Agenda Item 1



Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 5 January 2017.

PRESENT

Leicestershire County Council

Mr. E. F. White CC (In the Chair)
Mr. Dave Houseman MBE, CC
Mr. I. D. Ould CC

Paul Meredith Mike Sandys John Sinnott Jon Wilson

Clinical Commissioning Groups

Karen English Prof Mayur Lakhani

Healthwatch Leicestershire

Rick Moore

<u>Leicestershire District Coun</u>cils

Cllr Pam Posnett Jane Toman

University Hospitals of Leicester NHS Trust

John Adler

Leicestershire Police

Ch Supt Andy Lee Simon Down, Office of the Police and Crime Commissioner

In attendance

Angela Bright, West Leicestershire CCG Helen Burchnall, Leicestershire Partnership NHS Trust

341. Minutes and Action Log.

The minutes of the meeting held on 6 December 2016 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.

342. Urgent Items.

There were no urgent items for consideration.

343. 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.

No declarations were made.

344. Position Statement by the Chairman.

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

- QuitReady Leicestershire Launches in time for New Year Resolutions:
- Local Engagement Events in January which focus on the future of healthcare in Leicestershire:
- A selection of National Publications, News and Consultations.

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

345. Outputs of the Board Development Session held on 15 December.

The Board considered a report of the Director of Health and Care Integration which summarised the discussion that took place at the Health and Wellbeing Board Development Session on 15 December, presented the outputs from that session and outlined the next steps that would be taken to progress actions arising from the session. A copy of the report marked 'Agenda Item 5' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) It was felt that, in addition to Integrated Locality Teams and Community Health Services, the Health and Wellbeing Board should also assure itself that cross border issues were being addressed through the delivery of the Sustainability and Transformation Plan (STP). The Board was advised that the Leicester, Leicestershire and Rutland (LLR) STP was currently being mapped against neighbouring STPs to identify any implications for LLR and meetings were being arranged with the Lead Officers for neighbouring STPs. The Director of Finance for the LLR STP was considering the effect that neighbouring STPs would have on activity levels and finances for LLR.
- (ii) Some concern was expressed that the LLR STP included proposals for an endoscopy unit at the Community Hospital in Hinckley. The STP for Warwickshire proposed an endoscopy unity at the George Eliot Hospital in Nuneaton, and it was suggested that to have two units in close proximity was not good value for money. The Board was advised that the endoscopy unit in Hinckley would not be a standalone unit but would be linked to the wider day case offer for that area. In an LLR context, there was sufficient activity for the unit to be sustainable. However, this proposal would now be considered in the light of the proposal for the George Eliot Hospital.

- (iii) The proposed communications campaign for the Health and Wellbeing Board related to self care and supporting people to stay safe, well and independent in Leicestershire would be developed across health and social care partners. It would be submitted to a future meeting of the Board for approval. It would be important for the campaign to enable the public to understand and shape the future for health and care services in Leicestershire.
- (iv) It was noted that Looked After Children, including unaccompanied asylum seeking children, put pressure on NHS budgets as well as that of the Council. It was confirmed that a Children and Families Plan for Leicestershire was being developed and would include the future strategic direction for this area of work.
- (v) It was requested that the update to the guidance on declarations of interest at Board meetings, in the light of some Board members also leading STP workstreams, be a solution for LLR as a whole.

RESOLVED:

- (a) That the actions proposed in paragraph 9 of this report be approved and that a report outlining progress with their delivery be submitted to the meeting of the Board in March 2017:
- (b) That the Director of Public Health be asked to develop a prevention wraparound offer for the Integrated Locality Teams and report on progress with this to a future meeting of the Board;
- (c) That individual partners be asked to progress the proposals outlined in paragraph 12 which relate to their organisation and that this be the focus of a Development Session for the Health and Wellbeing Board during Spring 2017.
- (d) That officers be asked to develop a refreshed communications plan for the Health and Wellbeing Board, based on the Board's role as set out in paragraph 13 of this report;
- (e) That officers be asked to develop a communications campaign for the Board related to self care and supporting people to stay safe, well and independent in Leicestershire:
- (f) That the Better Care Together/STP Programme Management Office be recommended to consider learning from the integration model developed in Salford;
- (g) That the Better Care Together/STP Programme Management Office be recommended to consider using the Public Health Prioritisation Tool to determine commissioning and decommissioning decisions across the health and social care system;
- (h) That a report on cross border issues in relation to the Sustainability and Transformation Plan be submitted to a future meeting of the Health and Wellbeing Board.

