



London Health and Care Strategic Partnership Board

18 May, 0930 – 1130, 124A Skipton House

Present

Will Tuckley

Chief Executive, Tower Hamlets Council; Lead Chief Executive nominated to support London Councils' work on health (Co-Chair)
Executive Regional Managing Director, NHS Improvement (Co-Chair)
Accountable Officer, North East London CCGs
Executive Director for Community Services, Lewisham Borough
Assistant Director of Health & Communities, Greater London Authority
Accountable Officer, Croydon & Lambeth CCGs; Chair, Accountable Officers Group, Office of London CCGs

Carolyn Downs

Chief Executive, London Borough of Brent

David Slegg

Director of Finance, London Region, NHS England

Dick Sorabji

Corporate Director: Policy and Public Affairs, London Councils

Ged Curran

Chief Executive, Merton Council

John Goulston

Chief Executive, Croydon Health Services Trust

Julie Lowe

Chief Operating Officer, South East London STP

Lesley Watts

Chief Executive, Chelsea and Westminster Hospital NHS FT

Malcolm Hines

Chief Financial officer, Southwark CCG (for Andrew Bland)

Marc Rowland

Chair, Lewisham CCG; Chair, London Clinical Commissioning Council

Mike Cooke

Chief Executive, London Borough of Camden

Nigel Burgess

Associate Director of Workforce & Information, Health Education England

Paul Jenkins

Chief Executive, Tavistock and Portman NHS FT (for David Sloman)

Rob Larkman

Accountable Officer, North West London CCGs (for Mohini Parmar)

Sarah Blow

Accountable Officer, SWL CCGs; Senior Responsible Officer, SWLSTP

Simon Goodwin

Chief Financial Officer, North Central London CCGs (for Helen Pettersen)

Vin Diwakar

Regional Medical Director, NHS England

Yvonne Doyle

Regional Director, London, Public Health England

Apologies

Jane Cummings

Chief Nursing Officer; Regional Director, NHS England (Co-Chair)

Amanda Pritchard

Chief Executive, Guy's & St Thomas' NHS FT

Amanda Stanford

Chief Inspector of Hospitals, Care Quality Commission

Andrew Blake-Herbert

Chief Executive, London Borough of Havering

Andrew Bland

Chief Officer, Southwark CCG

David Sloman

Chief Executive, Royal Free London NHS FT

Helen Pettersen

Chief Officer and Accountable Officer, North Central London CCGs

John O'Brien

Chief Executive, London Councils

Lisa Bayliss-Pratt

Chief Nurse and Interim Regional Director, Health Education England

Mohini Parmar

Chair, Ealing CCG

Navina Evans

Chief Executive, East London NHS FT

Oliver Shanley

Regional Chief Nurse (London), NHS England and NHS Improvement

In attendance

Geoff Alltimes

Independent Co-Chair, London Estates Board

James Murray

Chief Financial Officer, Kingston CCG

Henry Black

Chief Financial Officer, East London Health & Care Partnership

Daniel Elkeles

Chief Executive, Epsom & St Helier University Hospitals NHS Trust

Khadir Meer

Regional Director of Delivery, NHS England

Shaun Danielli

Director, Healthy London Partnership

Keri Torney

Director of Strategic Partnerships, Healthy London Partnership

Jane Galloway

Deputy Director, London Leadership Academy

Mark Cole

Leadership Programme Manager, London Leadership Academy

#	Note and Actions
1.	<p>Welcome, minutes, actions and conflicts of interest</p> <p>Will Tuckley welcomed members, reflecting that the Board had completed its move to the decision-making phase and it had been a year since the first formal meeting.</p> <p>Yvonne Doyle updated members on tackling childhood obesity, noting in particular the work that had gone into the London Mayor’s Health Inequalities Strategy, due to be published in the summer, and the various asks of the system and of board members contained therein. The London Mayor’s proposed ban on junk food advertising had received positive attention in the press worldwide and was out for consultation. A detailed proposal would come to the July Board meeting, with options for building on London’s approach to tackling childhood obesity and seeking clear commitments from board members.</p> <p>Amanda Coyle introduced Jane Galloway and Marc Cole from the London Leadership Academy, who were in attendance to observe the meeting, and outlined the organisational development proposal for the board. It was agreed to proceed with individual interviews with members over the summer, followed by a workshop in the autumn once the NHS London Regional Director is appointed and in post. It was noted that a place-based approach should be adopted and the views of key stakeholders across the health and care system in London, and the extent to which they feel connected to the board, would be a key consideration.</p> <p>Will Tuckley reminded members of the session on 17 September with colleagues from the Greater Manchester Health and Social Care Partnership and encouraged members to make every effort to attend, to share experiences about devolution and building a citywide health and care partnership.</p> <p>The minutes of the March regular and April extraordinary meeting were agreed as an accurate record of those meetings.</p> <p>There were no declarations of interest.</p>
2.	<p>Current updates including April London Health Board</p> <p>Will Tuckley updated on discussions at the 19 April Health Board. Health Board members had considered the Strategic Partnership Board’s workplan and were keen to see further development on the application of unallocated transformation funding in this and future years. They had also noted progress on estates and requested the estates strategy and capital plan be presented at a future meeting. Health Board members had also discussed mental health support in schools and the London Mayor’s desire to proceed further and faster in this area.</p>

