

# LONDON HEALTH BOARD

## PUBLIC RECORD

**Date:** Thursday 19 April 2018

**Time:** 12.00 pm

**Place:** Committee Room 4, 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) (from item 6)  
Dr Tom Coffey, Mayoral Health Advisor (in the chair to item 6)  
Cllr Kevin Davis, Leader, Royal Borough of Kingston Upon Thames  
Professor Yvonne Doyle, Regional Director, Public Health England  
Cllr Denise Hyland, Leader, Royal Borough of Greenwich  
Claire Murdoch, Cavendish Square Group (London Mental Health Trusts)  
Dr Marc Rowland, Chair, London-wide Clinical Commissioning Council  
Cllr Richard Watts, Leader, London Borough of Islington

### **In Attendance:**

Geoff Alltimes, Co-Chair, London Estates Board (Item 5b)  
Una Carney, Head of Partnership Communications and Engagement, Healthy London Partnership (Item 7)  
Amanda Coyle – Assistant Director Health, Education and Youth, GLA  
Dr Vin Diwakar, Chief Medical Officer, NHS England, London Region (for Professor Jane Cummings)  
Cllr Sachin Shah – Leader, London Borough of Harrow  
Prof Oliver Shanley, NHS England/ NHS Improvement (Item 6)  
Dick Sorabji - Director of Policy and Public Affairs, London Councils  
Will Tuckley – Co-Chair, London Health and Care Devolution Strategic Partnership Board (Item 5a)

### **Secretariat:**

Gus Wilson – London Health Board Secretariat Manager, GLA  
Eleanor Lloyd – Senior Board Officer, GLA

### **Observers:**

Shaun Danielli, Healthy London Partnership  
Clive Grimshaw, London Councils,  
Vicky Hobart, Greater London Authority,  
Peter Kohn, London CCGs,  
Tracy Parr, Healthy London Partnership  
Keri Torney, Healthy London Partnership

## **1 Welcome, introductions and apologies (Item 1)**

- 1.1 Apologies for absence had been received from Professor Jane Cummings, Director, NHS England London Region and Daniel Elkeles, Chief Executive, Epsom and St Helier Foundation NHS Trust.
- 1.2 The Chair had been called to an urgent engagement and would join the meeting at the earliest opportunity. Dr Tom Coffey took the chair in the interim.
- 1.3 Dr Coffey welcomed attendees to the meeting and those present introduced themselves. Cllr Sachin Shah, Leader, London Borough of Harrow joined the meeting as a new local authority champion for Thrive LDN.

## **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.
- 3.2 Professor Doyle updated the Board on the response to the consultation on the Mayor's Health Inequalities Strategy (HIS). Responses had been overwhelmingly supportive of the proposals and demonstrated public desire for a strong focus on tackling inequalities. A wide range of pledges had been made by both public and private bodies and the team was exploring potential NHS commitments and how these could be embedded into Sustainability and Transformation Plans (STPs)
- 3.3 A two year rolling set of indicators and delivery plan would be developed for reporting to the Board and external stakeholders such as the London Assembly. This would be reviewed annually.
- 3.4 Dr Coffey updated the Board on plans to make London a dementia-friendly city, including work undertaken by the GLA, emergency services, NHS, local authorities and a range of other public and private bodies. Members were again invited to attend the dementia summit taking place at City Hall on 21 May.
- 3.5 DECISION:  
The update on actions arising was noted.

## **4 London Health Board - Improving transparency (Item 4)**

- 4.1 Dr Coffey introduced a paper setting out options to increase the transparency of the Board's proceedings. Improved visibility of the Board's work would be in keeping with the commitments made in the London Health and Care Devolution Memorandum of Understanding (MoU), as well as enabling stakeholders better to understand the Board's aims, objectives and achievements.
- 4.2 It had been proposed that the Board's agenda, papers and minutes be made publicly available except where commercially sensitive or otherwise exempt from Freedom of Information (FOI) requests. However, the Mayor had expressed support for moving toward even greater transparency in the medium term, with meetings being webcast save for a part 2 section to be reserved for discussion of confidential information where necessary.
- 4.3 Members were supportive of increased transparency and felt that a staged transition was unnecessary and that arrangements should be made to webcast meetings and publish agenda, papers and minutes - except for FOI-exempt information - aiming to begin with the first Board meeting following the Board's 2018 public event, which was to be held in October 2018 (see item 7).
- 4.4 **DECISION:**  
That, subject to the Chair's agreement and confirmation at the next Board meeting, arrangements would be made to transition the Board's working arrangements to a two-part system of meetings and papers, with the first part of the meeting to be webcast, beginning with the first meeting following the Board's 2018 public event.

