

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 17 July 2014.

PRESENT

Leicestershire County Council

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

Mick Connell  
Lesley Hagger  
Mike Sandys

Clinical Commissioning Groups

Dr Dave Briggs  
Dr Andy Ker  
Dr Mayur Lakhani

Healthwatch Leicestershire

Gillian Adams  
Rick Moore

Leicestershire District/Borough Councils

Cllr John Boyce  
Cllr Pam Posnett

In attendance

Sharron Hotson, University Hospitals of Leicester NHS Trust  
Det Insp Sian Walls, Leicestershire Constabulary  
Caron Williams, West Leicestershire Clinical Commissioning Group  
Bal Johal, Leicestershire Partnership Trust (minute 117 refers)  
Dr Saquib Muhammad, Leicestershire Partnership NHS Trust (minute 117 refers)  
Lesley Harrison, NHS England (minutes 106 and 107 refer)

101. Minutes.

The minutes of the meeting held on 8 May 2014 were taken as read, confirmed and signed.

102. Urgent Items.

There were no urgent items for consideration.

103. 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.

Councillor Posnett declared a personal interest in the Communities Strategy as it formed part of her responsibilities as Cabinet Lead Member at the County Council (minute number xx refers).

104. Position Statement by the Chairman.

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

- Seven Day Services;
- Better Care Fund;
- Care Act;
- Safe Staffing Levels;
- Focus on Prevention;
- Primary Care Update;
- Local Government Association Health and Wellbeing Programme.

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

105. Change to the Order of Business.

The Chairman sought and obtained the consent of the Board to vary the order of business from that set out on the agenda.

106. Section 106 Update.

The Board considered a report of NHS England which provided an update on the proposed expenditure of secured and available S106 contributions for healthcare within Leicestershire and Rutland. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

RESOLVED:

- (a) That the proposed expenditure of secured and available S106 contributions for healthcare be noted;
- (b) That regular updates be provided to the Health and Wellbeing Board.

107. GP Practice Funding Update.

The Board received an update from NHS England on the outcome of the Funding Differential Review, which was a joint review undertaken by the Area Team, Local Medical Committee, Clinical Commissioning Groups and a number of representative GPs. The original proposal had been that this funding would be withdrawn following a six month notice period to the affected practices delivering specific services. However, it had since been agreed that the funding would be continued where GP Practices could demonstrate that they were using it to employ staff. This arrangement would continue until the Primary Medical Services Review was completed, at which point a fund would be created which all GP Practices could bid for against certain criteria.

RESOLVED:

That the update on the Funding Differential Review be noted and that a further update be provided on the Primary Medical Services Review.

108. Implementation of the Better Care Fund Plan

The Board considered a report of the Director of Health and Care Integration which provided an update following the Government announcement made on 5 July 2014 which changed the national policy implementation arrangements for the Better Care Fund (BCF). A copy of the report marked 'Agenda Item 6' is filed with these minutes.

It was noted that the full technical guidance for resubmission of the BCF Plan was expected on 25 July 2014. It was therefore likely that the deadline for resubmitting the BCF Plan would be extended beyond 1 August 2014.

Board members confirmed their commitment to working together to deliver improved and integrated services through the BCF Plan. It was clear that the local integration of health and social care services was essential for the creation of a sustainable health and care economy. It was anticipated that some projects, such as the Seven Day Services in West Leicestershire, would start to deliver from September 2014 and these would not be affected by the resubmission.

The Board welcomed the good relationships between partners which enabled progress to be made on health and social care integration and their willingness that any adjustments need to the BCF Plan would be discussed and resolved prior to the resubmission deadline.

RESOLVED:

- (a) That the next steps and actions set out in paragraphs 21 – 25 of the report be approved;
- (b) That joint leadership and support be provided in directing the work of the Integration Executive over the next period of BCF resubmission.

