

## Health & Wellbeing Board

28 March 2018

### Partners' Update and the Board's Work Programme

Public Health, Adult Social Care, Growth (Planning and Regeneration), Kingston CCG, Kingston Hospital NHS Foundation Trust, South West London and St George's Mental Health Trust, Voluntary Sector (Kingston voluntary Action and Healthwatch)

Portfolio holder - Leader of the Council

#### **Purpose**

To alert the Board to emerging local and national policy and legislation, development opportunities and useful resources, to provide updates on matters of interest and support the Board with forward work planning.

- Public Health
- Kingston Clinical Commissioning Group
- Kingston Hospital NHS Foundation Trust
- Healthwatch Kingston
- Kingston Voluntary Action

The Board is asked to note this update and the work programme.

## **PUBLIC HEALTH**

### **Health & Care Plan**

1. The Healthy and Safe Communities Team have been supporting the development of the Kingston Health and Care Plan. This will set out the case for transformation for local health and care services, what we know about local care in relation to population needs, the engagement we have done with local residents and an action plan based around a life-course approach. Following the system workshop on 4th March 2019 we are leading the development of the "Live Well" section which has priorities around supporting people to have good physical and mental health, preventing ill health, management of long term conditions and reducing health inequalities. We will also feed into the "Start well" and "Age Well" sections being led by other teams. Kingston CCG will update the Health & Wellbeing Board about overall progress with the plan at this evening's Health & Wellbeing Board. The action plan will be shared by the end of March for system leaders to review. The overall Kingston Health and Care Plan will ultimately be combined with Richmond's to form the overall plan for the Kingston and Richmond Local Transformation Board.

## **Community Resilience Event**

2. Kingston's South of the Borough neighbourhood ran a community resilience workshop for residents on the 7th March 2019 which attracted 47 attendees. The aim of the workshop was to inform residents of how they can work alongside local services to be able to respond as a community to adverse events; as well as looking for effective ways to engage with residents in emergency situations. Partner agencies represented included the Environmental Agency, The Metropolitan Police, The London Fire Brigade, London Ambulance Service, RBK Emergency Planning and Connected Kingston (Kingston borough's social prescribing offer). We believe the event was the first of its kind in London and will be evaluated in full to see if further events will be useful in other Kingston neighbourhoods to build community resilience and help inform Community Plans we are developing with residents later this year.

## **Mental Health: Funded Time To Change Hub**

3. As announced on the 25th February, Kingston has been named as one of eight areas to receive funding to become a Time to Change hub. This will build on our work to date on an unfunded hub to tackle mental health stigma locally and change how we all think and act about mental health locally.
4. Kingston will be provided with £25,000 funding. £15,000 will be used to coordinate the activities of the hub and £10,000 for a Champions' Fund, where local people with lived experience of mental illness can bid for funding to run stigma busting events and activities within their area. We are arranging a number of training opportunities for local partners and champions to support our hub so that we can support local champions to bid for the champions fund.
5. In Kingston, the hub will be led by local champions working jointly with Kingston Council as Time to Change hub host, Healthwatch Kingston as the Time to Change Hub coordinator, Mind in Kingston and over 20 other local organisation from the voluntary sector, the health service and businesses. For more information about the Time to Change hub in Kingston visit [www.healthwatchkingston.org.uk/TTCkingston](http://www.healthwatchkingston.org.uk/TTCkingston)
6. One of the priorities of the hub is employee mental health and a number of our partners, are in the process of applying for the Time to Change employers charter. We also worked in partnership with Time to change in our most recent Student mental health conference to encourage local schools to sign up to time to change. An evaluation of the event found that student found the talk by the time to change champion at the conference one of the most helpful things.
7. Partners already signed up to Kingston's hub include Camden and Islington mental health trust (CANDI), Your Healthcare, Achieving for Children, Kingston First, The Fircroft Trust, Kingston Voluntary Action, South West London and St George's Mental Health NHS Trust, Hestia Housing & Support, YMCA London South West, Kaleidoscope Kingston Recovery Hub, Staywell, Kingston Hospital, Kingston and Richmond Clinical Commissioning Groups, Kingston LGBT Forum, Kingston Churches Action on Homelessness, Balance CIC, Samaritans, Kingston

Citizen's Advice Bureau, Homestart Richmond, Kingston and Hounslow and Fast Minds.

