



Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 22 March 2018.

PRESENT

Mrs. P. Posnett CC (in the Chair)

Leicestershire County Council

Mr. I. D. Ould CC

Mike Sandys
Jon Wilson

Clinical Commissioning Groups

Dr Andy Ker
Dr Satheesh Kumar
Dr Chris Trzcinski

Leicestershire District and Borough Councils

Councillor Jeffrey Kaufman
Councillor Alan Pearson

Jane Toman

Healthwatch Leicestershire

Rick Moore

In attendance

Wendy Hoult	NHS England
Sian Walls	Leicestershire Police
Mark Wightman	University Hospitals of Leicester
Paul Gibara	East Leicestershire and Rutland CCG

Apologies

John Adler, Toby Sanders, Caroline Trevithick, Mr. R. Blunt CC, Paul Meredith, Kirk Master, Chief Supt Andy Lee and John Sinnott.

60. Minutes.

The minutes of the meeting held on 25 January 2018 were taken as read, confirmed and signed.

61. Urgent Items.

There were no urgent items for consideration.

62. 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.

Dr Andy Ker declared a personal interest in the report on Pharmaceutical Needs Assessment (Minute No 66) as he was a partner in a dispensing GP practice.

Mrs. P. Posnett CC declared a personal interest in the report on Section 106 Monies and the New Single Process for Leicester, Leicestershire and Rutland (Minute No 64) as she was a member of the Planning Committee for Melton Borough Council.

63. Position Statement from the Chairman.

The Chairman presented a position statement on the following matters:

- The Lightbulb project winning an award at the Local Government Chronicle awards
- Leicestershire Food Plan
- Leicester, Leicestershire and Rutland Carer's Strategy
- A selection of regional and national publications and news

Particular reference was made to the Leicestershire Food Plan, which had been presented to the meeting of the Leicestershire County Council on 21 March and had been very well received.

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

64. Section 106 Monies and the New Single Process for Leicester, Leicestershire and Rutland.

The Board received a presentation from West Leicestershire and East Leicestershire and Rutland CCGs on the process for managing Section 106 Healthcare Contributions. A copy of the presentation is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) The CCGs were now responsible for the management of primary care estates and facilitation of Section 106 contributions. Effective working relationships were being built with the district and borough councils, with regular meetings taking place to discuss and influence plans.
- (ii) The approach to Section 106 contributions from CCGs was welcomed but concern was expressed that there appeared to be a disparity between the ways in which the CCGs operated and it was suggested that there needed to be greater alignment between the two. Efforts were being made to ensure alignment but this was made difficult due to an uneven distribution of general practices across areas.
- (iii) It was noted that any Section 106 funding was capital money and this enabled it to be used for things such as increasing access for patients at a practice and equipment. It was also stated that the money was not purely for general

practice, but could also be used by other health partners such as dentists and pharmacists.

- (iv) An issue was the fact that any Section 106 money received was often in phases. A consistent process had now been put in place to ensure that, in the future, funding would be made available at the start of a development where possible.
- (v) Concern was expressed in relation to a new housing development in Oadby and the fact that no application for Section 106 money had been received from the local CCG. It was not possible to apply for money retrospectively, but details of the development and the proposal for a further expansion would be passed on to the relevant officers in East Leicestershire and Rutland CCG.
- (vi) It was queried whether there was a time limit in which the Section 106 money had to be spent. This varied, dependent on the amount of the contribution. However, the CCGs monitored this to ensure that any money was spent in the appropriate time.

RESOLVED:

That the presentation be noted.

65. Delayed Transfers of Care Performance.

The Board considered a report of the Director of Health and Care Integration which provided a progress update on the Better Care Fund (BCF) target for improving delayed transfers of care (DTOC). The report detailed performance along with current progress locally across health and care to reduce delays. A copy of the report, marked 'Agenda Item 6', is filed with these minutes.

In January, the average number of days delayed per day, per 100,000 adult population had been 8.57 against a target of 6.80. Despite improvements, the January target for Leicestershire had therefore not been achieved. However, the level achieved was better than the national target for delayed transfers of care of no more than 9.4 days delayed per day, per 100,000 adult population.

A detailed joint action plan was being progressed to improve the DTOC position and an update was provided on the actions undertaken. Lots of work had been achieved, particularly considering the fact that some DTOCs, especially for mental health or learning disability in-patients, were more complex and it could be difficult to identify an immediate discharge solution, for example where specialised accommodation was needed.

National BCF Operational Guidance for 2018/19 would be published in the near future and it was expected that this would include a new BCF DTOC target for 2018/19. An update on these developments would be given at the May meeting of the Health and Wellbeing Board.

NHS England's Regional Better Care Fund Lead, Wendy Hault, commended the work undertaken by Leicestershire on DTOC and acknowledged that the DTOC target was not easy to achieve. She confirmed that NHS Elect was supporting LLR to reduce the number of complex DTOCs in community settings.

