

HEALTH AND WELLBEING BOARD

28 MARCH 2019

7:05 pm – 8:15 pm

Members of the Board

Councillors:

Councillor Liz Green (Co-Chair), Councillor Rowena Bass*, Councillor Ed Fram, Councillor Dave Ryder-Mills, Councillor Margaret Thompson, Councillor Diane White

Representatives from Kingston CCG, Healthwatch and the Voluntary Sector:

Dr Nazim Jivani (Co-Chair)*, Dr Phil Moore, Dr Peter Smith*, Dr Liz Meerabeau, Patricia Turner

Council Officers (non voting):

Pauline Maddison, Iona Lidington, Stephen Taylor

Advisory Members (non voting):

Siobhan Clarke – Your Healthcare*, Tonia Michaelides – Kingston CCG, Dr Mark Potter – South West London and St George's Mental Health Trust*, Jane Wilson – Kingston Hospital NHS Trust*, Gwen Kennedy – NHS England*, Dr Anthony Hughes - GP Chambers*

* Absent

40. QUESTIONS

There were no questions.

41. DECLARATIONS OF INTEREST

There were no declarations of interest.

42. APOLOGIES FOR ABSENCE AND ATTENDANCE OF SUBSTITUTE MEMBERS

Apologies were received from Dr Naz Jivani, Dr Pete Smith, Councillor Rowena Bass, Tonia Michaelides, Siobhan Clarke, Jane Wilson, Iona Lidington and Dr Anthony Hughes.

Dr Andrew Cross attended on behalf of Iona Lidington and Julia Travers on behalf of Tonia Michaelides.

Ashley Whittaker attended the meeting for the SEND items.

The meeting was chaired by Councillor Liz Green, Co-Chair.

43. MINUTES

RESOLVED that: The minutes of the meeting held on 15 November 2018 were confirmed as a correct record and signed by the Co-Chair, Councillor Liz Green.

44. PARTNERS' UPDATES AND WORK PROGRAMME**Appendix A**

The Partners' Update included contributions from Public Health, Kingston Clinical Commissioning Group, Kingston Hospital NHS Foundation Trust, Healthwatch Kingston and Kingston Voluntary Action.

Public Health:

- Health & Care Plan – Public Health is leading on the development of the “Live Well” section of the plan and contributing to the “Start Well” and “Age Well” sections which are led by different teams. The plan will be shared at the end of March with system leaders to review and will ultimately combined with Richmond’s to form the overall plan for the Kingston and Richmond Local Transformation Board.
- Community Resilience Event held on 2 March in the South of the Borough to inform local residents how they can respond as a community to adverse events. Partner agencies include the Environmental Agency, Fire & Ambulance Services, Police, RBK emergency planning and Connected Kingston.
- Mental Health: Funded Time to Change Hub – Kingston has received funding for the development of the hub, co-ordinated by Healthwatch Kingston. The purpose is to address stigma.
- Connected Kingston Launch on 14 March. This is a system-wide social prescribing model for Kingston.
- Controlling Migration Fund – funding has been received in 2017 (£338K) and 2018 (£164K) for a number of projects for vulnerable refugees and migrants including advocacy, healthy eating, English classes and employment.
- Vulnerable Persons Resettlement Scheme – 37 individuals have been resettled so far.

Kingston Clinical Commissioning Group:

- Moving forward together – CCGs in south west London merger discussions on what functions can be undertaken across SWL whilst maintaining local Borough level accountability and service delivery
- CCG Time to change pledge focussed on the workplace was made by Sarah Blow on 26 February
- CCG improvement and assessment framework ratings – cancer and maternity have been rated as outstanding, dementia and mental health as good and learning disabilities and diabetes as requiring improvement.
- Cancer outcomes: annual assessment outcome for CCG commissioned cancer services at Kingston Hospital, Royal Marsden and St George’s Healthcare have all received ratings indicating services are of very high standard.
- Macmillan GP for Kingston and Richmond has been appointed who is a GP trainer with an interest in cancer, education and dermatological disorders and

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will support GPs in timely diagnosis and appropriate referral and communications with hospital teams

- Public Sector equality duties annual report – the report builds on the progress made last year and includes narrative on workforce data. Details of work planned for 2019 were given.
- Commitment to improving end of life care – GP practices are beginning to display a “daffodil mark” signifying commitment to 8 quality improvement standards related to improving end of life care.
- Connecting your Care is joining up GP and hospital records for four acute hospitals in SWL. Patients may opt out if they wish.
- Finance update – the CCG expects to meet all financial targets as at Month 10, including the planned surplus of £1.06M, and also to meet the Mental Health Investment Standard by increasing mental health by 3.5% in 2018/10.

