

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 26 May 2022.

PRESENT

Leicestershire County Council

Mrs H. L. Richardson CC
Mike Sandys
Tracy Ward

Clinical Commissioning Groups

Dr. Vivek Varakantam
Dr. Mayor Lakhani
Ket Chudasama
Caroline Trevithick

District Councils

Cllr Cheryl Cashmore
Cllr. J. Kaufman
Edd de Coverly

In attendance

Aimee Geary (UHL)
Mark Powell (LPT)
Gemma Barrow (Healthwatch)
Kash Bhayani (Healthwatch)
Ch. Insp Audrey Danvers (Leicestershire Police)

Apologies

Mrs. D. Taylor CC, Mrs. C. M. Radford CC, Jane Moore, Rupert Matthews, Hayley Jackson, Harsha Kotecha, Ch. Supt Jonny Starbuck, Rachna Vyas, Andy Williams, Sarah Prema, Jon Wilson, Richard Mitchell, John Sinnott.

49. Appointment of Chairman.

That Mrs L. Richardson CC be appointed Chairman for the period ending with the date of the Annual Meeting of the County Council in 2023.

Mrs. L. Richardson CC in the Chair

50. Minutes of the previous meeting.

The minutes of the meeting held on 24 February 2022 were taken as read, confirmed and signed.

51. Urgent items.

There were no urgent items for consideration.

52. 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. J. Kaufman declared a Non Registerable interest in regard to the substantive items on the agenda as his son worked for the NHS.

53. Position Statement by the Chairman.

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

- Local pressures being experienced by health and social care providers.
- The Getting Help in Neighbourhood' Adults Mental Health Fund
- The work of Healthwatch
- The County Council's Net Zero Strategy and Action Plan

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

RESOLVED:

That the position statement be noted.

54. Leicestershire Joint Health and Wellbeing Strategy 2022 - 2032 Progress Update.

The Board considered a report of the Director of Public Health which provided an update on the progress made in the initial stages of delivery of the Leicestershire Joint Health and Wellbeing Strategy (JHWS) 2022-2032. A copy of the report, marked 'Agenda Item 6', is filed with these minutes.

Arising from discussion the following points were noted;

- Indicator sets had been produced for each life course stage which would enable the Board and its subgroups to monitor the implementation of the JHWS. It was important the insight gained from the dashboard was developed and used effectively to aid delivery.
- Seeking the views of the population as to whether they believed the implementation of the Strategy was improving Health and Wellbeing in the County was important. A range of indicators had been included which focused on gaining patient feedback via various sources, including service feedback and those gathered via methods outlined in the communications and engagement Strategy.
- It was noted that the dashboard would evolve as delivery of the Strategy progressed and further work would be undertaken to consider how it could link into

the wider population health management approach, to be considered at System, Place and Neighbourhood level.

- It was crucial that the work of the Board, its subgroups and the wider system avoided both silo working and duplication. It was recognised that whilst the structure of the subgroups did allow for clear accountability in terms of which group was responsible for overseeing the delivery of the various life courses for which the Strategy was based, there would be areas of work which covered the whole life course and therefore would be considered by more than one of the subgroups. Further work would be undertaken to ensure this was undertaken effectively. It was noted that it was also the role for Health and Wellbeing Board members to ensure their own organisations were working collaboratively.
- The easy read version of the Strategy was welcomed and it was crucial copies of the Strategy, including versions in other languages, were readily available in the community.

RESOLVED:

That the initial progress made in delivering the Joint Health and Wellbeing Strategy be noted.

55. Better Care Fund 2021/22 Quarter 4 Performance.

The Board considered a report of the Director of Adults and Communities which provided an update on the performance of the Better Care Fund (BCF) programme for 2021/22 and the associated national annual year end reporting requirements. The report also sought approval for the submission of the year end template. A copy of the report, marked 'Agenda item 7', is filed with these minutes.

It was noted that in reference to the performance against the BCF metrics for the 21/22 Plan, revised confidence level population data was expected to be published shortly and once this was received the indicators would be updated accordingly.

RESOLVED:

- a) That performance against the Better Care Fund (BCF) outcome metrics, and the positive progress made in transforming health and care pathways in 2021/22 be noted;
- b) That the year-end BCF 2021-22 template, attached as the appendix to the report, be approved for submission to NHS England.

56. Pharmaceutical Needs Assessment 2022 - Progress Update and Pre-Consultation Draft.

The Board considered a report of the Director of Public Health which provided an update on work undertaken to produce the draft Pharmaceutical Needs Assessment (PNA) 2022 and to seek approval to consult on the draft document. A copy of the report, marked 'Agenda item 8', is filed with these minutes.

Arising from discussion the following points were noted;

- As part of the development of the draft PNA, two surveys had been in circulation throughout the spring seeking the views of users and pharmaceutical professionals. In reference to the initial findings, it was noted that the community based pharmacies were meeting the needs of the population for both essential and advanced services. The surveys had however highlighted several potential issues, including the lack of public transport provision to access pharmacies, especially in east Leicestershire, an issue which would need to be kept under review.
- The surveys would continue to be used during the consultation period along with other methods in order to consult the necessary stakeholders as set out in the Pharmaceutical services regulations.
- In regards to future needs of pharmacies, particularly in response to new housing developments, a clearer picture would be known once further data became available in the coming months , including new census figures which were expected in late June and the findings of a housing and employment needs assessment which was being undertaken.
- In relation to access to out of hours pharmacy services, partners were aware of concerns raised with regard to the distance patients were required to travel between the hospital/surgery where prescriptions were issued and where they were fulfilled. This would be further explored during the formal consultation.
- The pandemic had highlighted the vital role pharmacies played in the Community and the PNA provided the opportunity to focus on the future role of pharmacies as an integral part of the community.
- Work being undertaken via the Integrated Care Board with regard to prescribing and medicines optimisation work would compliment the development of the PNA and would therefore be shared accordingly, along with data concerning the availability of pharmacy access within hospitals which had not been fully reflected in the draft PNA .

