve Transparency (Item 4a)

4.3 Dr Tom Coffey introduced a paper setting out recent changes to membership of the Board and measures to increase the transparency of the Board’s proceedings. It was noted that Sir Sam Everington OBE replaced former member Dr Marc Rowland, and that John Brouder who was in attendance, would be replacing Claire Murdoch as member from the next meeting in April. It was also noted that additional London Councils’ members Mayor Philip Glanville and Cllr Ruth Dombey had joined the Board to reflect the changes in political leadership following the May local council elections and to more effectively engage the health and care sub-regions.

4.4 The Board noted that the revised draft terms of reference reflected minor updates and amendments to reflect the Board’s new membership. Dr Coffey suggested that the last two bullets of the Purpose section of the terms of reference be merged, which was duly agreed. [Action: Secretariat]

4.5 London Councils’ members requested that agenda papers for the Board be circulated 7 days before the meeting and published on the GLA website. This was duly agreed. [Action: Secretariat]

4.6 DECISIONS:
   a) That the revised membership of the Board be noted;
   b) That the updated terms of reference be agreed; and
   c) The work to improve the transparency of the Board be noted.

4b Update report - Mental Health in Schools (Item 4b)

4.7 Professor Oliver Shanley and Vicky Hobart introduced the report which provided an update on the progress of the mental health in schools project. The Board noted that a survey and mapping exercise across local authorities, Clinical Commissioning Groups (CCGs) and the NHS Mental Health Provider Trusts had received responses from 27 out of 33 local authority areas, resulting in an increase in the quantity and quality of information available of what mental health activity is taking place within schools. Other positive developments included the development of a self-assessment tool for schools and CCGs to assess the current knowledge and development of services within schools, the launch of NHS apps, the promotion of the ‘Good Thinking’ tool, and the launch of a Mental Health in Schools online toolkit providing practical advice to schools. It was further noted that mental health in schools is now supported within Local Transformation Plans.
4.8 There was discussion regarding the progress amongst London CCGs applying to become trailblazer sites for the development of mental health support teams (MHSTs) in 2019, which would develop new services across a proportion of schools in their area. The Board noted that an announcement was expected soon, and that Healthy London Partnership would have a role to ensure effective implementation and ensure wider learning and dissemination of best practice is shared to the schools and colleges which are not involved in a MHS pilot.

4.9 Board members welcomed the initiative and provided input on the proposals. In response to a query it was noted that the trailblazer initiative could be re-named to better resonate with schools. London Councils queried how local authorities would be involved in the trailblazer pilots and sought clarity about the criteria that would be applied to decide where the pilot sites would be. It was noted that a key criterion for determining the pilot sites was the strength of local partnerships between CCGs, provider organisations, schools and local government. It was further noted that an announcement on the location of the sites was expected in the near future. The Board would be advised of the successful applicants and provided with an update on how best practice from the pilots will be more widely disseminated. Regarding the proposal to prioritise transformation funding to support future work in this area, a question was raised as to how it would be possible to agree this given that London still did not know what funding would be available in 2019/20 and what the competing priorities might be.

[Action: Oliver Shanley/ Vicky Hobart]

4.10 There was discussion regarding the importance of recognising that physical and mental health are intrinsically linked. Board members noted that there is currently no requirement for school governing bodies to have a representative with mental health experience, and that this would be a positive development. It was also suggested that the existence of comparative data and creation of a dashboard could help drive up the quality of services. Officers agreed to discuss these ideas with the Department for Education.

[Action: Vicky Hobart]

4.11 The Board agreed that a further update report be brought back to the Board in six months' time.

4.12 DECISION
That the report and discussion be noted.

4c Update report - London Health Inequalities Strategy (Item 4c)

4.13 Professor Yvonne Doyle introduced the report which provided an update on progress since the launch of the London Health Inequalities Strategy (HIS) in October 2018, including an overview of the five themes of the Strategy, the importance of a partnership approach, the implementation plan, and governance. The Board was invited to consider how it could ensure the successful implementation of the Strategy.
4.14 The Board noted that the London Prevention Partnership Board (a sub-board of the LHB) which was supporting the mobilisation of the strategy, had agreed to nominate officers in their organisations to act as ‘mobilisers’ of the HIS. Officers agreed to provide London Councils’ members with further detail about the role of the mobilisers in order to ensure that they nominate an appropriate person.  

