

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 26 September 2019.

PRESENT

Leicestershire County Council

Mr. L. Breckon JP CC (in the Chair)	Mike Sandys
Mr R. Blunt CC	John Sinnott
Mr. I. D. Ould CC	Peter Davis
Mrs. C. M. Radford CC	

Clinical Commissioning Groups

Dr Mayur Lakhani  
Paul Gibara

Leicestershire District and Borough Councils

Cllr. J. Kaufman  
Cllr. P. King  
Jane Toman

Healthwatch

Harsha Kotecha

In attendance

Mark Wightman	University Hospital of Leicester
Simon Down	Office of the Police and Crime Commission
Helen Thompson	Leicestershire Partnership Trust

Apologies

Karen English, DPCC Kirk Master, Jane Moore, Micheal Smith, Caroline Trevithick, Rachel Bilsborough and Jon Wilson

178. Minutes of the previous meeting.

The minutes of the meeting held on 11 July 2019 were taken as read, confirmed and signed subject to Mrs C. M. Radford CC's apologies being noted.

179. Urgent items.

There were no urgent items for consideration.

180. 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.

Cllr. P. King declared a personal interest in regard to the substantive items on the agenda as a Trustee and Vice Chairman of the Carers Centre, Leicestershire and Rutland.

181. Position Statement by the Chairman.

The Chairman presented a position statement on the following matters:-

- Suicide Prevention Campaign
- Violence Reduction Network
- 5 Ways to Wellbeing – Mental Health Self Care Campaign Update
- Preparation for Stoptober
- Professor Cheryl Davenport

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

182. Leicestershire and Rutland Safeguarding Adults Board Annual Report.

The Board considered a report of the Independent Chairman of the Leicestershire and Rutland Local Safeguarding Adult Board which presented the Boards' draft Annual Report for 2018/19. A copy of the report, marked 'Agenda item 5', is filed with these minutes.

The Director of Adults and Communities, who presented the report on behalf of the Independent Chairman, said that the Annual Report identified the importance of partnership working to keep adults who were at risk of neglect and abuse, safe. As part of this a new approach to prevention of safeguarding need through links with community safety Joint Action Groups in Rutland had been undertaken.

It was recognised that the 2018/19 Annual Report lacked detail of the Safeguarding Board's approach to helping the homeless/ rough sleepers and this would be explored in future through the Board's working groups.

RESOLVED:

That the Leicestershire and Rutland Safeguarding Adults Board Annual Report for 2018/19 be noted.

183. Leicestershire and Rutland Safeguarding Childrens Board Annual Report.

The Board considered a report of the Independent Chairman of the Leicestershire and Rutland Local Safeguarding Children Board (LRLSCB) which presented the Boards' draft Annual Report for 2018/19. A copy of the report, marked 'Agenda item 6', is filed with these minutes.

It was noted that the LRLSCB would cease on 25 September 2019 and would be replaced by multi-agency safeguarding arrangements which would be managed through the Leicestershire and Rutland Safeguarding Children Partnership. Operationally, it was

the intention that there would be little difference to what was currently in place; the most significant change would see equal and joint responsibility shared between the statutory partners.

In reference to the risks to young people as a result of their families not being able to access quality housing provision, it was noted that the Board had worked alongside District Councils and commissioners of safeguarding arrangements to manage housing issues.

It was noted that Adverse Childhood Experiences (ACE) continued to be a significant issue in Leicestershire. Whilst awareness of ACEs had risen, particularly amongst GPs, it remained difficult to measure the cumulative effect and overall impact on health services. The matter was discussed at a recent safeguarding conference and it was considered beneficial for the Health and Wellbeing Board to receive a report detailing the agreed outcomes.

**RESOLVED:**

- a) That the Leicestershire and Rutland Safeguarding Children Board Annual Report for 2018/19 be noted;
- b) That a report concerning the outputs and recommendations arising from the workshop on Adverse Childhood Experiences hosted by the Children and Families Partnership Board in September be considered by the Health and Wellbeing Board at its meeting in November.