### **Connected Kingston Launch**

8. The system-wide social prescribing model for Kingston, Connected Kingston, was formally launched on Thursday 14th March on National Social prescribing Day. The new Connected Kingston digital social prescribing platform was celebrated as well as the 171 community champions who have been trained to have asset-based conversations with community members and to support them to use the platform to connect people to local community activities and services. Kingston Voluntary Action held the first part of their annual conference to promote and discuss Connected Kingston with voluntary and community sector partners in the week running up to the launch. A social media campaign was also promoted and launched Connected Kingston via the Council and voluntary sector partners. The Connected Kingston Facebook Page launch post reached 473 people on National Social Prescribing day.

### **Controlling Migration Fund:**

9. In 2017, we secured £338,528 Controlling Migration Funding from the MHCLG for 10 (1 year) projects to deliver a range of integration projects for vulnerable refugees and migrants with 5 partners reaching 429 beneficiaries and 46 volunteers to date.
10. In February 2019, we secured further funding from the Controlling Migration Fund totalling £164,443 to reach 584 vulnerable refugees and migrants and 26 volunteers to continue the Migrant Advocacy and Healthy Eating projects and for new projects such as the English language classes at the New England Seafood Company, the Refugee Employment Project and targeted activities for North and South Koreans.

### **Vulnerable Persons Resettlement Scheme (VPRS)**

11. We have resettled 37 individuals to date since March 2016. We are expecting a family of 4 in May which will bring the total to 41 individuals.

## **KINGSTON CLINICAL COMMISSIONING GROUP**

### **Moving Forward Together – CCGs in south west London, merger discussions**

12. There are a number of new developments, both nationally and locally, that mean it's a good time for CCGs in south west London to review the way we work:
  - We have been working together as six CCGs for over a year and we think we can do things better together, for the benefit of our patients
  - The national NHS Long Term Plan and its emphasis on the new primary care networks, and the indication that NHS England expects to see CCGs coming together in each STP area. For SW London this means that we are exploring what functions we could hold across SWL as a single CCG
  - Strengthening of local health and care partnerships, and the development of the six local health and care plans.

13. CCG governing bodies across south west London have met to talk about how we approach this change. A key part of the discussions were that we should delegate to borough level, to ensure local accountability and delivery. We also need to keep a clear focus on how we all deliver better health and care for the people in each of our boroughs, and move more resource to frontline health and care services.
14. CCG chairs and the south west London management team have proposed and agreed a series of principles, and these can be grouped into the following headings:
  - We will continue to be a clinically-led organisation
  - We will maintain our focus on today
  - We will streamline how we operate
  - We will design an organisation with the future in mind
  - We will move forward together, and engage people in how we do this
15. It was also agreed:
  - We needed to begin conversations with each GP membership with an initial case for change
  - That the GP membership, and CCG staff would be involved in designing the way we work going forward
  - We would create a governance oversight committee which will include lay members
  - A leadership forum would be created for senior CCG staff

### **CCG Time to Change pledge**

16. Sarah Blow, Accountable Officer, signed a Time to Change pledge on behalf of Kingston and Richmond CCGs, on 26 February at Thames House.
17. The campaign is run by Mind and Rethink Mental Illness, and by signing up, we are demonstrating our commitment to change how we think and act about mental health and ensure that colleagues who are facing these problems feel supported in our workplace. We have recruited 13 staff volunteers as mental health champions who will receive dedicated training in the next few months. We are also planning a range of activities which include, mental health workshops, mindfulness sessions, training for line managers and healthy workplace initiatives. We have also published a range of resources and information on our staff intranet site.

### **CCG Improvement and Assessment Framework ratings for mental health, dementia, learning disabilities and diabetes**

18. The CCG Improvement and Assessment Framework provides information to healthcare organisations, professionals and patients about how their local NHS services are performing and is used by national teams to drive organisational improvement through focused support.

<b>Service Area</b>	<b>Kingston</b>
<b>Cancer</b>	<b>Outstanding</b>
<b>Maternity</b>	<b>Outstanding</b>
Mental Health	Good
Dementia	Good
Learning Disabilities	Requires Improvement
Diabetes	Requires Improvement

19. Learning disabilities: this rating looks at reliance on specialist inpatient care for people with a learning disability and/or autism, the proportion of people with a learning disability on the GP register receiving an annual health check and the proportion of the population on a GP learning disability register. We will be appointing a GP clinical lead who will develop and support delivery of a programme of work to drive improvement in this area.
20. Diabetes: this rating measures treatment targets and also the availability of structured education programmes for people with diabetes. We are developing a plan to improve recording of diabetes education programmes in primary care.
21. Further information can be found here:  
<https://www.england.nhs.uk/commissioning/regulation/ccg-assess/clinical-priority-areas/>