## **5a Strategic Partnership Board Work Plan (Item 5a)**

- 5.1 Will Tuckley, Co-Chair of the London Health and Care Devolution Strategic Partnership Board (SPB), introduced a paper setting out the SPB's proposed priority themes and outline work programme, highlighting in particular the themes of integration, estates and transformation funding and seeking the Board's views on prioritisation.
- 5.2 Due to the later than expected signing of the MoU, the majority of the transformation funding for the current financial year had already been committed. NHS England (NHSE) had shared information with the SPB on the planned use of funds and it had been agreed that a partnership group would be established to guide how any flexibility in the funding was used. It was agreed that details of any unallocated or flexible funding for the current financial year, and options for its use, would be circulated to the Board. **[Action: Will Tuckley]**
- 5.3 Speaking on behalf of NHSE, Dr Vin Diwakar stressed the organisation's commitment to delivering shared objectives using the transformation funding it had been tasked with allocating and highlighted the importance of focussing on a small number of key objectives in order to generate a clear track record of delivery.
- 5.4 The Board discussed the geographies of integration, agreeing that in most cases STP areas were too large to effectively combine services like social care and that

a genuine diversity of models should not only be accepted but encouraged and advocated for if integration was to generate improvements for local people.

- 5.5 Looking toward future financial years, members agreed that planning of an allocation process for 2019/20 transformation funds should begin at the earliest opportunity. Dr Rowland noted that the Board and the SPB should take care to ensure transformation funding was used to drive genuine, long-term change for the benefit of Londoners and not diverted to short-term or business as usual activity. It was recognised that pre-existing commitments made to service improvements in areas such as mental health would need to be honoured by new budget-holders, but the Board was supportive of developing a set of medium-term priorities for unallocated funds as soon as possible. It was confirmed that an allocation framework was already in development, which would consider potential connections with the Health Inequalities Strategy as well as broader partnership priorities, and that details could be presented to the next Board meeting.  
**[Action: Will Tuckley]**

- 5.6 DECISION:  
That the report and discussion be noted.

## **5b Supporting the Transformation of the NHS Estate in London (Item 5b)**

- 5.7 Geoff Alltimes, Co-chair of the London Estates Board (LEB), outlined progress to date in the development of the Board's processes and a London estates strategy and capital plan. Introducing a different working structure to an established system had brought considerable challenges, but a strong focus on the dual objectives of housing delivery and release of capital funds for the NHS meant good progress was being made.
- 5.8 Each of London's five STP areas was in the process of producing an updated estates strategy. These would be used to inform bidding for future rounds of STP capital, as announced by the Chancellor in 2017. The bids would need to demonstrate links to the wider STP plans and how they would improve service delivery and health outcomes.
- 5.9 A coherent London strategy should help secure an appropriate share of national funding, in contrast to previous funding rounds where the complexity of the London system had hindered clarity. The five strategies were currently being reviewed by regulators and the London Estates Delivery Unit (LEDU), which was also facilitating communication between STP areas. It was agreed that the London Estates Strategy and Capital Plan would be presented to the Board at its 27 June meeting.  
**[Action – Geoff Alltimes]**
- 5.10 Members emphasised the importance of local knowledge and leadership in achieving the LEB's goals, particularly in relation to smaller community facilities such as GP's surgeries or dialysis units. Although the new London Plan's target of 50% affordable housing on all sites would represent a clear future baseline, inevitable disparities in planning policy and priorities between local authorities

were often poorly understood in the NHS, meaning insufficient early engagement could significantly hinder the effectiveness of any estates strategies.

- 5.11 It was noted that the strongest local authority connections were predominantly with Clinical Commissioning Groups and, beyond that footprint, with STP areas where there was a range of levels of council involvement in strategy development, as opposed to at the pan-London LEB level. However, the LEDU was actively involved in facilitating conversations between the NHS and local authorities in order to improve mutual understanding and head off potential problems. The LEB/LEDU had also provided information to London Councils to devise a questionnaire through which local authorities' priorities would be clarified. The Board strongly supported an improvement of information flow from the LEB to the boroughs and asked that consideration be given to what the involvement of local authorities would be at each tier of decision making. It was agreed that the issue would be discussed by the LEB. **[Actions – Geoff Alltimes]**

- 5.12 DECISIONS:  
The report and discussion were noted.