[Action: Prof Yvonne Doyle]

4.15 DECISION:
That the report and discussion be noted.

4d Update report - Violence Prevention: A Public Health Approach (Item 4d)

4.16 Vicky Hobart and Lynne Abrams presented an update report on the work of the Violence Reduction Unit (VRU) established in September 2018, including an overview of a scoping paper commissioned by the GLA and MOPAC to inform how a public health approach could be used to progress efforts to prevent and reduce serious violence, with a focus on young people aged under 25. This included a data pack, and an outline of approaches to violence prevention.

4.17 It was noted that the VRU Reference Group was drawing on the experience and views of a wide group of stakeholders including representatives from the Scottish VRU, community representatives, faith leaders, education representatives, health leads, police and local authorities. The board noted there was a strong focus on preventative measures, early intervention and tackling the root causes of the problem, drawing strongly on local community input. Mobilisation of the VRU was under development, including the appointment of a VRU Director in January 2019 and the organisation of workshops, two of which had already been held. Other work under way included a Community Youth Involvement programme, work to focus on domestic violence, and the upcoming publication by Ofsted of a thematic review of knife crime which it was hoped would inform best practice and include recommendations for adoption by schools.

4.18 Partners expressed their support for the work under way including the approach of building on existing knowledge and sharing data. It was noted the indications were that several trauma networks and senior clinicians would be keen to become involved with the work of the VRU. It was additionally noted that youth workers such as Redthread were collaborating with Accident and Emergency departments in hospitals, and that the aim is to expand these initiatives to include urgent care centres and walk in clinics, also targeting those involved in less serious violence incidents as part of early intervention. A health roundtable would be held in the spring to scope the health and care role in violence prevention in London further. Following discussion, it was agreed that officers provide the Board with an update on activity at a future meeting.  

[Action: Vicky Hobart]
4.19 DECISION:
That the report and discussion be noted.

5 London Health and Care Stocktake (Item 5)

5.1 Dr Tom Coffey introduced the report which provided an overview of various developments in health and care including the development of the NHS Long Term Plan and announcement of five-year STP plans, the publication of London’s Primary Care Strategy, updates since the London health and Care Devolution Agreement, and the King’s Fund review of STP progress. Partners were then invited to present reports proving more in-depth updates on the London Primary Care Strategy, the Strategic Partnership Board and the King’s Fund.

5.2 DECISION:
That the report be noted.

5a London's new primary care strategy (Item 5a)

5.3 Dr Jonty Heaversedge provided an update on London’s Primary Care Transformation, presenting an overview of the challenges of general practice delivery including access for patients, variability of quality of practices, resilience, patient satisfaction and significant workforce issues in recruitment, retention and skills mix. An overview of progress was also provided, noting the importance of collaboration for improving access, outlining next steps and vision as informed by robust engagement and research, and presenting an illustrative model of care.

5.4 Board members noted that the challenge of meeting public health and primary care needs was increasingly being supported through innovation and testing of digital solutions and collaboration with the community. The Board discussed the benefit of encouraging and empowering people to become involved and consider non-medical solutions, noting that in many cases a GP or hospital visit may not be required.

5.5 The importance of reviewing estates and infrastructure was also discussed. Partners noted that increasingly many interactions with patients could be successfully completed by telephone, skype, website information or other means which need not necessarily require a face to face meeting. A key challenge was in explaining this change to residents, understanding patient needs and providing reassurance that continuity of care for the individual would continue. Board members also noted there is a need to ensure that there needs to be a wider integration of systems and networks across services such as housing, which links to public health. It was agreed that a further update be provided to the Board at an appropriate time, to include a focus on estates.

[Action: Dr Jonty Heaversedge]
5.6 DECISION
That the presentation and discussion be noted.

5b London Health and Care Strategic Partnership Board Focus Areas (Item 5b)

5.7 Will Tuckley introduced a report on the Strategic Partnership Board priority focus areas encompassing estates and capital receipts; enabling local integration including the development of workforce and digital; and Transformation Funding noting the letter to Simon Stevens circulated with the papers. Members noted the progress in each of the focus areas and discussed factors affecting flexibility in deploying Transformation Funding to enable a more flexible response to London’s challenges and opportunities. It was noted that subsidiarity was a key principle of the devolution, and that borough level involvement in a streamlined decision process would be important in enabling faster decision-taking and reinvestment.

5.8 The Board noted that the development of a renewed health and care vision for London was progressing through partner, stakeholder, and wider engagement. It was agreed that the Board receive a report on the draft vision at its next meeting, alongside a prioritised action plan. [Action: Will Tuckley]

5.9 DECISION:
That the report and discussion be noted.

5c King’s Fund London Sustainability and Transformation Plans report (October 2018) (Item 5c)

5.10 Richard Murray introduced a report on key findings and recommendations from the King’s Fund’s second report on London’s five sustainability and transformation partnerships (STPs) and outlined how the major new service transformation and reconfiguration proposals will be implemented in the context of the six mayoral tests.