### **Cancer outcomes – annual assessment outcome for CCG commissioned cancer services**

22. The annual assessment outcomes for CCG commissioned cancer services 2018/19 for Kingston Hospital NHS Foundation Trust, Royal Marsden NHS Foundation Trust and St George's Healthcare NHS Foundation Trust have been shared.
23. I am pleased to report that 'routine surveillance' has been the outcome for all three trusts. This confirms that the services are either 100% compliant with no risks identified, or for services that have not reached 100% compliance, the regional teams have identified that this is not a material issue.

### **Macmillan GP for Kingston and Richmond**

24. Dr Shanaz Meeran, GP partner at Sheen Lane Medical Centre, has been appointed as Macmillan GP for Kingston and Richmond. She will promote the priorities of our cancer strategy to ensure that cancer is detected in its early stages and that support is available for patients who are living with and beyond cancer.
25. Dr Meeran is an established GP trainer with an interest in cancer, education and dermatological disorders. Dr Meeran hopes to make a real difference to patient care by supporting GPs in timely diagnosis and appropriate referral. She will also seek to improve communication with secondary care teams.

## **Public sector equality duties annual report**

26. At its January meeting, the Executive Management Team approved the [CCG's annual equalities duty report](#), which highlights the progress made by the CCG in delivering its statutory equality duties during 2018.
27. The Equality Act 2010 requires the CCG, annually, to publish information, demonstrating its compliance with section 149(1) of the Equality Act 2010.
28. The report content builds on last year's and includes narrative on workforce data in relation to equalities, evidence of engagement activities reaching groups with protected characteristics and equalities information in relation to key work areas e.g. commissioning, safeguarding and primary care.
29. Equality work planned for 2019 includes:
  1. Review effectiveness of our shared process for equality analysis.
  2. Identify opportunities to run an equality delivery audit across both CCGs and where appropriate with a local provider(s).
  3. Explore sharing staff equality training and development resources with local NHS partners.
  4. Consider incorporating training on equality duty in the GP education half days, one for clinicians and one for practice managers on equality duty.
  5. Review our community outreach programme to ensure the focus is on patients and local people who face barriers to who face specific barriers to being involved in our work and whose specific needs must be considered.
  6. Implement the workforce disability equality standard.

## **Commitment to improving end of life care**

30. GP practices in the borough will now be able to display a 'daffodil mark' as a sign of commitment to improving end of life care, as part of a new partnership between the Royal College of GPs and the terminal illness charity Marie Curie.
31. Dr Catherine Millington-Sanders, South West London Lead for End of Life Care, has been part of the team working on this.
32. The mark, synonymous with the charity, is based on a new set of criteria called the Daffodil Standards – a set of eight quality improvement statements designed to support primary care teams in delivering care to patients living with an advanced, serious illness or at the end of their lives, and their loved ones. By adopting the Standards, GP practices commit to making improvements in at least three of eight core aspects of care each year, with the aim of having reviewed all of them after three years.

## **Connecting your Care**

33. Health and social care providers are working to improve the way they connect care for patients across south west London.
34. For people registered with a GP in Kingston, Connecting your Care will be joining up GP and hospital records for four south west London hospitals, so that GPs, along with doctors and nurses, will be able to immediately see important

information about their patients through a secure system, to help them make more informed decisions about their care.

35. The four hospitals that are linked into the system are:
- Kingston Hospital NHS Foundation Trust
  - Croydon Health Services NHS Trust
  - St George's Healthcare NHS Trust
  - Epsom & St Helier University Hospitals
36. In the future, we will also be working with other health and social care providers to share a more detailed care record for patients across south west London. This will include the treatment they receive from community NHS services, mental health services and some social care services.
37. Materials to support the launch are available in GP practices and a programme of media and social media activity is planned. Patients can opt out of Connecting your Care by visiting [www.swlondon.nhs.uk/connectingyourcare](http://www.swlondon.nhs.uk/connectingyourcare) and downloading the opt-out form. Paper copies of the forms have also been sent to GP practices and the PALS teams within the participating hospitals.

### **Finance Update**

38. Highlights from the Month 10 Finance Report include:
- Kingston CCG expects to meet all financial targets, as at month 10, including the planned surplus of £1.06m.
  - The CCG plans to meet the Mental Health Investment Standard, increasing mental health by 3.5% in 2018/19.

