



Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 29 February 2024.

PRESENT

Leicestershire County Council

Mrs. L. Richardson CC (in the Chair)  
 Mrs. C. M. Radford CC  
 Mrs. D. Taylor CC  
 Jane Moore  
 Mike Sandys

Integrated Care Board

Dr. Nikhil Mahatma  
 Rachel Dewar  
 Rachna Vyas

District Councils

Cllr. J. Kaufman  
 Edd de Coverly

Healthwatch

Gemma Barrow  
 Harsha Kotecha

Leicestershire Partnership Trust

Jean Knight

In attendance

Hanna Blackledge	Leicestershire County Council (minute 36 refers)
Lisa Carter	Leicestershire County Council
Fiona Grant	Leicestershire County Council (minute 40 refers)
Simon Pizzey	University Hospitals of Leicester
Tom Purnell	Leicestershire County Council (minute 41 refers)
Barney Thorne	Leicestershire Police
Kirsty Walton	Leicestershire County Council (minute 36 refers)

Apologies

Sarah Prema, John Sinnott, Cllr Cheryl Cashmore and DPCC Rani Mahal

30. Minutes.

The minutes of the meeting held on 31 October 2023 were taken as read, confirmed and signed.

31. Urgent Items.

There were no urgent items for consideration.

32. 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 Kaufman declared a non-registrable interest in all items on the agenda as his son worked for NHS England.

33. Position Statement by the Chairman.

The Chairman gave a position statement on the following matters:

- NHS Update;
- Adult Social Care;
- JSNA Reference Group Update;
- Health and Wellbeing Board Development Sessions;
- Joint Health and Wellbeing Strategy Refresh;
- Health and Wellbeing Board Annual Report;
- Healthwatch;
- Chair's Engagement;
- Care Experienced Children and Young People given 'Protected Characteristic' Status.

In response to a query, the Chairman confirmed that the patient journey and effective communication with patients were priorities for the Integrated Care Board.

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

34. Better Care Fund Section 75 Agreement - Approval and Assurance.

The Board considered a report of the Director of Adults and Communities which provided an update concerning the refresh of the Leicestershire Better Care Fund Section 75 (S75) agreement for 2023/24 and sought approval to continue with the pooled budget arrangements. A copy of the report marked 'Agenda Item 5' is filed with these minutes.

RESOLVED:

- (a) That the work undertaken to refresh the Section 75 pooled budget agreement for the Better Care Fund be noted;
- (b) That the continuation of S75 pooled budget arrangements between Leicestershire County Council and the LLR ICB be approved.

35. Leicestershire Better Care Fund Plan and Quarter 3 Return 2023/25.

The Board considered a report of the Director of Adults and Communities which set out the final Leicestershire Better Care Fund (BCF) Plan for 2023/25 alongside the Quarter 3 BCF return. A copy of the report marked 'Agenda Item 6' is filed with these minutes.

Members were pleased to note that, where performance was slightly off target, the commentary demonstrated that action was already being taken. For some targets, performance was already in the top quartile and it was not realistic to set targets for improvement. The aim for these targets was therefore to maintain performance, despite increased demand. These nuances would be reflected in the end of year report.

Members also welcomed the work that had been successfully undertaken to improve outcomes for Leicestershire residents, particularly around reablement.

It was noted that there was more work to be done to meet the targets to reduce unplanned admissions for chronic, ambulatory, care-sensitive conditions and to reduce emergency hospital admissions due to falls in people aged 65 and over. Consideration would be given to how services were commissioned to reduce admissions and population health management data would be used to support the work.

**RESOLVED:**

- (a) That the Leicestershire Better Care Fund Plan 2022/23, including the Planning Template and Narrative and Quarter 3 return, be noted;
- (b) That the action taken by the Chief Executive of Leicestershire County Council, following consultation with the Chairman of the Health and Wellbeing, to approve the Better Care Fund Quarter 3 return for the NHS England submission deadline of 9 February 2024 be noted.

**36. Joint Strategic Needs Assessment - Substance Misuse and Alcohol.**

The Board considered a report and presentation of the Director of Public Health which provided a summary of the headlines, conclusions and recommendations from the two recent Joint Strategic Needs Assessments (JSNAs) for Substance Misuse and Alcohol. A copy of the report marked 'Agenda Item 7' and the slides forming the presentation are filed with these minutes.

Arising from discussion the following points were raised:

- (i) It was confirmed that young people requiring treatment for substance misuse tended to be aged between 15 and 18. Young people's use of substances appeared to be largely experimental which was thought to be why the number of referrals to treatment had dropped. The brief interventions programme was working well for this age group and representatives from the Children and Families Service were involved in the operational group.
- (ii) Funding for the young people's service provided by Turning Point had been doubled but the numbers in treatment had not increased. The service also already had strong links with local providers, the schools' exclusion programme and the criminal justice system. A self help toolkit for parents had been developed, which was advertised through schools and community settings. Concern was expressed that there was a core cohort of young people who were likely to be vulnerable and

did need referring for treatment and that more work, including with schools, was needed to identify these children.