**184. Developing a New Place- Based Health and Wellbeing Outcomes Framework for Leicestershire.**

The Board considered a report by the Director of Health and Care Integration which sought feedback on a draft version of a new place-based dashboard which was intended to provide an overview of outcomes and service delivery within the place tier of Leicestershire. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

Arising from discussion the following points were noted;

- Modifications would be made to the dashboard in order for it to show whether the data fields were reporting residential populations or registered GP populations. This would enable a distinction to be made to recognise those residents living in Leicestershire but who may be registered with GP practices outside of the County. The use of other neighbouring CCG health information to capture similar data for those using health services outside of the County would also be explored.
- The draft dashboard predominately focused on health indicators and there was scope to include other social determinants such as education, employment, poverty and housing which all impacted health outcomes.
- The element of the dashboard relating to the support received by patients in community facilities highlighted ongoing issues concerning access to Children's and Adolescent Mental Health Services (CAMHS). Whilst it was understood improvements were being made to the time young people were having to wait to access CAMHS services and changes were being made to the way in which

services were commissioned, it was acknowledged that the issue required ongoing review by the Board.

- It was recognised that due to many of the data sets used to populate the dashboard being new and using recent data, it would benefit from several more quarters of data in order for a more accurate assessment to be presented. The Health and Wellbeing Board would consider the dashboard on a quarterly basis.

RESOLVED:

- a) That the feedback on the progress to date on the development of a new place-based dashboard be noted;
- b) That it be noted:
  - I. That the Leicestershire Integration Executive will oversee further developments of this dashboard, on behalf of the Health and Wellbeing Board, working with respective subgroups of the Health and Wellbeing Board and of the Integration Executive.
  - II. That the Integration Executive will receive the dashboard bi-monthly meetings, the Integration Delivery Group and Joint Commissioning Forum will receive the dashboard monthly, and the Health and Wellbeing Board to receive it quarterly.
  - III. That the Leicestershire Integration Executive will ensure coordination with those officers developing the LLR-wide and Neighbourhood level dashboards, to ensure consistency for those metrics that require reporting at all 3 levels, also to avoid unnecessary duplication and to agree the tier(s) of reporting required for specific metrics
  - IV. That there will be a report at a future meeting of the Health and Wellbeing Board about the developing of Primary Care Networks dashboards.
- c) That the Director of Health and Care Integration arrange for the Health and Wellbeing Board and other multi agency representatives to jointly consider the overall provision, effectiveness and outcomes of services supporting the mental health of children and young people in Leicestershire.

185. Housing Developments across Leicestershire over the next 10 years.

The Board considered a report of the Joint Strategic Planning Manager for Leicester and Leicestershire which provided an overview of recent housing completions and the number of houses planned in the future, along with information concerning current engagement with health partners in relation to the provision of future housing. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

Arising from discussion the following points were noted:

- In addition to the creation of individual local plans, local planning authorities, the County Council (as the highway authority) the City Council and the Leicester and Leicestershire Enterprise Partnership had combined to produce the Strategic

Growth Plan (SGP) which set out a strategy for the development of Leicester and Leicestershire for the period up to 2050.

- As set out in the SGP, the future development of Leicester and Leicestershire would be based on the ambition of ensuring developments were accompanied with the necessary infrastructure. The Plan also expressed the intention to shift the focus of development from small and medium sized sites which put considerable pressure on existing health and educational resources and focused instead on the ambition to develop in major strategic locations which benefited from transport corridors, were close to employment centres and could benefit from other community infrastructure/active design elements.
- The ability to access and then spend allocated Section 106 contributions was vital. It required partners, including healthcare providers to engage with planning officers at an early stage in order for their requirements to be considered.
- Work to address the rising numbers of Homelessness within the County was ongoing. Partners had benefited from access to Step Down funding but progress was slow. The availability of housing for those who were unable to afford their own homes was important, not only for the individuals concerned, but also for health services which would avoid additional costs often associated with admissions to statutory health services relating to homelessness. Engagement with developers to help them understand what provision was required for those in need of affordable accommodation and where best for it to be located, was ongoing.