## **KINGSTON HOSPITAL NHS FOUNDATION TRUST**

### **March 2019**

39. This paper provides the Health and Wellbeing with an update on performance and key risks at the Trust, in particular
- Winter pressures and the impact on performance
  - Financial performance
  - Workforce recruitment and retention in some specific areas and long term supply

## **QUALITY AND PERFORMANCE**

### **Operational Performance Targets**

40. The Trust achieved the RTT and performance targets for February despite the challenging Winter pressure. There was a notable rise in admissions in February that created some challenges around patient flow and in particular bed availability. Some escalation beds to manage the increased activity were required and staff worked effectively to discharge early in the day to ensure the fewest number of beds were needed. Despite the rise in attendance and admissions the emergency care performance was 2% better than same time last

year. Good performance in ambulance turnaround times releasing crews in a timely way to be able to response to emergency calls were also maintained.

41. Cancer performance remains in line with national targets.
42. Mortality rates remain consistently low with a January SHMI of 0.82.
43. Audit of the WHO Surgical Safety Checklist, a nationally mandated intervention to deliver safe surgery has demonstrated an improvement in 2018/19 as compared to 2016/17. Results show 100% compliance with the checklist (2016/7 – 95.7%) and 99.6% compliance with post theatre list debrief 99.6% (2016/7 83.5%).

## **FINANCIAL PERFORMANCE and Estate**

### **Finance Position - Month 10**

44. The Trust financial forecast is that the £6m deficit Control Total for 2018/19 will be achieved.
45. In addition to closely monitoring our non-elective performance, and the associated cost pressures, the most significant financial risks to the year-end position relate to further over-performance against the plan.

### **Mental Health Assessment Unit**

46. In December 2018, the Trust applied for, and received, £3.3m of funding to establish a Mental Health Assessment Unit within the Emergency Department. This is now open and is providing a much improved service for patients presenting to the Trust with an acute mental health issue whether alongside physical health issue or not.

### **Fire-safety Works**

47. The fire prevention works continue and significant improvements have been made in several areas across the Trust. It is expected that these works will complete in the 2019/20 financial year.

## **WORKFORCE**

### **Workforce Targets**

48. The Trusts Workforce KPIs remain strong. At February the position was:
  - Vacancies 6.7% against target of 6%
  - Turnover 14.4 against target of 15.75%
49. The results of the Staff Survey have been published with very positive scores for the Trust which is now ranked 7th amongst the Picker group of Acute Trusts (15th last year); the national rankings are still awaited.

## **KINGSTON VOLUNTARY ACTION**

### **KVA Health Conference 6<sup>th</sup> March**

50. Our fifth health conference took place on 6<sup>th</sup> March 2019 and looked at two areas of our work, Connected Kingston and food poverty.

### **Connected Kingston**

51. in the run up to the launch of National social prescribing day, 14<sup>th</sup> March, at the conference we reflected on the progress since our previous health conference in April 2017 when we first looked at the Connect –Well model from Mid Essex. The progress we have made
52. At the conference it is was reported that Community Champion training has been delivered to 180 staff across the borough including council staff teams, GP practice staff as well as voluntary and community organisations. Training is being delivered by KVA staff as well as RBK staff.
53. Over 130 services are now listed on the digital tool.
54. For KVA, we are now looking at how we maintain the momentum around Connected Kingston, how the digital tool is developed further and how to raise awareness of Connected Kingston across the borough. There are opportunities to develop Connected Kingston and Social Prescribing in Kingston through working with CCG colleagues on the development of Primary Care Networks and the NHS Long Term Plan.
55. KVA together with colleagues from Public Health attended the first Community Resilience Workshop meeting at Southborough School on 7<sup>th</sup> March 2019 to promote the Connected Kingston service and we are looking at other opportunities to publicise the service.

### **Food Poverty**

56. At the health conference we presented a report on food poverty in Kingston, 'Food for Thought' - Food insecurity in 21<sup>st</sup> century Kingston We heard from several local organisations on the work they are doing in the borough to address food poverty and insecurity.
57. 'Food for Thought' - Food insecurity in 21<sup>st</sup> century Kingston is the result of a range of engagement activities with several local voluntary and community organisations and their beneficiaries during the second half of 2018. The plan

was written and from the plan four main aims have emerged, which if implemented, would make a difference to the lives of Kingston residents experiencing food insecurity:

1. To develop a consistent, co-ordinated, strategic, co-production approach that links to new and existing initiatives locally (e.g. Connected Kingston, Trailblazers, Healthy Start, Foodbank etc.)

