

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 16 November 2017.

PRESENT

Leicestershire County Council

Mr. R. Blunt CC  
Mr. I. D. Ould CC

Mike Sandys  
Jon Wilson

Clinical Commissioning Groups

Dr Andy Ker (in the Chair)  
Caroline Trevithick  
Dr Chris Trzcinski  
Paul Gibara

Leicestershire District and Borough Councils

Jane Toman

Healthwatch Leicestershire

Rick Moore

Leicestershire Partnership NHS Trust

Dr Satheesh Kumar

University Hospitals Leicester

Mark Wightman

Leicestershire Police

Sian Walls

Office of the Police and Crime Commissioner

Simon Down

30. Minutes and Action Log.

The minutes of the meeting held on 20 July 2017 were taken as read, confirmed and signed.

The Board also noted the Action Log, which provided an update on actions agreed by the Board at its previous meetings.

31. Urgent Items.

There were no urgent items for consideration.

32. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Rick Moore declared a disclosable pecuniary interest in the report on Healthwatch Recommissioning (Minute Number 40 ) as he was the Chairman of Healthwatch Leicestershire and undertook to leave the room during discussion of that item.

33. Position Statement from the Chairman.

The Chairman presented a position statement on the following matters:

- Supporting People to Stay Fit and Healthy campaign
- Leicestershire's Lightbulb Housing Programme winning an award
- An app for Suicide Prevention
- Improving Health and Wellbeing in the Workplace
- A selection of regional, national and international publications

A copy of the position statement is filed with these minutes.

34. Air Quality.

The Board considered a report of the Director of Public Health providing an update on the estimated impact of poor air quality on the health and wellbeing of people living and working in Leicestershire and the approach the Public Health Department and its partners were taking to tackle this. A copy of the report, marked 'Agenda Item 5', is filed with these minutes.

A discussion took place around housing developments, some of which were being built near major roads, and the fact that any development should be considering transport implications in its planning application as this could impact on local air quality. Work could take place with the district councils around this and it was also suggested that a link should be made with the Institute for Lung Health at Glenfield Hospital.

RESOLVED:

That the Board notes the significant impact of poor air quality on health and supports the action being taken to tackle this for people living and working in Leicestershire.

35. Future in Mind Update.

The Board received a presentation from Better Care Together on Future in Mind – transforming mental health and wellbeing services for children and young people across Leicester, Leicestershire and Rutland (LLR). A copy of the presentation, marked 'Agenda Item 6' is filed with these minutes.

A stakeholder event had taken place on 3 October where progress to date had been reviewed along with developing the way forward. Partners had agreed that the focus of the next stage of transformation should be improved performance and outcomes,

improved access, marketing and engagement and workforce development. The draft Transformation Plan 2017 had now been developed and this would be shared with partners prior to it being published. The role and responsibility of key partners and the Future in Mind Steering Group would also be reviewed.

The number of children and young people presenting and A&E had not decreased and further work was required around informing young people of the alternatives to A&E in order that they presented at a setting appropriate to their needs. In the next phase of transformation, work would be undertaken to develop a way to accurately report the data so that there was evidence that the service was working and was making a difference. Access to services away from main centres was still an issue and discussions were taking place around the possibility of delivering care closer to a young person's home.

RESOLVED:

That the contents of the presentation be noted.

### 36. CAMHS.

The Board received a presentation from Leicestershire Partnership Trust on the CAMHS Recovery Journey following the 'inadequate' assessment by the Care Quality Commission (CQC). A copy of the presentation is filed with these minutes.

Following a CQC inspection, the CAMHS Community Services had been rated as inadequate, in particular with regard to safety and responsiveness. The CAMHS Recovery and Improvement team had undertaken an operational 'deep dive' into all open cases across the CAMHS service and this had identified that almost half of the children and young people did not have an adequate risk assessment or complete care plan. This number had now been significantly reduced and a traffic light system had been implemented to manage the risk for those young people who were waiting for an appointment.

Work had been undertaken to ensure services were responsive to the internal waiting list. No one was now waiting over twelve months for an appointment and the next key milestone was to ensure that no one was waiting more than nine months. Assurance was given that there were processes in place to keep young people safe whilst they were waiting for an appointment and within the next few months, an SMS and telephone service would be introduced.

Activity around improvement and transformation was ongoing to ensure the services were well led. This included the launch of Thrive, which was a new model of CAMHS provision. A presentation around CAMHS was also due to be delivered to the Safeguarding Children Board.

In response to a query around the proposed actions supporting the sustainability of the service, it was stated that the approach taken had been very direct. Work had been undertaken with staff to design the future of the service and a Sustainability Plan had been developed. There had been a change in personnel and opportunities to link research practice with service delivery. It was important that there was confidence that the changes had been embedded at every level and that partnership working with other organisations continued.

RESOLVED:

That the contents of the presentation be noted.

