



Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 28 November 2019.

PRESENT

Leicestershire County Council

Mr. L. Breckon JP CC (in the Chair)
Mrs. C. M. Radford CC

Jon Wilson
Mike Sandys
Jane Moore

Clinical Commissioning Groups

Dr. Hanlon
Paul Gibara
Caroline Trevithick

Leicestershire District and Borough Councils

Cllr. P. King
Jane Toman

Healthwatch

Harsha Kotecha

In Attendance

Mark Wightman
Simon Down
Helen Thompson
Adam Streets

University Hospital of Leicester
Office of the Police and Crime Commissioner
Leicestershire Partnership Trust
Leicestershire Police

Apologies

Mr. R. Blunt CC, Cllr. J. Kaufman, Dr Mayur Lakhani, DPCC Kirk Master, Mr. I. D. Ould CC and John Sinnott

192. Minutes and Action Log.

The minutes of the meeting held on 26 September 2019 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.

193. Urgent Items.

There were no urgent items for consideration.

194. 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.

195. Position Statement by the Chairman.

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

- Falls Video
- Warm Homes Service
- Flu Campaign
- National Self-Care Week
- Food Plan
- Inspired to Care finalists at Great British Care Awards
- Step up to Great Mental Health Services, 'putting excellent co-design into practice'

In reference to the Falls video, the Director of Health and Care Integration undertook to ascertain whether the video was available in different languages

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

StrategyHealth and Care in the Place.196. Primary Care Network Development on Leicester, Leicestershire and Rutland.

The Board considered a joint report of East Leicestershire and Rutland Clinical Commissioning Group and West Leicestershire and Rutland Clinical Commissioning Group which provided an update on the development of Primary Care Networks (PCNs) across Leicester, Leicestershire and Rutland. A copy of the report, marked 'Agenda item 5', is filed with these minutes.

Arising from discussion the following points were noted:

- A set of national PCN service specification would be published in early 2020 which would set out what PCNs were expected to achieve during their first five years of operation. In order to help meet the specification, PCNs would be provided with additional NHSE funding totalling just under £17m across LLR up to 2023/24, to fund additional clinical roles such as social prescribers, community paramedics and clinical pharmacists.
- The Clinical Directors of each PCN would be responsible for monitoring their own PCN's performance, reporting to the appropriate Clinical Commissioning Group. NHS England, as a major funding contributor, would also closely monitor performance against the service specification.
- Now that the PCN's had been established, there was an opportunity for further engagement with patients to help them understand the benefits of the new

arrangements. Further collaborative working would be undertaken with local authorities (including districts) and other stakeholders to encourage closer join up.

RESOLVED

That a further update on the implementation of Primary Care Networks across Leicester, Leicestershire and Rutland be considered at a future meeting of the Board.

197. Integrated Neighbourhood Teams

The Board considered a joint presentation of the East Leicestershire and Rutland Clinical Commissioning Group and West Leicestershire and Rutland Clinical Commissioning Group concerning the implementation of a Leicestershire model for Integrated Neighbourhood Teams. A copy of the presentation marked 'Agenda item 6' is filed with these minutes.

Arising from discussion the following points were noted:

- The implementation of the model for Integrated Neighbourhood Teams in Leicestershire, which aligned with a national approach to managing the majority of patient care in the community, had been successfully piloted in three locations.
- Feedback from the initial pilots had identified the benefits of co-ordinated care, especially for carers who had particularly welcomed the improved communication following hospital admissions.
- The approach would align community health teams with PCNs and would enable a consistent approach to integrated care in the community.
- The establishment of Integrated Neighbourhood Teams was one of a number of considerable changes as health services were integrated as part of a move towards a placed based model. It was inevitable that a move to new ways of working would lead to short term challenges, especially for employees and carers. It was therefore essential that messages relating to new models of care outside of a hospital setting were developed and cascaded so that service users and stakeholders, including the County Council and district councils, were informed and engaged throughout the process. It was noted that district councils were already represented in local neighbourhood team arrangements across Leicestershire.
- Whilst mechanisms for measuring the impact of the new approach would evolve, including how the views and experiences of carers was captured, some existing measures of performance had already been included in the placed based dashboard for Leicestershire.