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	<p>Members welcomed the ambitions of the Health Board to make swift progress on mental health in schools and noted the encouraging work underway, particularly in South West London where they are focusing on reducing self-harm in children and young people. They were keen to manage demands on local areas carefully and to ensure the approach was as supportive as possible in meeting local priorities. There are clear links to the work boroughs and schools are doing to tackle knife crime. Members welcomed the opportunity to approach this issue in a different way to support London's children, with broader engagement across health and social care, national partners, communities and young people.</p>
3.	<p>Deep dive on estates, London Estates Strategy and Capital Plan</p> <p>Geoff Alltimes presented the item alongside David Slegg, as Co-Chairs of the London Estates Board. Members had been sighted on earlier versions of the estates strategy and were aware of the scale of the challenge to produce a citywide strategy, alongside development of the capital plan. The aim was to continue to work closely with STPs and to finalise these by the end of July 2018. They were grateful to STPs, who had met many requests and played a considerable role in this work. They were pleased to advise members that Sue Hardy had been appointed as Director of London Estates Delivery Unit.</p> <p>It was noted that the London Estates Board was progressing through the phases described in the devolution agreement and currently in its strategic phase, due to move into shadow decision-making once the estates strategy and pipeline had been published. The move to the final, decision-making phase would be aligned to decisions around the integration of NHS England and NHS Improvement and where responsibility would lie at the regional level.</p> <p>STP members outlined the position within their STP:</p> <ul style="list-style-type: none"> • In North East London, the process had been fairly positive as colleagues grappled with the issues and tested working relationships. There is a complex position in relation to the wide variety of estate and the scale of demographic growth. All partners had been involved and had reached a clear position, based around the clinical model, on which schemes met their prioritisation criteria. The STP was keen to develop an infrastructure strategy working with partners to unlock potential around buying powers to maximise opportunities across the patch. • In North Central London, there has been a consensus on the priorities and engagement from all partners through the local estates board. However, colleagues were mindful that the system is in flux and expectations amongst providers may be difficult to realise. They appreciated the process would be iterative and develop over time. They were keen that messaging from

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	<p>national partners would need to become clearer as this developed.</p> <ul style="list-style-type: none"> • In North West London, the governance arrangements were well established with good engagement from all partners, and a consensus was emerging around priorities, based on their <i>Shaping a Healthier Future</i> clinical strategy. They were clearly focused on transformation but would include backlog maintenance where this could be an enabler. • In South East London, the governance was effective and had worked well over last year with strong relationships across the patch. The overall approach was clear and there was consensus around the local strategy and how it can be strengthened and linked to the emerging London strategy. Key concerns were around ensuring opportunities were maximised, within a complex estate and ensuring services keep up with a growing population and improve. They were keen to explore wider opportunities given capital availability, for example in the form of joint ventures, and to work strategically across London. • In South West London, the local estates strategy was in place and progress was beginning to be made to align this to the clinical strategy. In order to be fit for the future and to enable transformation, this necessarily brought in addressing the backlog and the significant need for capital. A consensus was emerging and work was underway to consider bids and priorities. A particularly large scheme in Epsom and St Helier was being consulted upon and they would be happy to share with colleagues their analysis of the possible funding options. They noted the need, for out of hospital services, to think on a longer-term basis around the retention of capital receipts and managing workforce, to achieve more radical changes and to build something fit for purpose for the longer-term. <p>It was noted that the London STPs were at different stages, with many issues in common as well as differences locally. There were complications in relation to some very large schemes, prioritising primary and community services, a lack of capital availability and the NHS Property Service being the owners of property whilst at the same time not being players within localities. Wider issues such as regeneration added further complexity. The London Estates Board would manage the current bidding process whilst seeking to take greater control of the capital plan in London over time.</p> <p>Members welcomed the approach that had been taken and endorsed the current draft of the London Estates Strategy, noting further engagement was needed ahead of signing off the final version. They noted this will be challenging and will rely on ongoing collective efforts and the prioritisation of schemes against the available resource.</p> <p>The estates strategy should seek to demonstrate its value through the financial and managerial rigour it brings to a consistent approach to achieving London's</p>