Kingston Hospital NHS Foundation Trust:

- Quality and performance – despite a notable rise in admissions in February due to winter pressures, the Trust achieved the referral to treatment time and cancer targets for February. Emergency performance was 2% better than the same time last year.
- Financial position (month 10) – the Trust anticipates that the £6m deficit control total for 2018/19 will be achieved. Over performance against the plan is the prime financial risk.
- Mental Health assessment unit - £3.3m was received in December for this unit which is now open within the Emergency Department.
- Fire safety works – progress continues with the expectation that works will be completed next year.
- Workforce - vacancies are just above the target of 6% and turnover is below the target of 15.75%.

Kingston Voluntary Action:

- Health Conference on 6 March considered:
 - Connected Kingston – 180 staff across the borough have been trained as Community Champions and further developments for the digital tool are planned.
 - Food Poverty – an update was given on the development of a plan. It has four aims and a range of proposals
- Mental Health – KVA is inputting into a number of initiatives

Healthwatch Kingston:

- “The way we work” was illustrated by a diagram at Annex 1 to the report
- HWK open meetings and task group activities – open meetings take place bi-monthly and there are four Task Groups on Community Care, Hospital Services, Mental Health and Youth Out Loud!
- All Age Learning Disabilities Partnership Board – HWK provides chairing support to the board
- Kingston Hospital Quality Report 2018-19 – HWK is preparing feedback on the report
- Thrive Kingston Mental Health Strategy Planning and Implementation Group – HWK provides chairing support for this group

- Time to change Kingston Hub – HWK is the co-ordinator for the delivery programme and supporting the recruitment of a co-ordinator post in June.
- Time to change Employer Pledge and disability confident schemes – action plans have been developed for HWK attainment by the end of 2019.
- SW London and St George's Hospital Strategic partnership Proposal – a number of actions associated with this
- NHS Long term Plan / Health and Care Plan engagement (funded by NHSE via HWE)
- Involvement in other health and social care governance and transformation

In verbal updates Andrew Cross raised recently released data on infant mortality rates (IMR). Kingston's IMR is comparable to the England average but was the highest in London. Overall numbers are small and care is required in interpretation. A full review by Public Health has commenced and this will be progressed quickly. Andrew would be happy to report the outcomes to the Board. It was pointed out that the IMR is generally a marker of inequality, but Kingston is the second least deprived borough in London. There are many potential explanations for this apparently high rate so the Public Health review will look into these using local and national data sources.

Attention was drawn to the poor fabric of the Orchard practice in Chessington and that plans to refurbish have not been progressed. Julia Travers advised that this could be raised at the estates workshop being led in the near future by SWL Health and Care Partnership. Julia agreed to provide an update for the Board which would be circulated by the Democratic Services Officer.

In response to a question about whether children and young people in the new psychiatric area within A&E Julia Travers stated that this is primarily for adults there is a separate assessment area for children.

There was a brief discussion about food insecurity and it was suggested that the situation was worsening as a result of low wages, high rents and increasing transport costs. MPs are now authorised to give out food bank vouchers.

RESOLVED that:

1. The update and the work programme are noted;
2. A workshop will take the place of the meeting on Tuesday 6 June at 7.30pm; and
3. Current items for the next meeting on 3 September 2019 are:
 - Kingston Safeguarding Adult Board Annual report 2018/19
 - SEND Transformation update
 - CAMHS Transformation Plan update

Voting – unanimously in favour

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45. THE LOCAL HEALTH AND CARE PLAN - VERBAL UPDATE

Julia Travers, Director of Commissioning gave a verbal update on progress with the Local Health and Care Plan (LHCP). The plan has been developed over the last year. It is a joint system on priorities and actions to meet the health and care needs and to deliver health and wellbeing for people in Kingston. It draws on existing plans including the Joint Strategic Needs Assessment (JHSNA), local insights, and what works well. The LHCP is shaped around the life course – Start well, Live well and Age well. It covers a range of areas including resilience, obesity, long term conditions, mental health, special educational needs and disability, older people's independence, loneliness and end of life care.

An action planning workshop was held one month ago and this was well attended by representative so both the statutory and voluntary sectors. The discussion document which has emerged from this will be considered by the Kingston Leadership group which includes Ian Thomas. The document will then go for further engagement from 15 April using existing forums and discussions will form part of the Health and Wellbeing Workshop on 6 June.

Julia Travers thanked all those who have contributed to sections of document and in participation at events.

RESOLVED that: the update is noted.