37. Annual Report of the Director of Public Health.

The Board considered a report of the Director of Public Health on the Annual Report for 2017. A copy of the report, marked as 'Agenda Item 8', is filed with these minutes.

Work was being undertaken around an assessment of the link between health and crime. A workshop had been undertaken where joint priorities had been identified and this would be presented to the District Partnership Boards and the next Health and Wellbeing Board.

The Board asked the Director of Public Health to consider providing a detailed breakdown of the data to partners by locality and by specific groups of patients.

RESOLVED:

- (a) That the Board notes the Director of Public Health Annual Report for 2017;
- (b) That the Board notes the recommendations in the report.

38. Delayed Transfers of Care Target, Performance and Risk Analysis.

The Board considered a report of the Director of Health and Care Integration giving an update on the target for improving delayed transfers of care (DTC), including the implications of the target imposed by NHS England as part of the Better Care Fund (BCF) Policy. The report also detailed the work undertaken to date by the County Council and NHS partners to reduce DTC. A copy of the report, marked 'Agenda Item 9' is filed with these minutes. A supplementary paper setting out the position on DTCs at the end of September 2017 was circulated at the meeting and a copy is filed with these minutes.

The DTC target had been re-submitted to NHS England on 12 October and the BCF Plan had been approved based on the revised target. The Plan was on target to deliver early in the new year, although NHS England had requested that the target be met by November 2017. Leicestershire had reluctantly signed up to this requirement, recognising that achievement of this would be challenging. As yet, it was unclear what penalties would be imposed if the target was not achieved by November, but it was reported that the risk of escalation by NHS England was diminishing.

The Board wished to record its thanks and recognition of the work undertaken by the operational teams, which had been put under a lot of pressure to try and achieve the target.

RESOLVED:

- (a) That the Board receives the progress report;
- (b) That the Board notes the revision to the risk register and significant risks if escalated on the basis of target failure if the target is not reached by November;
- (c) That the Board notes the actions in progress as noted in the report and the supporting monthly digest;

(d) That the Board notes that the report has been forwarded to the Discharge Working Group and Director of Urgent Care for Leicester, Leicestershire and Rutland (LLR) in support of their oversight of DTOC performance on an LLR-wide basis.

39. Quick Poll: Views About GP Services.

The Board considered a report of Healthwatch Leicestershire presenting the findings of a quick poll survey asking patients their views on GP services. A copy of the report, marked 'Agenda Item 10', is filed with these minutes.

There had been 240 responses to the survey. The emerging findings were presented and based on the experiences shared by respondents, Healthwatch Leicestershire had suggested a number of recommendations for service providers and commissioners. The CCGs welcomed the report and acknowledged that there were issues when trying to access a GP service. Further discussions would take place around the recommendations.

RESOLVED:

That the findings be noted and to urge health and social care partners to consider actions associated to the report recommendations to improve services, systems and processes outlined in the findings report.

40. Healthwatch Re-Commissioning.

The Board considered a report of the Chief Executive providing an update on progress with recommissioning a Healthwatch service for Leicestershire. A copy of the report, marked 'Agenda Item 11', is filed with these minutes.

A public consultation on proposals for a LLR Healthwatch service had taken place and a total of 390 responses had been received. In light of the consultation responses, Rutland County Council had decided to separately procure a Healthwatch service and Leicester City Council and Leicestershire County Council would jointly commission a service. The joint Leicester and Leicestershire contract would be tendered in November and the new service would commence on 1 April 2018.

RESOLVED:

That the report be noted.

41. Protocol between the Health and Wellbeing Board, the Health Overview and Scrutiny Committee and Healthwatch Leicestershire.

The Board considered a report of the Chief Executive seeking approval of the protocol between the Health and Wellbeing Board, Health Overview and Scrutiny Committee and Healthwatch Leicestershire. This document had been revised in the light of experience and recent changes such as the introduction of the Sustainability and Transformation Plan (STP). A copy of the report, marked 'Agenda Item 12', is filed with these minutes.

It would be important to ensure that the protocol remained relevant following the commissioning of a single Healthwatch for Leicester and Leicestershire.

RESOLVED:

That the protocol be approved.

42. Actions Taken by the Chief Executive between Meetings.

The Board considered a report informing of urgent actions taken by the Chief Executive following the agreement to cancel the meeting of the Health and Wellbeing Board on 21 September. The County Council's Constitution gave power to the Chief Executive to take action between meetings which he considered was urgent after consultation with the Chairman of the Board. A copy of the report, marked 'Agenda Item 13', is filed with these minutes.

RESOLVED:

That the urgent action taken by the Chief Executive under delegated powers, following consultation with the Chairman of the Board, be noted.

43. Dates of Future Meetings.

Future meetings of the Health and Wellbeing Board would be held at 2.00pm on the following dates:

25 January 2018

22 March 2018

24 May 2018

12 July 2018

27 September 2018

29 November 2018

2.00 – 3.50pm  
16 November 2017

CHAIRMAN