

# LONDON HEALTH BOARD

## PUBLIC RECORD

**Date:** Wednesday 27 June 2018  
**Time:** 2.00 pm  
**Place:** Committee Room 1, City Hall,  
The Queen's Walk, London, SE1 2AA

*Agendas and summary minutes of the meetings of the London Health Board will be published on the GLA's website at: <https://www.london.gov.uk/what-we-do/health/london-health-board>.*

### **Members Present:**

Sadiq Khan, Mayor of London, (Chair)  
Dr Tom Coffey, Mayoral Health Advisor  
Cllr Ray Puddifoot, Leader, London Borough of Hillingdon  
Cllr Richard Watts, Leader, London Borough of Islington  
Professor Yvonne Doyle, Regional Director, Public Health England  
Claire Murdoch, Cavendish Square Group (London Mental Health Trusts)  
Dr Marc Rowland, Chair, London-wide Clinical Commissioning Council  
Professor Jane Cummings, Director, NHS England London Region  
Daniel Elkeles, Chief Executive, Epsom and St Helier Foundation NHS Trust

### **Apologies**

Cllr Danny Thorpe, Leader, Royal Borough of Greenwich

### **In Attendance:**

Nick Bowes, Mayoral Director, Policy  
Amanda Coyle, Assistant Director Health, Education and Youth, GLA  
Dick Sorabji, Director of Policy and Public Affairs, London Councils  
Will Tuckley, Chair of London Health and Care Devolution Programme Board  
Geoff Alltimes, Co-Chair, London Estates Board (Item 4)  
Jonty Heaversedge, Primary Care Lead, NHS England (Item 6)  
Luke Readmond, Chief Information Officer, East London Health and Care Partnership (Item 6)  
Una Carney, Head of Partnership Communications and Engagement, Healthy London Partnership (Item 8)

### **Secretariat:**

Gus Wilson, London Health Board Secretariat Manager, GLA  
Kirstin Lambert, Senior Board Officer, GLA

### **Observers:**

Sarah Mulley, Executive Director for Communities and Intelligence, GLA  
Clive Grimshaw, London Councils  
Vicky Hobart, Head of Health, GLA

Peter Kohn, Director, London CCGs,  
Stephen Waring, Head of NHS Liaison, GLA  
Joy Adeyemo, Deputy Head of Mayor's Private Office, GLA

## **1 Welcome, Introductions and Apologies (Item 1)**

- 1.1 The Chair welcomed attendees to the meeting, in particular Cllr Ray Puddifoot, Leader, London Borough of Hillingdon who joined the Board as a new London Councils representative. Those present introduced themselves.
- 1.2 Apologies for absence were received from Cllr Danny Thorpe.
- 1.3 Marc Rowland, Chair, Londonwide Clinical Commissioning Council, who was attending his last meeting as a Member, was thanked for his work and contributions during his time on the Board.

## **2 Minutes of the Previous Meeting (Item 2)**

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

## **3 Matters and Actions Arising (Item 3)**

- 3.1 The Board received a report setting out completed and outstanding actions arising from previous meetings.

### **London Health Board – Improving Transparency (Item 3a)**

- 3.2 Dr Coffey introduced a paper setting out detailed options and timelines for increasing the transparency of the Board's proceedings.
- 3.3 DECISIONS:
  - a) That the proposed methods and timelines for recording and publishing the proceedings of future meetings, as set out in the report on Improving Transparency, be agreed; and
  - b) That the format for the written record of meetings from options set out at paragraph 4.8 be taken forward by officers and signed off by the Chair.

### **Mental Health Support in Schools**

- 3.4 Dr Tom Coffey provided an update on Mental Health Support in Schools. Work was underway to survey schools, and using this data, develop a London trailblazer for Child and Adolescent Mental (CAMHS) in schools. A Children and Young People's Mental Health Transformation Board, part of Healthy London Partnerships (HLP) will oversee Londonwide improvements. CAMHS transformation funds will be directed to support Clinical Commissioning Groups (CCGs) to put more resource into school-based services. The Board noted there

would be a meeting with Ofsted on 5 September 2018 to include discussion of promoting the notion of mental health and wellbeing in schools as intrinsic to what makes a good school.

- 3.5 Local leaders noted that there was a need to ensure the plans for services were communicated to all London boroughs. Board members stressed there also needed to be transparency regarding how the CAMHS transformation funding was being used. Communications under way included the NHS communicating to school nurses and promoting awareness of access to NHS services via improved Apps. The Mayor would also be writing to all Head Teachers, copying relevant health and local authority stakeholders (including Borough Leaders and Chief Executives).
- 3.6 Members noted that while the relationship between local authorities, health services and schools was key to the provision of effective mental health support, a pan-London approach was also needed.
- 3.7 The Board noted the link between schools and community development and GP practices, and suggested there could be benefits to recognising the achievements of local schools, for example through an awards system, to encourage this work.