- (iii) It was felt that one of the gaps in terms of engagement was the voluntary sector. There were not many referrals via this route. Work was also needed to keep people in treatment once they had been referred.
- (iv) People who successfully completed treatment were passed on to recovery services. A number of service users were difficult to move on and stayed in treatment.
- (v) Members were pleased to note that there was already a dual diagnosis offer that supported people with both mental health and substance misuse and alcohol issues. Work was undertaken with LPT's mental health neighbourhood teams to ensure that pathways were in place and training was provided to build the resilience of staff. There was confidence in referrals via this route.
- (vi) UHL had just launched a prevention strategy. Officers would ensure that referrals and signposting to treatment services were included in the action plan.

RESOLVED:

- (a) That the findings and recommendations of the Substance Misuse and Alcohol Joint Strategic Needs Assessments be supported and approved for publication;
- (b) That the Strategic Leads be supported to take forward the recommendations via commissioning plans, strategies and partnership working.

37. Children and Families Partnership Plan Refresh for 2024 - 2026.

The Board considered a report of the Director of Children and Family Services that presented the refreshed Children and Families Partnership Plan 2024 to 2026 for approval. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

Members commended the simplicity of the Plan and the work to ensure that it would be delivered in partnership.

RESOLVED:

That the refreshed Children and Families Partnership Plan 2024 – 2026 be approved.

38. Progress Update on the Joint Health and Wellbeing Strategy Priorities: Best Start for Life.

The Board considered a report and presentation of the Director of Children and Family Services which provided a progress update on the delivery of the Joint Health and Wellbeing Strategy priorities. A copy of the report marked 'Agenda Item 9' and the slides forming the presentation is filed with these minutes.

Arising from discussion the following points were made:

- (i) The Children and Family Service was working with a range of partners, including district councils, in the Family Hubs. It was not a buildings-based programme, rather a network of professionals. However, there were some buildings that were

used as Family Hubs and a list of these was available on the website. It was hoped that other community buildings could be trained to be family hubs in the future.

- (ii) It was noted that there had been a good discussion regarding the development of women's health hubs and joining with the Family Hubs. However, it had ultimately been decided that this would not be possible. Further discussions would take place regarding the potential to target the gypsy and traveller community through Family Hubs to tackle the issue of low vaccine take up.

RESOLVED:

That the progress in delivery of the Joint Health and Wellbeing Strategy priorities be noted.

39. Right Care, Right Person Programme Update.

The Board considered a report of the Chief Constable which provided an update on the Leicestershire Police Right Care, Right Person Programme. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

Arising from discussion the following points were made:

- (i) It was noted that Leicestershire Police was not experiencing a significant amount of concern regarding the Right Care, Right Person Programme and, from a Police perspective, partnership with public sector colleagues was excellent. Board members echoed this view.
- (ii) Concern was expressed that the Programme was being applied to children when this was not appropriate. The Police had a statutory safeguarding duty for children and there were other ways to deal with children who went missing. Protocols were already in place. It was confirmed that this issue would be followed up outside the meeting.
- (iii) It was noted that there was solid evidence to demonstrate that the mental health triage car was a benefit to Leicestershire residents.

RESOLVED:

That the update on the Leicestershire Police Right Care, Right Person Programme be noted.

40. Leicestershire Mental Health Subgroup - Development Session Update Report.

The Board considered a report and presentation of the Director of Public Health which provided an update on the progress made to date by the Mental Health Sub-group since it was established in January 2023 and a summary of the Health and Wellbeing Board Development Session held on 7 December 2023. A copy of the report marked 'Agenda Item 11' and the slides forming the presentation is filed with these minutes.

It was felt that the place-based Mental Health Sub-group had an important and worthwhile role and was making significant inroads into complex issues.

Partners were requested to consider how they could encourage collaboration on mental health issues in their own organisations and across the partnership.

RESOLVED:

- (a) That the progress made by the Mental Health Subgroup since it was established in 2023 be noted;
- (b) That the feedback from the mental health development session be noted;
- (c) That the recommendations made at the mental health development session be supported.

41. Health Determinants Research Collaboration (HDRC) Briefing Report.

The Board considered a joint report of the Chief Executive and Director of Public Health which provided an update on Leicestershire County Council's funding award to become a National Institute of Health and Care Research Health Determinants Research Collaboration. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

Members welcomed the report and the work undertaken by officers, particularly Liz Orton, Consultant in Public Health, to put the successful bid together. Members were excited by the opportunity to mobilise knowledge into practice. It was felt that the Staying Healthy Partnership would be well placed to support this work.

It was confirmed that the funding was for research capacity at the County Council, working with collaborative partners such as the local universities. However, it would be helpful for all partners to be involved. For example, district councils would be able to contribute knowledge of environmental health and housing issues as these were part of their core functions.

RESOLVED:

- (a) That the establishment and growth of place-based collaborative research focused on wider determinants of health be supported;
- (b) That the Board advocates for the use of research evidence in decision and policy making;
- (c) That the Board receives further updates on this work in due course.

42. Date of next meeting.

It was noted that the next meeting of the Board would take place on 23 May 2024 at 2.00pm.