109. Communications Strategy

The Board considered a report of Leicestershire County Council which outlined the draft communications and engagement strategy for the Health and Wellbeing Board, incorporating the work of the Integration Executive. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

It was suggested that the list of stakeholders could include the public members of NHS bodies where appropriate.

It was clear that communications from the Board needed to be delivered at the same pace as the pace of change. Information was being rapidly and it needed to be shared in real time.

RESOLVED:

That the ongoing work to develop and implement the Communications Strategy be supported with emphasis on providing rapid and timely communications using spokesmen from the Board.

110. Refresh of the Joint Strategic Needs Assessment.

The Board considered a report of the Joint Health and Wellbeing Strategy/Joint Strategic Needs Assessment (JSNA) Steering Group which presented proposals for the JSNA refresh that was due to be completed in 2015. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

The Board emphasised the need for the JSNA to reflect the major issues such as the ageing population and gaps in services to enable the system to work in a more integrated way and create capacity.

The JSNA refresh would need to be undertaken in the context of the Care Act and associated responsibilities such as the adult social care responsibility for prisoners. It would be helpful if the JSNA could provide an insight into the overall needs of the offender population as part of the refresh.

RESOLVED:

- (a) That the approach to the refresh of the Joint Strategic Needs Assessment be approved;
- (b) That the content proposals outlined in paragraphs 8 – 10 of the report be approved and the JSNA/JHWS Steering Group be advised accordingly;
- (c) That it be confirmed that this approach is the right approach to underpin the refresh of the Joint Health and Wellbeing Strategy 2016-19;
- (d) That the Board be kept apprised of offender health needs and care pathways.

111. Pharmaceutical Needs Assessment.

The Board considered a report of the Director of Public Health which presented information regarding the background and purpose of the Pharmaceutical Needs Assessment and an overview of the proposed content and timescales. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

RESOLVED:

- (a) That the report be noted;
- (b) That further progress reports be presented to the Board along with the final Pharmaceutical Needs Assessment report in March 2015 for approval.

112. Better Care Together 5 Year Health and Social Care Strategy.

The Board considered a report of Better Care Together which provide an update on the development of the integrated Leicester, Leicestershire and Rutland (LLR) Health and

Social Care 5 Year Strategy and advised on the further work that would take place to approve the plan by September 2014.

The amount of work that had been undertaken and the joint working was welcomed. It would now be important to ensure that the Strategy was correctly resourced and delivered at pace.

It was suggested that, in order to change the culture and expectations of clinicians and patients, case studies were needed which both sets of stakeholders could engage with.

It was noted that a five year strategy for primary care would also be developed. The Clinical Commissioning Groups were working on proposals in conjunction with NHS England and the Patient Participation Groups belonging to each practice. The primary care offer would need to be linked to both social care and other community health services in terms of developing an integrated set of services outside of hospital, operating in each locality.

RESOLVED:

- (a) That the Leicester, Leicestershire and Rutland 5 year draft directional strategic health and social care plan be received;
- (b) That officers be requested to produce a formal response to the draft plan, based on this Board's discussions, and forward it to the Better Care Together Programme Board.

#### 113. Community Strategy Consultation.

The Board considered a report of Leicestershire County Council which sought comments on the draft Communities Strategy. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) The proposal to develop strong, resilient communities and self-care was supported as it would enhance the five year Health and Social Care Strategy. The Communities Strategy was aligned with the objectives of the Health and Social Care Strategy and would help to underpin projects in the Better Care Fund such as the Local Area Co-ordinators.
- (ii) Whilst the approach set out in the Communities Strategy was welcomed, the importance of clarity over how the transition to the new way of working was emphasised. It would also be helpful for the risks and impact on existing services to be identified.
- (iii) The County Council had recently undertaken a consultation on the future of voluntary sector funding. The outcome of that consultation would inform the role of the voluntary sector in the delivery of the Communities Strategy.
- (iv) The alignment with other consultations being carried out by the County Council, such as the community management of libraries, was welcomed.