RESOLVED:

- a) That the progress report be received;
- b) That the actions in progress be noted;
- c) That it be noted that the report has been forwarded to the Discharge Working Group (DWG) and the Director of Urgent Care for Leicester, Leicestershire and Rutland (LLR) in support of their oversight of DTOC performance on an LLR-wide basis.

66. Pharmaceutical Needs Assessment.

The Board considered a report of the Director of Public Health which provided the findings of the Pharmaceutical Needs Assessment (PNA). A copy of the report, marked 'Agenda Item 7', is filed with these minutes.

The PNA concluded that community based pharmacies were meeting the current needs of the Leicestershire population for essential, advanced and enhanced services. A number of recommendations had arisen from the PNA around equity of service, promoting the optimal use of pharmacy services in promoting health and healthcare management and the implications of implementing Community Pharmacy 2016/17 and beyond. These would be kept under review.

It was stated that the landscape of health care in Leicester, Leicestershire and Rutland was changing through local and national policy developments which were underway, but their full impact on Community Pharmacy was not yet known. Appendix K to the report provided an overview of the current developments and this would be updated annually to reflect developments as they arose. Any findings would be reported to the Health and Wellbeing Board.

It was acknowledged that there had been a low response to the public consultation, despite it having been publicised. It was expected that this was because it was a low interest topic. The Board was assured that detailed comments had been received from stakeholders and 61 pharmacists had responded to the survey.

The PNA did not address future requirements and how pharmacies could develop further to meet the needs of the population. However, the analysis in this PNA document provided the basis for considering these matters further. In particular, the PNA did not comment on the value or cost effectiveness of current services such as dispensing GP practices, nor did it consider how pharmacy services linked to the rest of the local health and care system. It was suggested that the expertise that had gone into developing the PNA could be used to consider these issues, in the context of the new models of care being implemented via the LLR Sustainability and Transformation Partnership.

RESOLVED:

- a) That the report be noted;
- b) That approval be given for the PNA to be published;

- c) That the Director of Public Health and respective CCG Directors of Primary Care be requested to undertake some further work regarding how pharmacies should respond to future population changes and how pharmacies could fit into the Sustainability and Transformation Partnership, and report back to a future meeting of the Health and Wellbeing Board.

67. Quick Poll: I Matter - Bradgate Mental Health Unit.

The Board considered a report of Healthwatch Leicestershire presenting the findings of a quick poll survey where Healthwatch Leicestershire had listened to patient experiences of the Bradgate Mental Health Unit (BMHU). A copy of the report, marked 'Agenda Item 8', is filed with these minutes.

There had been 42 individual responses to the questionnaire, providing a snapshot of what was working well and what could be improved. The emerging findings from the survey were presented and Healthwatch Leicestershire had suggested a number of recommendations.

Concern was expressed that there were still a number of issues at BMHU and that further consideration should be given to its operation. It was confirmed that improvements had been made at the Unit following three CQC inspections but further improvements were still required. The work being undertaken was part of the healthier mind campaign and the five year transformation programme. It was felt that the issues related to the entire mental health pathway, not just the BHMU, and it was suggested that the Leicestershire Partnership Trust be requested to report to a future meeting of the Health and Wellbeing Board on its Mental Health Transformation Programme.

RESOLVED:

- a) That the findings be noted and health and social care partners be urged to consider actions to improve services, systems and processes outlined in the report;
- b) That the Leicestershire Partnership Trust be requested to report to a future meeting of the Health and Wellbeing Board on its Mental Health Transformation Programme.

68. Healthwatch Recommissioning.

The Board considered a report of the Chief Executive providing an update on recommissioning a Healthwatch service for Leicester and Leicestershire. A copy of the report, marked 'Agenda Item 9', is filed with these minutes.

Tenders for the delivery of a new Healthwatch Leicester and Leicestershire contract from 1 April 2018 had been invited. The successful tender had been that submitted by Engaging Communities Staffordshire Community Interest Company (ECS). The transition from the existing Healthwatch providers to ECS was currently taking place including TUPE transfers, identification of premises and the offer of options for transfer to existing Healthwatch members and Boards. Representatives of the new provider would make a presentation to the next meeting of the Health and Wellbeing Board around the organisation background, delivery structure, work programme and business plan proposals.

Members wished to record their thanks to Rick Moore, the existing Chair of Healthwatch Leicestershire, for his excellent contribution to the work of the Health and Wellbeing Board.

RESOLVED:

That the report be noted.

69. Date of next meeting.

It was noted that the next meeting of the Board would take place on 24 May 2018 at 2.00pm where one of the main items on the agenda would be the Children and Families Partnership Plan.

2.00 – 3.05pm
22 March 2018

CHAIRMAN