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	<p>transformation objectives. For example, in relation to population growth, addressing housing needs and transforming the quality of health and care to make Londoners healthier. This could potentially help overcome difficulties in delivering specialist services differently across London.</p> <p>The London Estates Board in bringing coherence to London would need to support the effective prioritisation of schemes with proper clinical engagement and links to digital transformation. Scenario planning on the implication for STPs and handling difficult issues would be an important preparation.</p> <p>Action: To develop a narrative on estates that can be engaged upon more broadly, including with the public and politicians.</p> <p>Action: To take forward scenario planning to prepare for handling difficult prioritisation issues before they arise.</p>
4.	<p>Transformation Funding</p> <p>David Slegg presented the updated transformation funding allocations for the 2018/19 financial year, noting that there was an ongoing bidding process which may give rise to further changes. He also outlined the membership of the newly formed Transformation Funding Oversight Group, which was due to meet in early July.</p> <p>Members welcomed the establishment of the oversight group, which would play an important role in maximising the opportunities around devolution and further integration to drive transformation. It would be critical to involve all partners.</p> <p>Action: Clinical representation to be considered for the Transformation Funding Oversight Group.</p>
5.	<p>Integration</p> <p>Will Tuckley presented the paper, building on previous discussions and illustrating examples of enablers to integration and potential areas of focus. He set these out in the context of ongoing discussions at the national level on the integrated care systems agenda and national support available.</p> <p>There was a great deal of interest in this at all spatial levels and energy in the system to push this agenda forward. Members were supportive of the process and efforts to align the national support with local objectives.</p> <p>The complexity of the system and of working at multi-borough and STP levels is a particular issue for London with unique challenges. Some of this was well understood from the devolution pilots, which existed at various spatial levels in London, but systems would need to be able to tailor their approach in light of local considerations.</p>

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	<p>It is essential that positive examples are supported and replicated across London and that any barriers are highlighted and addressed. The approach should be to work closely with partners and to invite systems to come forward to indicate their areas of interest and to highlight any barriers they face.</p> <p>Action: To invite systems to come forward with expressions of interest in the integration focus areas and to highlight any barriers they face.</p>
6.	<p>Partnership Comms and Engagement Strategy</p> <p>Keri Torney presented the paper on behalf of Una Carney, setting out the approach being taken. The aim was to tell the story of devolution through the eyes of Londoners, to bring it to life and give it meaning. She also advised members that the London Health Board conference had been delayed until the autumn.</p> <p>Members suggested the regional strategy should link more closely with the STP's communications infrastructure that is now in place.</p> <p>Action: To work closely with STP communication teams in further developing the communications and engagement strategy.</p> <p>Action: A proposal to be brought to the July board on patient and public engagement.</p>
7.	<p>AOB</p> <p>None</p>

Action Log

#	Action	Deadline	Owner	Status
1.	To take forward scenario planning to prepare for handling difficult prioritisation issues before they arise.	August 2018	Geoff Alltimes / David Slegg	In progress
2.	To work closely with STP communication teams in further developing the communications and engagement strategy.	July 2018	Una Carney	In progress
3.	To take forward the organisational development work through the London Leadership Academy.	27 April 2018	Amanda Coyle	Complete
4.	A detailed proposal on tackling childhood obesity to be considered at the next meeting.	July 2018	Yvonne Doyle	July SPB agenda
5.	To develop a narrative on estates that can be engaged upon more broadly, including with the public and politicians.	August 2018	Geoff Alltimes / David Slegg	Complete
6.	Clinical representation to be considered for the Transformation Funding Oversight Group.	June 2018	David Slegg	Complete
7.	To invite systems to come forward with expressions of interest in the integration focus areas and to highlight any barriers they face.	June 2018	Nabihah Sachedina	Complete
8.	A proposal to be brought to the July board on patient and public engagement.	July 2018	Una Carney	July SPB agenda – focus of the Board
9.	To review learning from the Nottinghamshire approach	March 2018	Jane Barnacle	Complete
10.	To present the priorities and actions for 18/19 for Information and Technology in London to the Strategic Partnership Board.	July 2018	Jane Barnacle	July SPB agenda