

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Tuesday, 1 April 2014.

PRESENT

Leicestershire County Council

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

Mick Connell
Lesley Hagger
Mike Sandys

Clinical Commissioning Groups

Dr Dave Briggs
Dr Mayur Lakhani
Toby Sanders

Healthwatch Leicestershire

Rick Moore

Leicestershire District/Borough Councils

Cllr John Boyce
Cllr Pam Posnett

NHS England

Peter Huskinson

Leicestershire Constabulary

Chief Superintendent Sally Healy

Leicestershire Partnership NHS Trust

Dr Satheesh Kumar

In attendance

Kate Shields, University Hospitals of Leicester

77. Minutes.

The minutes of the meeting held on 13 March 2014 were taken as read, confirmed and signed.

78. Urgent Items.

There were no urgent items for consideration.

79. 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.

No declarations were made.

80. Final draft of the Leicestershire Better Care Fund.

The Board considered a joint report of Leicestershire County Council, West Leicestershire Clinical Commissioning Group and East Leicestershire and Rutland Clinical Commissioning Group (CCG) which presented the final draft of the Better Care Fund Plan for approval. A copy of the report marked 'Agenda Item 4' and 'Supplementary Agenda Pack' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) The Board welcomed the narrative in NHS England's Template 1, as it was felt to provide a clear description of the Plan and identified areas where more work was needed, such as on the implications of the Care Bill and seven day working. The challenge now would be to get the implementation right and move care out of hospitals and into primary and community care in a systematic way. This would include communication and engagement to enable the workforce to engage with and support delivery of the Plan.
- (ii) Governance arrangements were in place for the Better Care Fund Plan, with the Integration Executive acting as programme board. Its work would need to be aligned with the wider Leicester, Leicestershire and Rutland (LLR) Strategic Programme Board which was developing a five year strategy for health and social care in the subregion. Governance arrangements for the Strategic Programme Board were still being clarified between programmes but it was acknowledged that clinical leadership would be essential for the success of both programmes.
- (iii) It was suggested that clear modelling of capacity, activity and finance was needed as part of the five year LLR wide work to illustrate the shift from the acute sector into other parts of the system. Joint definitions and data sets for this work would be welcomed across agencies. A detailed risk management plan was also needed to address how the system would manage if the shift either happened too quickly or not quickly enough with risk sharing across organisational boundaries building on the risk sharing principles already agreed.
- (iv) There would need to be some flexibility built into the Plan so that it could adapt over time depending on performance and evidence of impact. The next three months would involve the development of two outline business cases, for Local Area Co-ordination and Frail Older People, and would require decisions around the commissioning and decommissioning of services. This work would be carried out in the context of the Leicester, Leicestershire and Rutland Five Year Strategic Plan but the Leicestershire integration programme also needed to drive forward local change at pace and tailored to local needs.
- (v) It was noted that Ernst and Young had been appointed by the Department of Health to support Leicester, Leicestershire and Rutland which had been identified as one of

eleven 'challenged' health economies nationally. It was expected that Ernst and Young would challenge the ambition and impact of all local plans and that the Better Care Fund Plan would be expected to respond to this challenge. The Board indicated its support in principle for a more ambitious Plan. In order to facilitate this, the integration executive would develop a five year view of trajectories for transformation and consider how ambition could be articulated beyond 2015/16

- (vi) With regard to the metrics, it was suggested that, as the time periods set by NHS England for expressing the metrics were variable, the time periods used in the Better Care Fund Plan should include an annual expression of the metrics in order to align more effectively with CCG planning.
- (vii) It was noted that, although the metrics were nationally defined, there was some flexibility for defining what measurements made up each metric. It was intended that a subset of contributing performance indicators supporting each metric would be developed to enable focus on improving the local system and targeting the Better Care Fund Plan to the most effective interventions.
- (viii) The East Midlands Ambulance Service (EMAS) falls prevention scheme, recommended for inclusion into the Better Care Fund Plan by the Integration Executive, would help people to stay at home through the integration of care pathways between EMAS and community care or domiciliary care in Leicestershire's localities. This service had had a direct and significant impact on avoiding emergency admissions when introduced in Northamptonshire
- (ix) The University Hospitals of Leicester NHS Trust (UHL) and Leicestershire Partnership Trust (LPT) both confirmed their support for the Better Care Fund Plan as a whole. It was noted that the CCGs and UHL were still involved in final contract negotiations for 2014/15, although it was not expected that the final areas remaining for resolution would affect the assumptions within the Better Care Fund Plan.

RESOLVED:

- (a) That the Better Care Fund Plan be approved, subject to the Chief Executive being authorised to make any final amendments in the light of the comments now made for onward submission to NHS England and Regional Assurance on 4 April 2014;
- (b) That day to day oversight of the delivery of the Better Care Fund Plan be undertaken by the Integration Executive in line with the Terms of Reference agreed by the Board on 13 March 2014, with regular reports on progress being submitted to the Health and Wellbeing Board including through the routine performance report.

81. Date of Next Meeting.

It was noted that the next meeting of the Board would take place on Thursday 8th May at 2.00pm.