5.11 There was discussion concerning how the Mayoral tests could be effectively applied borough-wide, noting the aim of fostering collaboration and growing best practice. Partners were agreed that the approach would need to take account of local population need and neighbourhood and borough differences, noting that in areas where integration was already working well, the value of imposing a further structure would need to be demonstrated. Partners were agreed that there was a need for more clarity regarding what is being commissioned, and at what level. It was also noted that the Market Forces Factor presents a problem for London providers.
Dr Tom Coffey requested that further work be undertaken to consider the issues raised above, and present a pragmatic, clear and compelling vision with an accompanying work plan for consideration by the Board in April.

[Action: Will Tuckley/ Richard Murray]

DECISION:
That the report and discussion be noted.

Making London a Dementia Friendly City (Item 6)

Mary Harpley, the GLA’s Dementia Champion, introduced the report on making London a Dementia Friendly City, which provided the context for two reports on Dementia Friendly London and Borough leadership on creating dementia friendly communities (‘London ADASS dementia work programme’).

DECISION:
That the report be noted.

Dementia Friendly London (Item 6a)

Sally Copley presented an update report from the Alzheimer’s Society on progress towards achieving Dementia Friendly London including work at the Greater London Authority and the wider GLA group: Transport for London, Metropolitan Police and London Fire Brigade. The presentation included statistics on current dementia levels in London and provided an overview of current work led by the Society. It was noted that a key challenge lay in increasing awareness, understanding and education so that more people understand what dementia is, how it effects people and how to support people living with dementia and support carers in London. It was noted that only around 65% of those with dementia have been diagnosed, with a need for education amongst individuals and GPs.

Board partners expressed their full support for the work of the Alzheimer’s Society including their willingness to become dementia friends and work to help the Society to meet a target for 75% of their organisation’s staff to become dementia friends by 19 September 2019 when the second Dementia Friendly London Summit was scheduled to take place.

[Action: All]

DECISION:
That the report and discussion be noted.

Borough leadership on creating dementia friendly communities (Item 6b)
6.6 Bernie Flaherty provided an update on the London Association of Directors of Social Services (ADASS) dementia work programme, highlighting the challenge presented to those under 65 who are diagnosed with dementia and the intergenerational impact of the disease. The Board heard about the development of a digital strategy to enable championing of a personal approach, with the launch of virtual characters Martha and Arthur planned for February 2019. Members also noted the aim of ensuring that all Health and Wellbeing Boards receive dementia friendly training by April 2019.

6.7 The Board expressed its support for the work under way to increase the number of Dementia Friends across London, with several partners, including the Mayor, noting they were already Dementia Friends, and for enhancing the personalisation of care of those with dementia. It was agreed that coordinating efforts to increase early diagnosis would contribute to the aim of helping to support people to make their own plans and live as independently as possible. The Chief Officer of GLA and Dementia Champion, Mary Harpley, agreed to lead on bringing an update on this work to a future Board meeting at an appropriate time.

[Action: Mary Harpley]

6.8 DECISION:
That the report and discussion be noted.

7 Update reports (Item 7)

7.1 The Chair noted there were two reports on the agenda which provided updates on Thrive LDN and the recent London Health Board conference, for noting. Members were asked if they had any comment on the reports.

7a Thrive LDN update (Item 7a)

7.2 Mayor Philip Glanville updated the Board on progress made by Thrive LDN, a citywide movement to improve the mental health and wellbeing of all Londoners, highlighting the high level of activity under way in the London Borough of Hackney. It was suggested that Thrive LDN may wish to make contact with the Deputy Mayor for Policing and Crime noting the links between mental health and crime, and to consider contacting the Board if help was needed to roll out Thrive LDN initiatives throughout London boroughs.

7.3 DECISION
That the update report be noted.

7b LHB Conference: Summary and evaluation (Item 7b)

7.4 The Board noted the success of the October conference and thanked Una Carney and the team.
7.5 DECISION:
That the report be noted.

8 Dates of future meetings (Item 8)
8.1 The next meeting of the Board was scheduled for 2pm on 3 April 2019 at City Hall.

9 Any Other Business (Item 9)
9.1 There was none.

10 Close of Meeting
10.1 The meeting ended at 1.00pm.