

London Borough of Islington  
**Health and Wellbeing Board - Wednesday, 25 January 2017**

Minutes of the meeting of the Health and Wellbeing Board held at Committee Room 1, Town Hall, Upper Street, N1 2UD on Wednesday, 25 January 2017 at 1.00 pm.

**Present:**           **Councillors:** Richard Watts (Chair) and Burgess  
Dr. Josephine Sauvage, Chair, Islington Clinical Commissioning Group  
Emma Whitby, Chief Executive, Islington Healthwatch  
Simon Pleydell, Chief Executive, The Whittington Hospital NHS Trust  
Jonathan O’Sullivan, Islington Deputy Director of Public Health  
Lucy de Groot, Islington Clinical Commissioning Group  
Carmel Littleton, Corporate Director, Children’s Services.

**Also Present:** Candy Holder, Head of Pupil Services  
Mark Hendriks, Senior Joint Commissioning Manager,  
Brenda Scanlon, Service Director, Housing and Adult Social Services.  
Eve Davies, shadowing Councillor Watts.  
Karen Lucas, Head of Housing Needs  
Bal Heer-Matiana, Senior Public Health Strategist.  
Angelina Taylor, Public Health Strategist.

**Councillor Richard Watts in the Chair**

**121        WELCOME AND INTRODUCTIONS - COUNCILLOR RICHARD WATTS (ITEM NO. A1)**

The Chair welcomed everyone to the meeting and introductions were given.

**122        APOLOGIES FOR ABSENCE (ITEM NO. A2)**

Apologies for absence were received from Councillor Joe Caluori.

**123        DECLARATIONS OF INTEREST (ITEM NO. A3)**

None.

**124        ORDER OF BUSINESS (ITEM NO. A4)**

The order of business would be Item B4, B2, B3 and B1.

**125        MINUTES OF THE PREVIOUS MEETINGS (ITEM NO. A5)**

**RESOLVED**

That the minutes of the meetings held on the 3 and 19 October 2016 be agreed as a correct record and the Chair be authorised to sign them.

**126** **ISLINGTON JOINT HEALTH AND WELLBEING STRATEGY 2017-2020:  
CONSULTATION RESPONSES AND FINAL STRATEGY (ITEM NO. B1)**

Jonathan O'Sullivan, Islington Deputy Director of Public Health, reported on the Joint Health and Wellbeing Strategy 2017-2020.

The following main points were noted in the discussion:-

- There had been just over forty written responses submitted on the consultation, and there had been seven engagement meetings with groups of key stakeholders.
- The responses gave a wide range of feedback and came from people with a variety of backgrounds and perspectives. It was considered that there had been a good mix and quality of feedback.
- The strategy had been enriched and improved by the responses given.

**RESOLVED**

- 1) That the findings and changes made to the Joint Health and Wellbeing Strategy following consultation be noted.
- 2) That the Joint Health and Wellbeing Strategy be approved.

**127** **TRANSFORMING CARE PROGRAMME AND THE AUTISM SELF-ASSESSMENT  
FRAMEWORK (ITEM NO. B2)**

Mark Hendriks, Senior Joint Commissioning Manager, reported on the Transforming Care Programme and the Autism Self-Assessment Framework.

The following main points were noted in the discussion:-

- It was noted that there were currently four patients in Islington who had a learning disability and/or autism in an inpatient setting funded by the ICCG. The numbers had remained relatively constant over time, although in 2016 data collection represented a wider population than in previous years.
- The ICCG target for inpatient numbers by 2019 was four. This was considered realistic when taking into account a reduction in long-stay patients against specialist use when needed with shorter and more effective stays. It was accepted that this small performance against targets could be volatile.
- There was an aim to reduce the use of hospital beds and provide services that were not hospital centric.
- The North Central London TCP, consisting of five local authority CCGs, was working to transform the care within this context.
- Approximately 1% of the population were on the autistic spectrum with an increased diagnosis in young people.
- Services needed to be made more accessible for both adults and children and both services needed to work closely with each other.
- Joint reports in the future would be welcomed.
- The Autism Partnership Board, which was attended by a wide range of stakeholders, had drafted an Action Plan which identified gaps in provision and would look at how people could be supported.
- It was noted that the Finsbury dental service had specialised knowledge of autism and there could be value in directing patients to specialised care.
- It was noted that Councillor Burgess would be attending future meetings of the Partnership Board.