- (v) It was suggested that the Communities Strategy be shared with GPs at their locality meetings, in the context of communications already in progress for the Better Care Fund Plan.

RESOLVED:

That officers be requested to produce a formal response to the Communities Strategy, based on this Board's discussions, and forward it to Leicestershire County Council.

114. Young Carers: Delivery Action Plan - Progress Since September 2013.

The Board considered a report of the Director of Children and Families which provided an update on the work in respect of young carers in Leicestershire since September 2013 and an overview of the implications for young carer services as set out in the Children and Families Act 2014.

The Board emphasised the importance of supporting young carers and ensuring alignment with services for adult carers.

RESOLVED:

That the update on progress with delivery of the action plan for young carers be noted.

115. Leadership Development Workshop Update.

The Board was advised by the Director of Health and Care Integration that a draft specification for the leadership development workshop had been developed.

RESOLVED:

That Dr Dave Briggs support Cheryl Davenport and Mr White to finalise the specification for the Leadership Development Workshop and appoint a provider to deliver the workshop.

116. Performance Assurance Framework Development Update.

The Board considered a joint report of Leicestershire County Council and the Greater East Midlands Commissioning Support unit which provided an update on the development of the reporting framework for performance assurance for the Health and Wellbeing Board and its supporting boards and an update on performance issues and progress. A copy of the report marked 'Agenda Item 15' is filed with these minutes.

It was noted that those areas identified as off-target in the performance report were being addressed. Action plans and appropriate oversight were in place.

RESOLVED:

- (a) That the progress made to date in developing the performance framework to incorporate the BCF and Strategic Plan priorities alongside reporting arrangements to support the Board's role be noted;
- (b) That the performance summary, issues identified this quarter and actions planned in response to improve performance be noted.

117. Our Progress Since The Francis Report.

The Board considered a joint presentation from the University Hospitals of Leicester NHS Trust (UHL) and Leicestershire Partnership NHS Trust (LPT) which provided details of progress in improving the quality of care since the publication of the Francis Report. A copy of the slides forming the presentation is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) Although the lead officers for each organisation were members of the Executive Team, the focus on quality should permeate the whole organisation. To this end, national guidance had recently been issued on how to value and train Healthcare Assistants to ensure they were fit for purpose.
- (ii) A number of processes were in place to ensure lessons were learnt from serious incidents and complaints. All lessons learnt in LPT were shared across every division and through the Quality Matters newsletter. Record keeping had also improved since the Care Quality Commission had undertaken an inspection of LPT.
- (iii) The importance of using a range of methods and strategies to collect feedback from patients and their families was acknowledged.

RESOLVED:

That the progress made by the University Hospitals of Leicester NHS Trust and Leicestershire Partnership NHS Trust since the Francis Report be welcomed.

118. Quality Account for 2013/14.

The Board considered a report of the University Hospitals of Leicester NHS Trust which presented the Quality Account for 2013/14 for information and assurance. A copy of the report marked 'Agenda Item 17' is filed with these minutes.

RESOLVED:

That the final draft of the Quality Account, including Stakeholder Commentary, be noted.

119. 12 Hours in A&E - Patient's Experiences of Accident and Emergency

With the consent of the Board this item was deferred until the next meeting.

RESOLVED:

That this item be considered by the Health and Wellbeing Board on 16 September 2014.

120. Care and Support Act Briefing Note on Consultation Arrangements.

The Board noted a briefing paper regarding the consultation on the draft regulations and guidance for the Care and Support Act. A copy of the note marked 'Agenda Item 19' is filed with these minutes.

RESOLVED:

That any comments on the consultation be submitted to Mick Connell to enable a response from the Health and Wellbeing Board to be co-ordinated.

121. Date of Next Meeting.

It was noted that the next meeting of the Board would take place at 2.00pm on Tuesday 16 September 2014.

2.00 - 4.15 pm  
17 July 2014

CHAIRMAN