RESOLVED:

That the presentation be noted.

198. Social Prescribing Link Workers and Care - Coordination Funding Update.

The Board considered a presentation of the Director of Public Health which provided an update on progress made in Leicestershire to develop the existing social prescribing and

care coordination models. A copy of the presentation marked 'Agenda item 7' is filed with these minutes.

The Director reported that progress was already being made in respect of the recruitment of Social Prescribing Link Workers across Leicestershire and Rutland. It was recognised that work to develop the existing social prescribing and care co-ordination model could not be viewed in isolation, but instead as part of a wider consideration of how services were commissioned and their links to the new PCN arrangements.

RESOLVED:

That the presentation be noted.

199. Workforce Workstream for the Sustainability and Transformation Plans - Challenges at a System Level.

The Board considered a joint report of the East Leicestershire and Rutland Clinical Commissioning Group and West Leicestershire and Rutland Clinical Commissioning Group which provided an update on the Leicester, Leicestershire and Rutland Sustainability and Transformation Partnership (STP) workforce workstream. A copy of the report marked 'Agenda item 8' is filed with these minutes.

It was noted that there was a commitment amongst health providers in LLR to transform their workforce over the next five years to ensure they had the necessary skills to support the population, using a population health management approach.

Local recruitment strategies would mirror those used nationally, with a drive on retaining existing staff and encouraging new interest from both home and abroad. It was noted that whilst the current workforce benefited from a range of individuals with specialised expertise, this could sometimes lead to hospital patients having to see various doctors/speciality teams and given the number of patients with multiple conditions, a holistic approach was needed and the clinical workforce would need to be more adaptable and tailored to support this approach

It was noted that the current workforce plans for LLR would be further developed to include detail with regards to the social care workforce. Governance arrangements, including the membership of the LLR Local Workforce Action Board (LWAB) which was responsible for developing the local workforce plans, would also be reviewed. Consideration would also need to be given to the unpaid workforce, such as carers.

RESOLVED:

- a) That the progress in developing a system workforce plan which supports the move towards an integrated care system be noted:
- b) That the workstream leads be asked to further consider with the Director of Adults and Communities how the social care workforce agenda can be better reflected and supported as part of the new workstream.

200. Adverse Childhood Experiences.

The Board considered a report of the Director of Children and Family Services which provided an update on the work undertaken in line with the Children and Families

Partnership Plan 2018-2021 to develop a trauma informed approach to address Adverse Childhood Experiences (ACE). A copy of the report marked 'Agenda item 9' is filed with these minutes.

The Director reported that the Children and Families Partnership, and a dedicated steering group tasked to develop the approach, had worked with various agencies and partners such as the Violence Reduction Unit before agreeing to adopt the Trauma Aware System Change Model to manage ACEs.

It was noted that ACE exposure increased the likelihood of a person suffering from addictive tendencies, such as alcohol abuse. The Children and Families Partnership would utilise the various workstreams managed by district councils to help individuals affected by such conditions as part of a joined-up approach.

Following questions from members concerning the work undertaken with schools to help manage conditions at an early stage, the Director confirmed that early intervention was essential and was fundamental to the County Council and the Partnership's approach across its support services, including its work to manage ACEs.

RESOLVED:

That the work being undertaken to develop a trauma informed approach to address Adverse Childhood Experiences in Leicestershire be supported.

201. Update on the Work of the Leicestershire Housing Services Partnership.

The Board considered a report of the Leicestershire Housing Services Partnership which provided an update on the work of the Partnership. A copy of the report marked 'Agenda item 10' is filed with these minutes.

It was noted that a review of the number of rough sleepers across the county had been undertaken, the results of which were expected to be available soon.

RESOLVED:

That the report be noted

202. The Violence Reduction Network and Prevention Board.

The Board considered a report of the Office of the Police and Crime Commissioner which provided an update on the work of the Violence Reduction Unit (VRU). A copy of the report, marked 'Agenda Item 11', is filed with these minutes.

