

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 22 January 2015.

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 Andy Ker
Prof Mayur Lakhani
Toby Sanders

Healthwatch Leicestershire

Gillian Adams
Rick Moore

Leicestershire District/Borough Councils

Cllr John Boyce

University Hospitals of Leicester NHS Trust

John Adler

In attendance

Carmel O'Brien, East Leicestershire and Rutland Clinical Commissioning Group
Trish Thompson, NHS England
Det Insp Sian Walls, Leicestershire Police

153. Minutes.

The minutes of the meeting held on 20 November 2014 were taken as read, confirmed and signed.

154. Urgent Items.

There were no urgent items for consideration.

155. 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 such declarations were made.

156. Position Statement by the Chairman.

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

Local Developments

- Urgent Care;
- Better Care Together;
- New Integration Research Partnership Launches in Leicestershire;

National Publications and Guidance

- NHS Planning for 2015/16;
- Transfer of 0-5 Children's Public Health Commissioning to Local Authorities;
- Integrated Care Licence Conditions: Draft Guidance for Providers of NHS Funded Services;
- Whole Person Care for People with Learning Disabilities;
- NHS England Consultation on Genetics Services;
- NHS Cancer Drugs Fund;
- Changes to Registration Arrangements for GP Practice;
- Measuring Child Development at Age Two to Two and a Half Years.

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

157. 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.

158. Healthwatch Review of Discharge.

The Board considered a presentation from Healthwatch Leicestershire which set out the findings of a Special Inquiry to understand what happened to patients when they were discharged from a healthcare setting. A copy of the slides forming the presentation is filed with these minutes.

The themes identified by the Special Inquiry were communication, consistency of message and patient expectation. The discharge workstream of the Urgent Care Board would be asked to consider how to address these issues. It was noted that recent joined up working across the health and social care system had resulted in improvements to both communications and patient flow. The Special Inquiry had identified some positive experiences of discharge which demonstrated the potential for the system to work well together.

The Board welcomed the approach to the investigation used by Healthwatch. It had been useful for the Inquiry to highlight those vulnerable patients at risk of complications following discharge as it was felt that the system needed to identify these patients and ensure that they had a smooth transition out of hospital. Their care could then be followed up either by the GP practice, pro-active care co-ordinator or another named person.

It was suggested that discharges from healthcare settings should be monitored to see if levels of unsafe discharge were improving. However, the Board was advised that it was currently only possible to identify if there had been problems with discharge through analysis of readmission rates. The Integration Executive was currently considering the procurement of a data sharing model which would enable the tracking of patient contacts across health and social care. This could potentially enable unsafe discharges to be identified even if the patient was not readmitted.

RESOLVED:

That the findings of the Special Inquiry Report and visit to the Leicester Royal Infirmary Discharge Lounge be submitted to the Discharge Workstream of the Urgent Care Board for consideration.

159. Improving the Urgent Care System in Leicester, Leicestershire and Rutland: Focus on Hospital Discharge

The Committee considered a report of the Director of Adults and Communities and the Director of Health and Care Integration which provided an analysis of hospital discharge performance and assurance of actions being taken to improve performance, in the context of the changes underway across Leicester, Leicestershire and Rutland to improve the urgent care system. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) With regard to the additional arrangements in place to support discharge, it was noted that the extension to the role of the Primary Care Co-ordinators was funded through the Better Care Fund. It was intended to extend this resource further and consideration was currently being given to the most effective way of doing this.
- (ii) Housing support to discharge was currently being provided at the Bradgate Unit. This was funded through the Better Care Fund. Work was currently being undertaken to identify patients at the Leicester Royal Infirmary who would benefit from housing support and when it would be most appropriate to make this intervention. It was suggested that any intelligence regarding housing generated by this project be fed back to the District Council lead officers for Housing.
- (iii) The social care support to discharge was largely funded through the County Council's mainstream budget. Some areas of additional work were funded through the Better Care Fund.
- (iv) There had been issues with the capacity of the Domiciliary Care Market to enable service users to have choice and also to get packages of care in place quickly to support discharge. The reasons for this included use of reablement services, timeliness of reviews of care packages and the commissioning process. There was now some evidence that domiciliary care was being used and managed more effectively by the County Council.

- (v) Leicestershire had received a grant from the Department of Health to help address current pressures on acute hospitals caused by delayed discharges to social care. The funding had to be spent by the end of the financial year. The Urgent Care Board would consider how to allocate the funding at its next meeting.
- (vi) With regard to Leicestershire's position relative to the rest of the Country, there was no doubt that, despite the work undertaken so far, there was a lot of progress still to be made. It would be important to track the impact of all interventions to assess their effectiveness. It was felt that the best way for progress to be made was for the health and care system to focus on a small number of agreed metrics that would have the most impact.
- (vii) It was confirmed that there was pressure on Continuing Health Care Funding. It was also noted that the Adult Social Care budget in the County Council was currently forecast to overspend, although the department continued to commission all the care that was required. It was noted that there was an opportunity for efficiencies to be made through joint working in relation to Continuing Health Care, both strategically from a commissioning perspective and operationally. This was currently being scoped between the County Council and Clinical Commissioning Groups.