*[Will Tuckley left the meeting at this point]*

## **6 Mental Health Support in Schools (Item 6)**

- 6.1 Professor Oliver Shanley OBE, Regional Chief Nurse, NHS England and Amanda Coyle, Assistant Director, Health, Education and Youth, GLA, presented a paper setting out progress towards assessing and improving mental health provision in London's schools. To properly assess variation across the capital, a mapping exercise was in development. It was hoped that the survey would identify best practice and also where gaps existed in school mental health services.
- 6.2 Members agreed that, given that the majority of schools now sat outside local authority control, a genuinely multifaceted approach using all available levers would be required to bring all schools toward similarly high standards of care. Strategic conversations could be held with multi-academy trusts but, for the most part, discussion would be required with individual schools to make an effective assessment of provision and need. Considering current constraints on school budgets it was agreed that schools should be consulted on what practical support could be provided to help them to provide services of the required standard.
- 6.3 The Board discussed the possibility of Ofsted involvement in evaluation of schools' mental health provision. While there was support for exploring this, some members cautioned against making mental health services part of a formal inspection regime and felt a better option would be for Ofsted to assess whether the school had a 'healthy mindset', and check what services were available, rather than formally inspecting these.
- 6.4 There was broad support for the inclusion of schools' mental health services in refreshed STPs and it was suggested that while services were not provided directly by the NHS, support to achieve improvements could be borne in mind as a priority for future years' transformation funding. Professor Doyle noted that there

were widespread inequalities in mental health referrals between London's different communities and that reform of services would also support the HIS.

*[The Mayor joined the meeting and took the Chair at this point]*

- 6.5 Members discussed ways to get the best from the planned mapping exercise. NHSE was strongly encouraged to use local authorities' expertise and ability to facilitate conversations with schools to maximise the information received, particularly through Directors of Children's Services but also lead members and Health and Wellbeing Board Chairs. The survey would be shared with local authority leaders following the meeting.  
**[Action: Prof Oliver Shanley // Amanda Coyle]**
- 6.6 The Chair noted that the Department for Education sent regular reports to the governing body of every school and that this could be a route to promote the survey. It was also suggested that London's three regional Schools Commissioners should be called upon for assistance, while London Councils offered to promote the survey via the Association of London Directors of Children's Services.
- 6.7 It was hoped that the survey would be completed within the next few months and conclusions incorporated into refreshed STPs, due for completion in September 2018. No further information had been forthcoming from the Government on criteria for a schools mental health trailblazer scheme but members remained keen for London to bid to operate a pilot whenever this was possible. Survey results, alongside a model of what good services should look like, would be presented to the Board in the autumn.  
**[Action: Prof Oliver Shanley // Amanda Coyle]**
- 6.8 It was agreed that improving overall mental wellbeing and resilience should fall within the scope of this work and that a narrow focus on mental health services would not be as effective in delivering the desired outcomes. The Board considered how young people's mental health might be improved in the interim, before the conclusions of the mapping exercise could be acted upon. The direct involvement of young people would be crucial and members discussed the use of smartphone apps as a first triage in mental health services and as a tool for building resilience. Councillor Watts agreed to share information on this topic previously discussed as part of his role at the Local Government Association.  
**[Action: Cllr Richard Watts]**
- 6.9 Councillor Shah updated members on the overall progress of Thrive LDN, noting that he looked forward to the challenge of becoming London's local authority Thrive LDN champion.
- 6.10 DECISIONS:  
a) The report and discussion were noted; and  
b) Subject to the additional comments and actions set out above, the proposed approach was endorsed.

## **7 London Health Board - Better Health for London Conference (Item 7)**

- 7.1 The Board received a draft agenda for its 'Better Health for London' conference, to be held later in 2018. Members welcomed the inclusion of international case studies and speakers. It was suggested that an element of the conference might be dedicated to young people and there was agreement that borough youth councils and Thrive LDN youth champions be approached to participate.

**[Action: Una Carney]**

### **7.2 DECISIONS:**

- a) The report and discussion were noted; and
- b) Members would be informed of the final conference date when this had been decided.

## **8 Dates of future meetings (Item 8)**

- 8.1 Subject to the chosen date for the 'Better Health for London' conference discussed above, the next meeting of the Board would be held on either 27 June or 9 October.

## **9 Any other business (Item 9)**

- 9.1 Borough leaders were thanked for making the time to prioritise health in the run-up to the May 2018 local elections.
- 9.2 There was no other business.

## **10 Close of meeting**

- 10.1 The meeting ended at 1:44pm.

*Note: This document was updated on 18 May 2018 in response to minor corrections from partner organisations.*