

HEALTH AND WELLBEING BOARD: 16 MARCH 2017

REPORT OF THE DIRECTOR OF HEALTH AND CARE INTEGRATION

ACTIONS FOLLOWING THE DECEMBER BOARD DEVELOPMENT SESSION

Purpose of report

1. The purpose of this report is to provide an update on the actions that have been taken following the Board Development Session on 15 December 2016.

Link to the local Health and Care System

2. This report relates to the Health and Wellbeing Board's role in delivering the Sustainability and Transformation Plan (STP) and also considers the need for the Board to develop a more comprehensive method of engagement with the other Health and Wellbeing Boards in Leicester and Rutland and the public, as local health and care services are transformed.

Recommendation

- 3. The following recommendations are made to the Health and Wellbeing Board:-
 - (a) To note the progress that has been made with the actions arising from the Board Development Session held in December;
 - (b) To approve the updated Code of Conduct for Co-opted Members of the Health and Wellbeing Board, attached as Appendix A to this report;
 - (c) That the actions outlined at paragraph 11 of this report be agreed for discussion at the Board Development Session on 18 April

Policy Framework and Previous Decisions

- 4. The Health and Wellbeing Board agreed on 6 December 2016 to take on a greater role in relation to delivery of the STP in line with the governance arrangements proposed across Leicester, Leicestershire and Rutland.
- 5. The Board received a report outlining the outputs from the Development Session held on 15 December at its meeting on 6 January 2017. This report also outlined actions that would be taken following the Development Session.

Background

- 6. The Health and Wellbeing Board holds an annual development session towards the end of the year to consider partners' commissioning intentions the following year and to ensure that risks, issues and pressures are discussed and addressed jointly.
- 7. The purpose of the 2016 development session was:
 - a) To receive an initial briefing on the STP areas where the Health and Wellbeing Board will have a lead role;
 - b) To consider the Health and Wellbeing Board's role in relation to the STP;
 - c) To ensure that priorities for 2017/18 are aligned with the STP;
 - d) To ensure partners have an overview of commissioning intentions across the system for the forthcoming financial year and to consider risks and issues across the partnership arising from these.
- 8. An update on the actions agreed in relation to the STP areas of focus is set out below:-

Action	Update	Date for Completion
Review the protocol between the Health and Wellbeing Board, Health Overview and Scrutiny Committee and Healthwatch Leicestershire in the light of the STP arrangements.	The Protocol has been revised and arrangements are being made to seek the input of Healthwatch Leicestershire and the Health Overview and Scrutiny Committee prior to it being submitted to the Health and Wellbeing Board on 1 June.	1 June 2017
Produce a protocol defining how the three Health and Wellbeing Boards in Leicester, Leicestershire and Rutland will engage with each other on the STP.	Arrangements are being made for the Chairs of the LLR Health and Wellbeing Boards to meet quarterly with the Lay Chairs of NHS bodies to discuss issues of mutual concern relating to the STP. This is being managed through the STP Programme Office.	June 2017
Work with STP communications leads to develop key communications messages for the two lead areas, setting out the benefits for each locality and clarifying:	Initial key messages have been developed and the STP public summary was published in February. These messages will continue to be refreshed as the areas of work develop further. Arrangements are being made to clarify the role of the Health and Wellbeing Board and individual organisations in the STP. A draft terms of reference covering the duties of the STP Senior Leadership Team, governing body, Health and Wellbeing Board and areas of responsibility has been developed. This will be presented to the June Health and Wellbeing Board once approved.	February 2017

Update the guidance on declarations of interest for Board Members, recognising that some Board members will have senior roles in delivering the STP and will not be able to participate in confirm and challenge sessions relating to their areas of responsibility.

The guidance has been updated and is appended to this report for approval.

March 2017

Code of Conduct

9. The Code of Conduct has been amended to include a new paragraph 4.5 which states that where a Health and Wellbeing Board member is also an STP lead officer and is presenting relevant STP work, that Board member will declare a disclosable pecuniary interest as there is a conflict between the member's employment and role of the Board. However, the Board member will remain in the room to present the item and answer questions. If there is a vote, the Board member should leave the room at that point.