2. To explore how the underlying causes of food insecurity can be challenged.

3. To develop innovative, sustainable ways to build food security to improve the health of residents in the borough.

4. To address the issues facing vulnerable and disadvantaged groups who are at risk of experiencing food insecurity.

58. The plan also sets out a range of proposals based on the four aims.

- Determine which agency (ies) would lead on activities
- Set up a reference group, possibly a Kingston Food Partnership, of existing – and potentially new - contributors and other stakeholders, using a simple version of the plan as part of a ‘launch’
- Highlight food insecurity at the Annual KVA Health Conference in early 2019 as a way of consolidating commitment to a realistic and meaningful set of actions
- Agree measurable targets with those involved in implementation.

59. The feedback from the conference and the pledges we received on the day have identified several key stakeholders interested in developing a partnership to address food insecurity in Kingston -so we have already progressed on some of the activities. Yet we have not identified any additional resource to aid implementation and for that reason no timescales have been included in the plan.

60. Overall, the picture locally is that there is enough food in the borough to feed our community. The challenge is to bring together the relevant stakeholders/partners to look at ways to work together, to understand that experiencing food insecurity is not just about feeling hungry or not being able to access healthy food. Food insecurity is a symptom of more complex causes which requires joined-up solutions.

### **Mental health**

61. Part of our remit under the current Health and Social Care Engagement contract is to respond to national, regional and local policy changes that impact on health and wellbeing. To meet this requirement across the local voluntary sector, in terms of offering and disseminating information across our networks and established communication channels, various mental health steering and strategy groups are attended by KVA.

- Attendance and input at the Mental Health and Wellbeing Strategy Planning and Implementation Group (Adult and CYP)
- Attendance and input at the Time to Change steering group
- Emotional Wellbeing Board (CYP)
- KVA representative is 'Time to Change Champion' trained
- Attendance and input at K & R LSCB, member of CYP mental health group of LSCB

62. The challenge for KVA as we move to a new contract with Public Health with a focus on Connected Kingston, is that there is likely to be reduced resource to maintain the same level of engagement in some of these mental health steering and strategy groups.

## HEALTHWATCH KINGSTON

### **Healthwatch Kingston: The ways we work diagram**

63. HWK attended a 'Theory of Change' training hosted by KVA recently and has since developed a headline diagrammatic representation of our work areas. This was shared with local stakeholders at our February HWK Open Meeting and an updated version is provided as **Appendix 1** of this update.

### **HWK Open Meetings and Task Group Activities**

64. HWK continues to run our bi-monthly Open Meetings (next meeting is on Monday 15 April, 12noon to 4.30pm at the Kingston Quaker Centre – all welcome) where we hear updates pertinent to our current work from commissioners and providers and then share our own work developments.

65. HWK currently has four Task Groups made up from local volunteers. These are:

- Community Care Task Group (currently planning an evaluation of user experiences of the social prescribing platform, Connected Kingston)
- Hospital Services Task Group (currently researching patient experiences of discharge from Kingston Hospital, with a particular focus on communication)
- Mental Health Task Group (currently researching service user experiences of the iCope: Kingston Psychological Therapies Service, provided by Camden and Islington NHS Foundation Trust)
- Youth Out Loud! (YOL! is made up of young people from Kingston and Richmond working with Healthwatch Kingston and other partners including Healthwatch Richmond, Royal Borough of Kingston upon Thames, Kingston and Richmond Clinical Commissioning Group and Achieving for Children). Our aim is to support youth voices and understand how young people would improve local services. YOL! have just completed the Kingston Hospital 15 Steps Challenge which invited feedback on pediatric wards and are currently finalising a YOL! film to promote engagement to young people from across Kingston (and Richmond). A YOL! launch event has been confirmed for Monday 8 April – please register attendance at <https://www.eventbrite.co.uk/e/youth-out-loud-launch-event-tickets-58258982>

66. HWK has recently facilitated the second Kingston Safeguarding Adults Community Reference Group out of the Kingston Quaker Centre.
67. In addition, HWK is in the process of finalising Task Group research priorities for 2019-20 and is developing a new Learning Disabilities Task Group of people with a learning disability, their families and carers.

### **All Age Learning Disabilities Partnership Board**

68. HWK provides an independent chair (co-chaired with people living with a learning disability) and administration support to this group to check local commissioning and provision of services meets the needs of people with a learning disability, their families and carers.