### **Dementia Friendly London**

- 3.8 Dr Tom Coffey provided an update on Dementia Friendly London. The London Summit held on 21 May 2018 was well attended, including by people with dementia, and the event was very positively received. Work was underway across sectors to meet the milestones of 500,000 Dementia Friends, 2,000 dementia-friendly organisations and all boroughs working toward Dementia Friendly Community status.

### **Health Inequalities Strategy**

- 3.9 Professor Yvonne Doyle provided a brief update on the Health Inequalities Strategy, the timetable for publishing the final Strategy and the work planned over the summer ahead of the London Health Board conference in October. The Strategy had an emphasis on delivery and effective partnerships, and the implementation of the the Strategy was being discussed with the Health Committee the following day ahead of its consideration by the Assembly and launch the Autumn. The Board noted the Strategy was widely anticipated in London, and there was international interest. It was agreed that there was a need to ensure the mobilisation of the strategy was cascaded across London.

**[Action: Amanda Coyle]**

- 3.10 DECISION:  
The updates on actions arising were noted.

## **4 London Estates Strategy (Item 4)**

- 4.1 Geoff Alltimes, Co-Chair, London Estates Board, introduced a paper providing further detail on the emerging London Estates Strategy and approach to developing the capital plan. The Board received an update on progress made by the London Estates Board (LEB) and the London Estates Delivery Unit (LEDU) which included:
- work to develop a national toolkit for the delivery of Homes for NHS staff including pilot funding for 5 London schemes;
  - the announcement by partners of timelines and criteria for the national capital investment bidding process; and
  - the appointment of a Director for the London Estates Delivery Unit.

It was noted draft London Sustainability and Transformation Partnership (STP) strategies and capital plans were developed in April and that the Final Estates strategies were due to be brought together and shared with all partners on 9 July. As STPs looked at prioritising their own pipeline there would be challenge in considering what the priorities should be in the final London strategy.

**[Action: Geoff Alltimes to circulate the final London Estates and Strategy and Capital Plan]**

- 4.2 Support would be needed from local authority representatives to ensure non-NHS partners were fully engaged. Members agreed that outside of London's five STP teams working on the plans, it was difficult to achieve meaningful engagement in the process with all London boroughs.
- 4.3 Whilst the Board recognised that NHS partners must seek to achieve the best value for any land deemed surplus, members agreed that the valuation of NHS sites needs to be done taking into account the London Plan, and that any land purchaser should be aware that the priority was affordable housing, and not luxury flats. The Board noted it would be beneficial to undertake early engagement with local authorities to enable them to advise developers of the issues and manage vendor expectations. Members noted the importance of the potential housing gain from large numbers of smaller sites, many of which were owned by NHS Property Services, and the need for borough-based discussions to work through issues including access to the right expertise at a local level.

**[Action: Board members to consider ways to support wider engagement beyond the partners closely involved in the strategy development process to date.]**

- 4.4 The Board noted there was a need to gain a picture of the need for hospital beds and GP practices in the context of population growth and future projections. Community based assets and hubs were a growing trend in finding new ways of addressing health challenges.
- 4.5 Marc Rowland, Chair, Londonwide Clinical Commissioning Council noted an issue concerning occupancy and GPs struggling to afford the rents resulting in a lack of revenue to support the development of practices. Flexibility from the NHS England regarding the current rules would be welcomed.

**[Action: Marc Rowland/Amanda Coyle]**

- 4.6 It was noted that the Mayor's six assurances, developed as a result of the Kings Fund STP Report, for championing and challenging the NHS would continue to be applied prior to NHS land being deemed surplus.
- 4.7 The Board agreed that in the context of the development of a 10-year plan for London there was rationale in asking for the advance release of national funding proportionate to London's share and for this to be 'front-loaded' to enable progress at pace across London.
- 4.8 DECISIONS:
- a) That the process and timeline for developing the London Estates Strategy and the capital plan was endorsed; and
  - b) Board Members jointly write to Simon Stevens, Chief Executive of the NHS, setting out the rationale for the advance release of NHS spare capacity funds and enclosing a deliverable model setting out the results
- [Action: Amanda Coyle]**

## **5 Violence Prevention: A Public Health Approach (Item 5)**

- 5.1 Dr Tom Coffey and Vicky Hobart introduced a paper setting out interim findings from some scoping work by the GLA and MOPAC on how a public health approach to youth violence could be further progressed in London.
- 5.2 The Board noted that the Mayor's London Knife Crime Summit had been convened earlier that day. Given that only around 40% of violence is reported as crime, a key area of focus was how to mobilise the health and care system to combat violence, working collaboratively and supportively with the Mayor's Office for Policing and Crime (MOPAC) and across regions and boroughs. There was a need for very local work, noting different contexts and triggers, while also taking a Londonwide approach where this would add value. Members noted there were different sources of evidence, data and intelligence, and that evaluation of different approaches and initiatives to see what works in London while learning from other areas was important.
- 5.3 Board members emphasised the links to social care, and suggested this Board could be called the London Health and Social Care Board. Members also noted links to PTSD and family environment and noted that a great deal of work was already underway locally which had the potential to be scaled up. The Board agreed it was important to ensure a multi-disciplinary, cross-agency approach is taken, including Ofsted and schools' involvement.
- 5.4 The Chair thanked Professor Jane Cummings for her recent action in arranging further NHS representation by the NHSE London Medical Director on the London Crime Reduction Board.
- 5.5 DECISIONS:
- a) That, the Board endorse the work under way and support the development of a public health approach to tackling youth violence in London.