RESOLVED:

- a) That the work undertaken to produce the draft Pharmaceutical Needs Assessment (PNA) 2022, which has been developed in line with the findings of public and pharmacy survey, be noted;
- b) That the draft PNA be approved for consultation;
- c) That it be noted that a further report will be considered by the Health and Wellbeing Board in September 2022 which detailing the outcome of the consultation and seeking approval of the final PNA.

57. Reducing Health Inequalities - Core20Plus5

The Board considered a report of the Leicester, Leicestershire and Rutland (LLR) CCG's Executive Director for Strategy and Planning concerning the NHS requirement to deliver against the CORE20Plus5 to support wider work to reduce health inequalities across LLR. A copy of the report, marked 'Agenda item 9', is filed with these minutes.

Arising from discussion the following points were noted:

- It was noted that the Joint Health and Wellbeing Strategy had a clear cross cutting theme of reducing health inequalities and therefore the CORE20Plus5 approach would add value to the work already being undertaken at place level.
- There were also other pieces of work which were being undertaken at place and neighbourhood level, the findings of which would be used to shape the CORE20Plus5 approach. An example was the understanding gained in relation to Covid-19 vaccination uptake, which could be utilised as part of the screening and immunisation element of the approach.
- In reference to the selection of the Leicestershire CORE20Plus5 cohort/s, it was noted that further work would be undertaken to identify the right group/s. It was likely the initial findings would be considered by the Staying Healthy Partnership (a subgroup of the Health and Wellbeing Board) and shared with other partner groups such as the Community Safety Partnership. The Health and Wellbeing Board would be asked to approve the makeup of the cohorts at a future meeting.
- Delivery of the approach would require a variety of aims, objectives and actions across system, place and neighbourhood level. At a system level the focus would be on the LLR Health and Inequalities Framework and how the delivery plan would align with the framework, the progress of which would be monitored via the Integrated Care Board. From a place perspective, the approach aligned to the Joint Health and Wellbeing Strategy. The approach would need to filter down to each locality to ensure there was alignment within neighbourhood working.

RESOLVED:

That it be noted that further work would be undertaken to agree an initial focus on a Leicestershire population cohort(s) who already experience health inequities, to become a cohort of the Core20Plus5 approach, with a further report presenting the outcome being considered at a future meeting of the Board.

58. Proposals for the Role and Format of the Leicester, Leicestershire and Rutland Integrated Care Partnership.

The Board considered a report of the County Council and City Council's Directors of Public Health which provided information concerning the role, priorities, enablers and format of the newly formed Integrated Care Partnerships (ICP), to be locally known as the LLR Health and Wellbeing Partnership. A copy of the report, marked 'Agenda item 10', is filed with these minutes.

It was noted that the ICP was a partnership forum which would support health, care and wellbeing opportunities at the LLR system level. The Leicestershire Health and Wellbeing Board would continue to perform its role at a place level (Leicestershire) and there was no hierarchy between system and place, however the links between the two boards would be important.

In reference to the proposed membership of the ICP, it was proposed that it would include representatives of the three LLR Health and Wellbeing Boards which would be complimented by a smaller subgroup to focus on performance monitoring of the system level work. Further work would be undertaken to formalise the membership and to

ensure there necessary links were in place to call upon additional expertise when required.

In response to questions concerning the role of district representation at a system level, it was noted that partners were aware of the importance of work being undertaken at neighbourhood and place level being filtered into planning at a system level. Consideration was being given to how the three health and wellbeing boards could be brought together in the form of workshops to consider specific challenging issues across LLR, which would include district representatives.

Further work would be undertaken to consider specific elements of work the ICP would focus on. It was recognised that some areas which the LLR Health and Wellbeing Boards focused on would also benefit from system wide consideration and the ICP would be the ideal forum. It was noted that approval of the Better Care Fund for Leicestershire would remain the responsibility of the Health and Wellbeing Board.

RESOLVED:

That the report be noted.

59. Community Health and Wellbeing Plans.

The Board considered a report of the Leicester, Leicestershire and Rutland CCG's Executive Director for Strategy and Planning concerning the intended approach for the development of the Community Health and Wellbeing Plans (CHWP's) across Leicestershire. A copy of the report, marked 'Agenda item 11' is filed with these minutes.

In response to a questions from members, it was noted that where possible, agreement with PCNs was sought so that they supported the CHWPs (which were based on district footprints) which covered the practices they served and aligned their work accordingly.

RESOLVED:

- a) That the purpose of the seven Community Health and Wellbeing Plans being developed across Leicestershire be noted;
- b) That the proposed approaches to governance and footprints of the plans be noted;
- c) That the links between the plans, the Joint Health and Wellbeing Strategy and other place-based plans be noted.

60. Date of Next Meeting

It was noted that the next meeting of the Health and Wellbeing Board would be held on the Thursday 22 September at 2.00pm.