Voting – unanimously in favour

46. SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND) Appendix B TRANSFORMATION PLAN

The report provided a detailed brief to the Board on the SEND Transformation Plan (attached at Annex 1) and recommended that the plan is endorsed as a working plan for publication on the Local Offer and Council websites early in the new financial year. Its main purpose is to ensure that Kingston's spending is brought into balance with the Dedicated Schools Grant (DSG) and is sustainable in future years and to improve the quality of education for children and young people with SEND in Kingston.

The Equality Assessment was set out at Annex 2.

The changes made to the RBK SEND Transformation Plan since the November 2018 draft were detailed at Annex 3. The differences include changes to the financial position (i.e. forecast versus actual) and changes to the wider contents of the plan to reflect the findings of the consultation process.

The Health and Wellbeing Board agreed at its last meeting on 22 November that it would oversee the governance arrangements of the SEND Transformation Plan to secure full engagement from partner organisations such as the CCG, health providers and voluntary sector organisations in order to promote constructive debate, scrutiny and challenge. It was also agreed that the Board is well placed to

strategically oversee the delivery of the plan as it is the forum where leaders from the local health and care system work together to improve the health and wellbeing of the local population, including children and young people with disabilities.

Since the Board's meeting on 15 November 2018, the Children's and Adults' Care and Education Committee (CACE) agreed on 22 November that a consultation on the draft Plan be undertaken and the results would inform the Council's budget decision-making process for 2019/20. The consultation results were considered by CACE on 7 February 2019 where the draft Plan was approved in principle prior to final approval at Budget Council on 26 February.

The report described the consultation methodology and explained that the full consultation findings were published as part of the agenda for the CACE meeting on 7 February. Key response headlines included:

- Support for children with SEND is a statutory duty and must be funded and the Council should lobby central Government for adequate funding and resources found from elsewhere in the Council's budget/assets
- Additional local provision must be high quality
- Early intervention must be adequately resourced and not replace statutory support
- Annual reviews of Education, Health and Care Plans (EHCPs) must be need-focussed and not target-driven to reduce provision
- EHCP coordinators and SEN caseworkers need training to complete documentation to a high standard and support parents through the process
- AfC and RBK need to regain the trust and confidence of some parents and children with SEND
- Children and young people want teachers and professionals to be honest, supportive and work together
- Children and young people want their individual needs and learning styles to be understood and responded to
- Young people want support for post 16 work experience and to prepare for adulthood.

Responses to these points are set out in Annex 3 to the report to this meeting and reflected in the final Plan at Annex 1.

In her introduction to the report Pauline Maddison, Interim Director of Children's Services, stated that the SEND budget position requires a complete transformation in thinking and systems approach which will include greater in-borough provision. Most Local Authorities will now be required to submit a deficit recovery plan to the DFE in the light of the overspend on/send provision and Kingston will have to resubmit the financial plan in the format set by the DFE.

There is a growing recognition that funding is insufficient to fulfil the requirements of the legislation and officers have lobbied MPs and others.

Ashley Whittaker, Programme Manager, added significant changes to the plan are set out in Annex 3. The financial situation has improved with an additional £125M available nationally this year and a further £125M in 2019/20. Kingston has

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received £417K for 2018/19 and £417K will be forthcoming for next year. Overall expenditure in this year is slightly less than forecast in the autumn.

He highlighted some of the responses to the comments set out in Annex 3 and listed above. Notable points included:

- The intention to increase local provision and reduce reliance on out of borough support. However the benefits of the proposed new school will be several years away.
- The Council has agreed £280K additional funding to support early intervention.
- Initiatives are being developed to regain trust with parents and progress has been made with the parent-carer forum. However the monitoring visit highlighted that progress with the forum needs to be accelerated.
- A document will be produced in the summer detailing views of children and young people about what they would like to see provided.

Members acknowledged that the Transformation Plan was a superb piece of work and a further comment was made concerning the confirmation of the removal of moving funds from school block to high need block.

A number of questions were asked.

Mr Rob Robb (in the gallery) asked whether there was a short fall on EHCPs and the officer responded that there were three tiers of need. Needs of a certain level would lead to the child being added to the SEN register and plan would be drawn up for in-school support by a Special Educational Needs Co-ordinator (SENCO). Where needs are greater than can be met in school then an EHCP could be drawn if a needs assessment indicates the need for this. An EHCP can continue until age 25 but will cease before this if it is no longer needed. It was pointed out that people at Post 16 have to self-declare needs at college.