- b) The Mayor will raise the issues from this discussion at the forthcoming meeting with Ofsted.
- c) That the Board agree to receive a follow up report in six months

**[Actions: Vicky Hobart]**

## **6 Local Health and Care Record Exemplar (Item 6)**

- 6.1 Jonty Heaversedge, Primary Care Lead, NHS England and Luke Readmond, Chief Information Officer, East London Health and Care Partnership presented a report updating on the selection of London as one of the three newly selected Local Health and Care Record Exemplars (LHCRE) and plans to develop a range of demonstrator projects across London over the next two years using £7.5 million from NHS England. There was a common assumption that the Health Service was one organisation, rather than a service with different systems, processes and information sharing. A failure to share information impacted on patient care, the join up of health and social care and the ability to enhance the prevention agenda. The UK was uniquely positioned regarding its population diversity and the wealth of health data available as a result of the establishment of the NHS.
- 6.2 The Board noted many patients were not aware of their right to access their own health records and that there was a need to communicate this and empower people. There was also a need to educate on the benefits of information sharing, while providing reassurance. There was the technological ability to enable easier access to information, but data security was important. Members agreed there needed to be a conversation with Londoners to inform them about the storage of their information and seek their views on how the information could be made more accessible. There needed to be great care in how this was communicated, noting the sensitivities involved and the likelihood of understandable concern regarding the security of patient information. It was discussed that some members of the public may not welcome greater access to their personal health records. It was important not to damage the NHS brand during the course of this engagement. London Councils needed to be involved in developing the conversation with Londoners..
- 6.3 DECISIONS:
- a) The importance of a conversation with Londoners about information sharing and providing visible leadership was endorsed; and
  - b) The Board committed to using leadership and influence to support One London to work with local councils to deliver the benefits of the programme..
- [Action – Dick Sorabji]**

## **7. Thrive LDN Update (Item 7)**

- 7.1 Amanda Coyle, Assistant Director, Health, Education and Youth, GLA, presented a paper setting out progress on Thrive LDN and details of the Thrive LDN campaign due to launch at the beginning of July. There were three key areas: Addressing Mental Health and equity; looking at better ways to integrate thrive into communities; and a comprehensive programme of public engagement. This work would culminate in a public event in the Autumn.

7.2 Cllr Puddifoot asked how the information was being shared with London boroughs and at a local level. It was clarified there had been 17 community conversations, although this had not included Hillingdon. Other engagement included supporting the development of local Thrives in areas such as Greenwich and Harrow and work under way on package of resources for local authorities. The Board agreed that wider engagement was needed across London, and that all local authorities should be contacted.

7.3 DECISIONS:

- a) That the update be noted and the upcoming Thrive LDN campaign,
- b) That support and promotion of the upcoming Thrive LDN campaign be agreed; and
- c) That letters be sent to the Chief Executives and Leaders of all local authorities to inform them of the campaign.

**[Action – Amanda Coyle]**

## **8. London Health Board - Better Health for London Conference (Item 8)**

8.1 Una Carney, Head of Partnership Communications and Engagement, Healthy London Partnership provided an update on planning for the Better Health for London Conference. The structure of the day would include keynote speakers, a Panel with question and answer session, a plenary session on the Health and Inequalities Strategy and help from Youth Assembly Members. The Conference was on the eve of World Mental Health Day which presented an opportunity to shine a light on work taking place in London and beyond. The Chair requested that consideration be given to including the 'fruits of devolution' and successes to date.

8.2 DECISIONS:

- a) The date of the conference on 9 October was noted;
- b) That the structure of the day would replace the next London Health Board meeting and involve Board members in the programme.
- c) The event will would be live streamed; and
- d) That consideration be given to inclusion of a session on the 'fruits of devolution' and successes to date.

**[Actions: Una Carney (a, b and d) and Will Tuckley (c)]**

## **9 Dates of Future Meetings (Item 9)**

9.1 The next meeting of the Board would be held on 9 October, followed by a meeting on 18 December which would comply with new transparency arrangements.

## **10 Any Other Business (Item 10)**

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10.1 Dr Tom Coffey noted that Simon Stevens had asked for responses to NHS 70. It was noted that the Board may wish to provide a joint response setting out shared priorities.

**11 Close of Meeting**

11.1 The meeting ended at 3.44pm.