**RESOLVED**

- 1) That the Action Plan be circulated to the HWBB once finalised.
- 2) That a further report be submitted to the HWBB once the next self assessment had been completed.

**128**      **SPECIAL EDUCATIONAL NEEDS AND DISABILITIES REFORMS UPDATE (ITEM NO. B3)**

Candy Holder, Head of Pupil Services, presented a Special Educational Needs and Disability Reform Update.

The following main points were noted in the discussion:-

- The service was seeing an increase in the identification of young people with Special Education Needs and Disabilities (SEND);
- Links with schools to identify and assess young people were key to the delivery of the plan;
- The ability of identify young people with SEND had improved. A specialist team did carry out most diagnosis.
- Where needs could not be met then young people would then qualify for an assessment.
- Where a young person was not making progress then that would be a reason to reassess.
- Local plans were to be completed by April 2018.
- The local offer had been launched as a new-look website. The challenge had been to develop a user friendly on-line version of the local offer. Members of the Board were invited to look at the website and let the Head of Pupil Services know where it could be improved.

**RESOLVED**

That the progress be noted and a further update report be submitted to the HWBB in January 2018.

**129**      **ISLINGTON HOMELESSNESS STRATEGY: PROGRESS UPDATE (ITEM NO. B4)**

Karen Lucas, Head of Housing Needs, gave a presentation on the homelessness prevention strategy.

The following main points were noted in the discussion:-

- That the Board wanted to own the development of the new homelessness strategy,
- There was a need to prevent homelessness through effective partnership working. This could be possible by developing links with GPs/ Accident and Emergency Departments, mental health services and through schools to help prevent vulnerable people.
- The need to use mental health links and schools to identify vulnerable people.
- A number of children who were in accommodation in Waltham Forest were at Islington schools which caused difficulties for families.
- Lucy de Groot undertook to raise the above issues with the ICCG for consideration.
- Links with the justice system also needed to be developed.
- It was noted that Headteachers were often the first person for parents to approach when they were in housing difficulty and the Head of Housing Needs would be invited to speak to Headteachers about the strategy.
- That Councillor Janet Burgess be the Health and Wellbeing Champion in order that the strategy be developed with health and well-being in mind.

**RESOLVED**

- 1) That the presentation be noted;

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- 2) That the Board owns the development of the new homelessness strategy, reflecting on the achievements of the previous strategy;
- 3) That the Board facilitate the development of stronger intelligence and joint response across health, social care and housing services in the North London region.
- 4) That there be a future update to the HWBB detailing demand on the housing services and the interaction with other public services.

### 130 **WORK PROGRAMME (ITEM NO. B5)**

**RESOLVED** that the Work Programme be noted.

### 131 **UPDATE ON ISLINGTON SAFEGUARDING CHILDREN BOARD FUNDING ARRANGEMENTS (ITEM NO. B6)**

Carmel Littleton, Corporate Director of Children's Services, reported that there was some dispute over who should be contributing funding to the Safeguard Boards. This was a national issue. NHS England considered that funding responsibility had been passed to the Islington CCG which they disputed. It was accepted that from April 2017 the position may become clearer.

The Committee noted that this was not an unusual position between the CCGs and NHS England.

This was a situation that required clarity and fairness and was unacceptable because of the implications.

The matter had been raised directly with NHS England.

#### **RESOLVED**

That a letter be sent regarding the matter to the Health Minister from the HWBB with a copy to the local MPs and the Children's Commissioner.

Meeting closed at 2.30 pm

Chair