RESOLVED:

- a) That the information provided concerning the recent housing completions and the number of houses planned in Leicester and Leicestershire be noted;
- b) That the County Council advise how best representatives of the County's Clinical Commissioning Groups and NHS Trusts could liaise with the local planning authorities to discuss a more systematic approach to the management of Section 106 contributions.

186. Active Design in New County Housing Developments.

The Board considered a report of the Director of Public Health which provided the Board with an update concerning the incorporation of active design principles into new housing developments in Leicestershire. A copy of the report marked 'Agenda item 9' is filed with these minutes.

It was noted that there was provision in many of the planning authorities' local growth plans to consider active design when developing plans for new housing. Developments had to be in line with national planning design codes.

In reference to the types of housing being built in new developments, specifically for older people, there were national standards aligned to the development of life long and sustainable homes and it was important for relevant partners to stress the importance of such a provision.

RESOLVED:

That the Council's approach to help create healthy communities be welcomed and supported.

187. Joint Strategic Needs Assessment - Multimorbidity and Frailty.

The Board considered a report and presentation of the Director of Public Health concerning the findings and recommendations arising from the Joint Strategy Needs Assessment (JSNA) Multimorbidity and Frailty Chapter. A copy of both documents is filed with these minutes.

The Director reported that the JSNA chapter had identified a trend by which multimorbidity ( where an individual suffered from two or more chronic medical conditions) caused greater emergency admission costs compared to those based on age.

Members agreed that it was important for the recommendations arising from the chapter to be shared with Primary Care Networks and partners be encouraged to work together at a place level.

RESOLVED:

That the recommendations of the Joint Strategic Needs Assessment - Multi Morbidity and Frailty be welcomed and supported.

188. Mental Health Standards and Local Investment Plans from 2019/20 Onwards.

The Board considered a report of the Leicester, Leicestershire and Rutland Clinical Commissioning Groups (CCG) which detailed their investments into mental health services in 2019/20. A copy of the report marked 'Agenda item 11' is filed with these minutes.

It was noted that the CCGs were in the process of developing a five year Commissioning Plan which would identify the intended spend from April 2020. The Plan would include provision for an increase in spend on Mental Health Services. The Health and Wellbeing Board would consider a report at a future meeting concerning how the extra spend would be allocated and the expected benefits arising from the increase.

RESOLVED:

That a further report on the expected impact of the planned increased investments in Mental Health be considered by the Health and Wellbeing Board at a future meeting.

189. Better Care Fund Plan 2019/20.

The Board considered a report of the Director of Health and Care Integration which sought approval for the Leicestershire Better Care Fund Plan for 2019/20 to be submitted to NHS England. A copy of the report marked 'Agenda item 12' is filed with these minutes.

Members welcomed the Plan and noted the extensive work and thorough engagement which had been undertaken to prepare the Plan for submission.

RESOLVED:

That the Better Care Fund Plan for 2019/20 be approved for submission to NHS England.

190. Health and Wellbeing Board Governance Arrangements and Sub Structure.

The Board considered a report of the Director of Health and Care Integration which provided an update on revisions to the structure of sub groups in support of the Board. A copy of the report marked 'Agenda item 13' is filed with these minutes.

In reference to the links between district councils and health partners, it was noted that whilst further development of links at a place level would be beneficial, collaboration at a neighbourhood level was on going and the relevant parties were represented on the Health and Wellbeing Board.

RESOLVED:

- a) That the changes to the sub structure and governance arrangements being undertaken during 2019/20 be approved.
- b) That the Director of Health and Care Integration be requested to carry out a further review of place based governance in 2020, once:
  - I. the new CCG Accountable Officer is in post and the CCG is reconfigured;
  - II. There is further clarity about the governance arrangements at the system, place and neighbourhood tiers within the emerging LLR Integrated Care System;
  - III. The BCF policy framework for 2020 onwards is communicated and other related policy matters linked to the work of the Health and Wellbeing Board are clearer (e.g. the medium term policy and funding position for adult social care).

191. Date of next meeting.

It was noted that the next meeting of the Health and Wellbeing Board would be held on Thursday 28 November 2019.

2.00 - 4.10 pm  
26 September 2019

CHAIRMAN