### **Kingston Hospital Quality Report 2018-19**

69. HWK is in the process of providing feedback to Kingston Hospital on their draft Quality Report.

### **'Thrive Kinston' Mental Health Strategy Planning and Implementation Group**

70. HWK provides an independent chair and administration support to this group to check local commissioning and provision meets the needs of people who use mental health services.

### **Time to Change Kingston Hub**

71. Time to Change (TTC) Kingston has recently become a funded hub as part of the Tranche 3 funding round. HWK will continue to work with our local partner organisations as the TTC Kingston Hub Coordinator to coordinate a programme of proposed delivery for 18 months (March 2019 to August 2020). There is an assumption (as set out in our bid proposal, that TTC activities will continue in Kingston after this 'funded' period through local volunteer TTC Champions. HWK is progressing plans for recruitment to the TTC Champions Fund Coordinator post, which will be shared with the TTC Steering Group and other partners. It is anticipated this post will begin in June.

### **Time to Change Employer Pledge and Disability Confident Schemes**

72. Detailed action plans have been developed for HWK attainment of these schemes by the end of December 2019.

### **SW London and St George's Hospital (SWLSTG) Strategic Partnership Proposal**

73. HWK has been successful in our partnership application for this £2k fund to deliver community mental health awareness in 2019-20. Activities will include:
  - Reaching out to our young people in the Tamil and Korean communities by promoting a Youth Out Loud! (YOL!) film, raising mental health awareness at

a launch event in October 2019 as part of the SWLSTG World Mental Health Day events. The film will be subtitled in Tamil and Korean to ensure we reach as wide an audience as possible. This is a key opportunity to reach out in BAME communities in Kingston and will build on the work of our YOL! team

- Working in partnership with Mind in Kingston, Kingston Mencap, Fast Minds, Kingston Mental Health Carers' Forum and Time to Change Kingston Champions (as part of our Time to Change Kingston Hub Coordinator role), to run activities/events in Kingston to raise awareness of mental health and wellbeing, services and self-help amongst young people and people living with a learning disability, their families/carers and also vulnerable people.

### **NHS Long Term Plan (LTP)/Health and Care Plan (HCP) engagement - funded by NHS England (NHSE) via Healthwatch England (HWE)**

74. SWL Health and Care Partnership are continuing to work with SWL Healthwatch to finalise our specific roles and focus as part of this engagement. This is an iterative process. The Kingston and Richmond Comms and Engagement Group has prioritised recent agenda time to discuss this (19 Mar). Healthwatch Kingston (HWK) and Healthwatch Richmond (HWR) have requested that NHS SWL and Kingston and Richmond CCG HCP leads clarify the health focus of the HCP engagement asap - this is linked to availability of the local HCP which is due at the end of March. A timeline for delivery of outputs for this work is also being finalised. To date the engagement structure is:
- Prep for SWL Clinical Conference (local literature/intelligence review and possibly focus group work)
  - SWL Clinical Conference (local HW representation at event of patient experience/feedback shared with clinicians)
  - Local HCP engagement (hopefully linked to LTP).
75. SWL HW have agreed to share the coordination work and small amount of NHSE/HWE funding available. SWL HW Chief Officers are keen to clarify the required health focus of each local HW engagement as part of the above because the deadline for reports to NHSE/HWE is 30 June 2019.

### **Involvement in other health and social care governance and transformation**

76. HWK continues to sit on a variety of influential local committees and groups to ensure that local people have a say in decisions such as Kingston CCG governing body and the primary care commissioning committee.

## **HEALTH AND WELLBEING BOARD WORK PROGRAMME**

77. Members of the Board are invited to put forward suggestions for inclusion on future agendas which will be considered by the Co-Chairs.

### **Current scheduled items:**

**6 June 2019 - Private member only workshop meeting (not open to the public)**

### **3 September 2019**

Kingston Safeguarding Adult Board Annual Report 2018/19  
SEND Transformation update  
CAMHS Transformation Plan update

### **19 November 2019**

### **28 January 2020**

### **17 March 2020**

### **Unscheduled items:**

- Refresh of the Dementia Strategy
- Food Poverty Action Plan
- “Prevention is better than Cure our vision to help you live well for longer”, DHSC white paper published 5 Nov
- Update on Mental Health Champions

Board Members are requested to send any additional items to Marian Morrison, Democratic Services Officer ([marian.morrison@kingston.gov.uk](mailto:marian.morrison@kingston.gov.uk)).