346. STP Delivery Update.

The Board received a verbal update on progress with the STP from the Chief Operating Officer at West Leicestershire CCG. She confirmed that the STP had been submitted to NHS England on 21 October 2016. Formal feedback had not yet been received although the acknowledgement from the NHS England regional office included informal feedback that there was overall confidence in the plan and that it was a credible plan with good communications and engagement.

It was confirmed that further finance and activity submissions would be required in the light of the CCG Operational Plan but that there was no date for this at present. Dates for public consultation on relevant parts of the STP had also not yet been confirmed, although engagement events were currently taking place across Leicestershire.

The Capital Framework that would be used to determine the eligibility and success of capital bids for the STPs was expected in February or March 2017. This would inform the timing of the public consultation as some of the proposals were dependent upon capital funding. There was less than usual capital funding available but informal feedback had been positive about the relative priority of the LLR STP within the region.

The System Leadership Team had met twice and had identified lead accountable officers for workstreams. The readiness of those workstreams was now being scoped.

The System Leadership Team was currently debating arrangements for interaction between Health and Wellbeing Board Chairs and NHS Trust Board Chairs. It was felt that this would be important to ensure the success of and commitment to the STP, as would engagement between clinicians and politicians.

RESOLVED:

That the information now provided be noted.

347. CCG Operational Plan 2017 - 2019.

The Board considered a report from West Leicestershire and East Leicestershire and Rutland CCGs which provided an overview of the CCGs Operational Plan. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

It was noted that further discussion regarding the STP aspirations and urgent care priorities was need to ensure that the two were aligned. The significant financial challenged faced by the CCGs was also acknowledged.

RESOLVED:

That the overview of the Leicester, Leicestershire and Rutland Clinical Commissioning Groups' Operational Plan be noted.

348. Better Care Fund Refresh 2017-18.

The Board considered a report of the Director of Health and Care Integration which provided an update on the working progress to refresh and prepare the Leicestershire Better Care Fund (BCF) Plan for 2017/18 to 2018/19. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) Discussions on the arrangements for Disabled Facilities Grant allocations in 2017/18 had concluded and a figure had been confirmed to each district council based on their forecasting information. A letter would be sent to each district council at the end of this week to confirm the position.
- (ii) The CCGs would not fund the Supporting Leicestershire Families Programme for 2017/18 as it had not been possible to provide sufficient evidence of the effect that the Programme had on NHS services. Information governance issues had prevented relevant data from being collected but these were expected to be resolved soon. It was hoped that this would result in CCG funding being provided for the Programme. The Board was pleased to note that the Police and Crime Commissioner had significantly increased his funding contribution for 2017/18 and that the district councils had also committed funding.
- (iii) The cost effectiveness of schemes within the BCF Plan had been considered during the refresh process. An evaluation project with Loughborough University was also considering the effectiveness of four schemes funded through the BCF and how they improved patient flow.
- (iv) Although there had been a further increase between Christmas and New Year, the trend of rising emergency admissions to hospital for certain categories of patients appeared be plateauing. This was likely to have been caused by the focus on a combination of initiatives including ongoing changes to the urgent care system, some of which were funded through the BCF, and internal improvements at UHL. It was noted that A&E attendance and planned care referrals continued to rise. These were an area of focus for the STP.

RESOLVED:

That the work in progress to refresh and prepare the Leicestershire Better Care Fund plan for 2017/18 – 2018/19 be noted.