Arising from discussions the following points were noted:

- A joint strategic needs assessment was being commissioned which would focus on serious violence, the work of which was being led by a secondee from the Public Health Department at Leicestershire County Council.
- The unit was being funded via a Home Office Serious Violence grant which was to be allocated by the 31st March 2020. It was hoped funding would be secured for a further year.
- The Office of the Police and Crime Commissioner and Leicestershire Police had worked closely with the Public Health Departments for Leicester and

Leicestershire to develop a the approach. It was acknowledged that the unit's work could be developed further by establishing links to Integrated Neighbourhood Teams;

- The VRU had been tasked with developing a detailed understanding of the prevalence of youth violence across LLR by gathering and analysing a range of data. The impact of the Unit's work would also be continually monitored. It was suggested that this could in part be undertaken via the Board's Placed Based Dashboard.
- A Prevention Board, sitting under the Strategic Partnership Board (SPB), would be established with a remit to focus on harmful behaviours. It was noted that whilst the work of the two boards would be closely aligned and had similar priorities, there would be a conscious effort to avoid duplication.

RESOLVED:

That the success factors for the Violence Reduction Network (or a subset of these) be considered for inclusion in the Place Based Dashboard.

203. Unified Prevention Board Update

The Board considered a report of the Unified Prevention Board, which provided an update on the work of the Board. A copy of the report marked 'Agenda item 12' is filed with these minutes.

It was noted that as part of a joined-up communications approach, a toolkit had been developed to help share key messages concerning mental health with stakeholders. Partners were encouraged to use the resource within their own organisations.

RESOLVED:

That the report be noted.

204. Leicestershire Children and Families Partnership Plan 2018 - 2021: Progress Update.

The Board considered a report of the Director of Children and Families which provided a progress update on the Leicestershire Children and Families Partnership Plan 2018 – 2021. A copy of the report marked 'Agenda item 13' is filed with these minutes.

The Director reported that since the launch of the Plan in September 2018, priority leads had been working closely with partners and stakeholders to deliver against each of the five priority areas and significant progress had been made. It was noted that the performance of the Partnership was being monitored and targets for each outcome had been set. It was recognised that in addition to these measures, performance could also be monitored using the Health and Wellbeing Board's Placed Based Dashboard.

RESOLVED:

That a sub set of the measures related to the five priorities for the Children and Families Partnership be considered for inclusion in the Place Based Dashboard.

205. Annual Report of the Director of Public Health: Leicestershire's Health - Physical Activity - Moving to a Whole System Approach.

The Board considered the Annual Report of the Director of Public Health for 2019. A copy of the report marked 'Agenda Item 14', is filed with these minutes.

The Board thanked the Director of Public Health for a good report which clearly set out the actions that needed to be taken to improve the health of the population of Leicestershire.

Arising from discussion the following points were noted:

- Public Health would work jointly with LeicesterShire and Rutland Sport to encourage employers to increase physical activity levels amongst their workforce.
- A joined-up approach amongst providers was essential for a whole system approach to be implemented. This would include district councils which could influence the way in which housing developments were designed to encourage physical activity and tailor local authority owned gyms to accommodate a variety of needs.
- Existing facilities and expertise, such as those available at Loughborough University could be utilised to encourage physical activity and gain further understanding of how increased levels of exercise positively impacted the population.

RESOLVED:

- a) That the 2019 Annual Report of the Director of Public Health be noted;
- b) That the recommendations set out in the report which aim to increase the levels of physical activity across Leicestershire through a co-ordinated multi partner approach be welcomed;
- c) That partners be encouraged to share the findings of the report within their respective organisations and consider the opportunities arising from a move towards a whole system approach to improving levels of physical activity.

206. Date of next meeting.

It was noted that the next meeting of the Health and Wellbeing Board would be held on Thursday 23 January 2020.

2.00 - 4.43 pm
28 November 2019

CHAIRMAN

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