Actions arising from Discussion of Commissioning Intentions

- 10. The Development Session held in December included brief presentations from each Board Member with commissioning responsibilities of the key risks and pressures they faced in the coming year, outlining where they felt these would have an effect on the wider health and care system.
- 11. The discussion at the Development Session identified a number of mitigating actions that could be taken. It is proposed that there is a presentation at the Board Development Session on 18 April outlining any progress that has been made following the Development Session. Key actions related to:-
 - (i) Whole Life Disability;
 - (ii) The development of a Children and Young People's Plan for Leicestershire;
 - (iii) Articulating a consistent, easy to understand offer describing how District Councils support prevention and demand management;
 - (iv) Joint working on cyber crime in relation to frail older people;
 - (v) Extend the housing enabler for hospital discharge to community hospitals;
 - (vi) The use of a consistent prioritisation tool across health and social care, such as the Public Health tool which enabled a judgement to be made on the relative importance of the issues which needed to be taken into account when making commissioning decisions

12. Further discussion regarding the incorporation of the Police 101 service into the Integrating Points of Access project had identified that it would not be possible to take this proposal forward at this stage.

Role of the Health and Wellbeing Board in Communications and Engagement.

- 13. The development session held in December identified the need for a more focused communications and engagement campaign relating to self-care. The idea of a public awareness raising campaign has been discussed with communications colleagues across partner organisations.
- 14. An outline communications campaign plan has been developed. The aim of the campaign will be to inform and engage local people to take responsibility for their health and wellbeing to achieve the best possible quality of life. This will be achieved by providing tips on staying safe, well and independent and signposting to local and national resources.
- 15. The campaign will be based on monthly activity linked to local or national campaigns e.g. May physical activity (national walking month). The theme for each month will be planned with partners over the coming month a proposed campaign calendar is included below. This will be co-ordinated with the STP comms group and themed communication from STP workstreams, such as Home First and Integrated Locality Teams, will be added to this grid. Activities relating to STP consultation will also be added once the timescales are known.

May Walking month – physical activity	June - Be Clear on Cancer - Bike week	July Physical activity (Change 4 Life)
August Physical activity (Change 4 Life)	September Be Food Smart (Change 4 Life) – healthy eating	October Stoptober – stop smoking
November - Stay Well this Winter – flu jabs - Lung Cancer awareness	December Stay Well this Winter – flu jabs, pharmacy, A&E	January New Year New You – One You (PHE)
February National heart month	March Ovarian & prostate cancer awareness	April

- 16. A partner resource pack including articles, press release, social media and artwork will be developed for each month for use across partners. We will encourage residents to visit First Contact Plus, District/Borough Council sport and recreation web pages, the health and care integration website and Leicestershire County Council website for information and advice.
- 17. The campaign is initially planned to run from May 2017 and will be evaluated throughout.

Resource Implications

18. The actions arising from this report will be delivered within existing resources. The communications actions will be scoped and discussed with the Leicestershire County Council communications team and communications teams across Leicester, Leicestershire and Rutland to establish any resources constraints.

Background papers

Report to the Health and Wellbeing Board on 6 December – Sustainability and Transformation Plan: Role of the Health and Wellbeing Board http://ow.ly/t8yY307oG60

Report to the Health and Wellbeing Board on 5 January – Outputs of the December Development Session

http://politics.leics.gov.uk/documents/s125463/Outputs%20from%20Development%20Session.pdf

Circulation under the Local Issues Alert Procedure

None

List of Appendices

Appendix A – Code of Conduct for Co-opted Members of the Health and Wellbeing Board Appendix B – Public Prevention Campaign

Officers to Contact

Cheryl Davenport

Director of Health and Care Integration (Joint Appointment)

Telephone: 0116 305 4212

Email: Cheryl.davenport@leics.gov.uk

Rosemary Palmer

Democratic Services Manager Telephone: 0116 305 6098

Email: rosemary.palmer@leics.gov.uk

Sally Kilbourne

Senior Communications Officer Telephone: 0116 305 5749

Email: sally.kilbourne@leics.gov.uk

Relevant Impact Assessments

Equality and Human Rights Implications

19. The role of the Health and Wellbeing Board is to collectively tackle health inequalities and to make sure that all people can access health and care when they need to.

Individual proposals coming before the Health and Wellbeing Board will be subject to an equalities and human rights implications assessment.