349. Summary Care Record Solution for Care Planning

The Board considered a report of the Better Care Together IM&T Workstream which provided an update on the Summary Care Record and Care Planning. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

It was confirmed that the Summary Care Record would provide a comprehensive data set for patients receiving end of life care. More assurance was needed that the project would deliver this and that it would be effectively rolled out across LLR.

It was felt that LLR need a more ambitious digital strategy. The STP would rely on the sharing of data in order to deliver the schemes within its workstreams. To this end, cultural change, training and organisational development would be as important as the technical solution. The development of Integrated Locality Teams provided an opportunity for cultural change and those involved were keen to drive this change. It would be important to ensure that this workstream included the activities linked to the digital agenda and that dependencies on the development of the SCR were clearly identified.

There was a role for both the Health and Wellbeing Board and STP workstreams to support and educate the public. Currently, a significant number of patients did not agree to the sharing of their information. As local health and care leaders, the Board needed to give people the confidence to share their patient records safely.

RESOLVED:

- (a) That the update on the Summary Care Record and Care Planning be noted;
- (b) That the delivery of the Summary Care Record v2.1 to improve electronic care planning in services across Leicester, Leicestershire and Rutland be supported;
- (c) That a report on progress with the delivery of the Summary Care Record v2.1 be submitted to a future meeting of the Health and Wellbeing Board;
- (d) That a report on the Local Digital Roadmap be submitted to a future meeting of the Health and Wellbeing Board.

350. Parity of Esteem.

The Board considered a report of the Director of Public health which provided an update on local progress to address Parity of Esteem and specifically to present a timed and quantified plan for addressing the physical health needs of people with serious and enduring mental illness. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

The Plan for addressing the physical health needs of people with serious and enduring mental illness was welcomed. It was confirmed that it would remain a priority for CCGs and the police would wish to be involved through the Office of the Police and Crime Commissioner.

Within the STP, the Chief Executive of Leicestershire Partnership Trust would lead the mental health workstream, which would have the same priorities and focus as the previous Better Care Together mental health workstream.

RESOLVED:

That the update on local progress to address Parity of Esteem be noted.

351. <u>Unified Prevention Board update and Terms of Reference.</u>

The Board considered a report of the Director of Public Health which provided an update on the progress of the Unified Prevention Board schemes and proposed a change to the terms of reference to widen its scope to become an initial mechanism to integrate services within the sphere of prevention. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

It was confirmed that the Lightbulb Business Case had been approved by five of the seven district councils. The other two district councils were waiting for the financial arrangements to be finalised before seeking approval. Project resource would be available to help the district councils prepare for roll out of the Lightbulb Programme.

It was noted that, within the STP, Leicester City Council had the lead role for prevention. However, it was felt that the work of the Unified Prevention Board aligned to and could provide a wrap around prevention offer in communities for the Integrated Locality Teams.

RESOLVED:

That the Terms of Reference for the Unified Prevention Board be approved.

352. Health and Wellbeing Board Annual Report.

The Board considered a report of the Director of Health and Care Integration which looked back at the past year for the Health and Wellbeing Board and reflected on the progress that had been made across the partnership to improve the health and wellbeing of the population of Leicestershire. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

RESOLVED:

- (a) That the Health and Wellbeing Board Annual Report 2016 be approved for publication;
- (b) That the progress made by the Board during 2016 be noted;
- (c) That the key workstreams that have been identified to further progress the impact of the Health and Wellbeing Board in 2017 be supported.

353. Better Care Fund Quarter 2 Performance Report.

The Board considered a report of the Director of Health and Care Integration which provided assurance on the national quarterly reporting requirements for the Better Care Fund. A copy of the report marked 'Agenda Item 13' is filed with these minutes.

RESOLVED:

That it be noted that the quarter two Better Care Fund return was approved by representatives of all partner organisations on the Health and Wellbeing Board at the meeting of the Integration Executive on 24 November and submitted to NHS England on 25 November.

354. Date of next meeting.

It was noted that the next meeting of the Board would take place on Thursday 12 March at 2,00pm.

2.00 - 3.40 pm 05 January 2017 **CHAIRMAN**