Mr Robb drew attention to cases where people have sought private diagnosis of autism. In response it was confirmed that school staff are able to identify needs and access assessment by educational psychologists. However the speed of diagnosis would depend on the needs of the child. School are required to provide for needs regardless of whether a formal diagnosis has been made. The Portfolio Holder for Children's services stated that an improved pathway for ASD is being trialled in Richmond and this will happen in Kingston. She requested that the update on the Plan in six months' time includes details of what is working well and what needs further attention.

In response to a question from the Co-Chair, Pauline Maddison confirmed that it will take time to put the Transformation Plan into practice and make the required organisational changes.

The Co-Chair acknowledged that there is increasing recognition by Government that SEND is severely underfunded and proposed that the Board writes formally to the Secretary of State for Education or the Chancellor of the Exchequer to state that in the view of the Board that this area needs more funding. A suggestion was made that there could be more leverage if the Board writes to the Member of Parliament

for Kingston and Surbiton. It was agreed to write to all. The draft would be agreed by the Board.

RESOLVED that:

1. The SEND Transformation plan is endorsed by the Health and Wellbeing Board as a working plan for publication on the Local Offer and Council websites; and
2. A formal letter concerning the underfunding of SEND services, the content of which is agreed by the Board, is sent to the Secretary of State for Education, the Chancellor of the Exchequer and the Member of Parliament for Kingston and Surbiton.

Voting: Unanimously in favour

**47. OFSTED AND CQC LOCAL AREA SEND INSPECTION - Appendix C
WRITTEN STATEMENT OF ACTION**

In September 2018 the Office for Standards in Education (Ofsted) and the Care Quality Commission (CQC) undertook a joint inspection of the local area of Kingston upon Thames to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act 2014. As a result of the significant areas of weakness which were identified in the local area's practice it was necessary for a Written Statement of Action to be drawn up jointly by the local authority and the area CCG.

A report on the SEND Inspection was considered by the Health and Wellbeing Board at the last meeting on 15 November 2018 the Board requested a further report be brought to the next meeting on the Sign Off Statement of the Written Statement of Action (WSOA). The WSoA was submitted to Ofsted and the Care Quality Commission (CQC) in February 2019 following discussions at the Children's and Adults Care and Education Committee on 7 February 2019. The WSoA (Annex 1 to the report) explained how the local area will tackle the following areas:

- The overall poor quality and monitoring of Education and Health Care (EHC) Plans, including contributions from health professionals
- The timeliness of leaders ensuring that the annual review process and any subsequent amendments to EHC plans are consistently made in line with the SEN code of practice
- The strategic leadership and monitoring of the CCG's work in implementing the 2014 reforms
- To ensure that there is a productive and positive relationship between parents and parent representatives, including a parent carer forum.

Ofsted and the CQC wrote to the Director of Children's Services and the Managing Director of the CCG on 6 March 2019 confirming that "the statement of action is deemed to be fit for purpose in setting out how the local area will tackle the significant areas of weakness identified in the published report letter".

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The Director of Children's Services stated that progress against the WSoA is subject to monitoring by NHSE and DfE every three months and Ofsted will revisit the area in 18 months' time or earlier. It is important that good progress is made as limited progress could require formal intervention.

The Director of Children's Services briefly outlined progress so far:

- Development of a parent and carer forum - different ways of engaging with parents are being explored.
- Reporting system issues - consultants have been brought in to improve the system in Kingston
- The CCG has the strategic oversight and leadership on statutory responsibility for health and actions have included enhancing the dedicated Medical Officer support and officer support for EHCPs. Recruitment is in progress and an interim dedicated clinical officer will start at the beginning of April and will be shared across Richmond and Kingston CCGs.

RESOLVED that: the report and the Written Statement of Action (February 2019) are noted.

Voting: unanimously in favour.

48. BOARD MEMBERSHIP - REPRESENTATION OF CHILDREN'S SERVICES Appendix D

Pauline Maddison requested that the proposal to strengthen the representation on the Health and Wellbeing Board for Children's Services is taken forward in principle and the representative would be identified in the near future.

A change in representation for Your Healthcare was discussed. Ed Montgomery is replacing Siobhan Clarke as Chief Executive and a request was made that this change is recommended to Council. The deputy would remain as Grant Henderson.

A vote of thanks was proposed for Siobhan Clarke's valuable contribution to the work of the Board.

RESOLVED that:

1. Council is requested to approve the change in representation of Your Healthcare to Ed Montgomery, with Grant Henderson continuing as alternate; and
2. An additional representative for Children's Services would be advised in the near future and proposals will be submitted to Council as soon as possible.

Voting – unanimously in favour

49. URGENT ITEMS AUTHORISED BY THE CHAIR

There were no urgent items.

Signed.....Date.....
Chair