RESOLVED:

- (a) That the current performance in relation to delayed discharges be noted;
- (b) That further assurance from partner agencies about the actions in progress to improve hospital discharge and the impact these will have be sought and any concerns arising from this be referred to the Urgent Care Board;
- (c) That the Integration Executive and Urgent Care be asked to consider how the Leicester, Leicestershire and Rutland health and care system can achieve a truly integrated approach to hospital discharge in the medium term;
- (d) That the Integration Executive be asked to consider any further detailed work on matters specific to Leicestershire at its meeting on 27th January;
- (e) That the Integration Executive be asked to consider if any adjustments are needed within the Better Care Fund Plan in 2015/16 in support of the urgent care system at its meeting on 27th January.

160. Transforming Care for People with Learning Disabilities in Leicestershire.

The Board considered a report from the Learning Disability Programme Board which provided an update on progress with the Winterbourne View 'Transforming Care' joint improvement plan, the Better Care Together learning disability workstream and the submission of the 2014/15 Joint Health and Social Care Assessment Framework. A copy of the report marked 'Agenda Item 5' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) It was noted that the Children and Families Service was actively involved with the Adults and Communities Department in looking at how services could be

commissioned better together. A workshop would take place the following week on whole life disability which would identify when the changes in the approach to commissioning could be made. This would enable future reports to include timescales for delivery.

- (ii) With regard to the Department of Health Capital Grant award, it was intended that two properties would be purchased. One would be a two bed setting providing long term accommodation and the other would be an eight bed setting; two of the beds would provide long term accommodation and the other six would provide step up/step down care to prevent hospital admission. There was a tight deadline as the funding had to be spent by 31 March 2015, however all partners were actively involved in the project. Officers were also working with the district councils regarding the revision of housing strategies.
- (iii) The question relating to specialist commissioning and the number of service users affected had been removed from the local self assessment, although ongoing conversations took place with NHS England regarding these services. The Board felt that this issue should continue to be addressed by the self assessment to enable it to see the whole picture. It was also agreed that the summary of Leicestershire's progress would include more evidence based comments in future.
- (iv) It was important to understand that service users in hospital settings were complex and could not be moved easily. NHS Commissioners were working with NHS England regarding the future for this cohort of patients.
- (v) East Leicestershire and Rutland CCG had recently hosted a meeting with the Cabinet Officer regarding the Winterbourne View Policy. The feedback from this meeting included that the fragmentation of commissioning created challenges to the delivery of the policy, that clinicians did not necessarily agree that all patients should be in a community setting and that there needed to be feedback of data at a local level.

RESOLVED:

- (a) That the draft Self Assessment and local action plan arising from the joint Health and Social Care Self Assessment Framework be submitted to the next meeting of the Board for consideration;
- (b) That the progress on Winterbourne priorities be noted and that a joint report from NHS England and the County Council be submitted to the Health and Wellbeing Board as emerging priorities from April 2015 become clear;
- (c) That the progress on the learning disability element of the Better Care Together Programme be noted.

161. Update Report on Maternity and Children's Workstream for Better Care Together.

The Board considered a joint report from the Clinical Commissioning Groups and County Council which provided an update on the scope and progress of the work underway in the Maternity and Children's Workstream as part of Better Care Together. A copy of the report marked 'Agenda Item 6' is filed with these minutes.

It was noted that parts of the Child and Adolescent Mental Health Services (CAMHS) system were not working effectively. A recent case was being investigated by the Urgent Care Board. The CAMHS review would be the subject of a specific report to the next meeting of the Board.

A national review of midwifery services was being undertaken. It was expected that the review would focus on choice and midwifery care. This review would be taken into account by the maternity and children's services workstream although the Board was assured that choice, including home births, was already a key part of the review.

RESOLVED:

- (a) That the update on the scope and progress of the work underway in the Maternity and Children's Workstream as part of Better Care Together be noted;
- (b) That an update on work to improve Child and Adolescent Mental Health Services be submitted to the next meeting of the Health and Wellbeing Board for consideration.

162. Progress Report for Reform of Special Educational Needs and Disabilities.

The Board considered a report of the Director of Children and Family Services which provided a progress update on the implementation of Special Educational Needs and Disability (SEND) reform in Leicestershire and outlined the responsibilities of health professionals with regard to the SEND code of practice. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

It was noted that Ofsted was producing an inspection framework for SEND and progress with the reforms. This was likely to come into force in September 2015.

Healthwatch Leicestershire offered support to the Children and Families Service in engaging with service users. The difficulties of engaging with young people were acknowledged; however Healthwatch was starting to make links which would be useful for undertaking further engagement in this area.

It was noted that the issues identified in the personal budget pathfinders were similar to the issues still occurring with the personalisation of Adult Social Care. The need for a consistent system across adults and children's services to support whole life disability was acknowledged. The Children and Families Service was being supported by colleagues in the Adults and Communities Department to ensure that this was the case. It was noted that there was also a need to integrate with personal health budgets.

RESOLVED:

- (a) That the report be noted;
- (b) That updates on work to progress the Special Educational Needs and Disabilities reforms be submitted to each meeting of the Health and Wellbeing Board until March 2016;
- (c) That a report outlining the implications of the Disabled Children's Charter be submitted to the Health and Wellbeing Board in Spring 2015;

- (d) That a development session be organised for members of the Health and Wellbeing Board to include training on the Ofsted Inspection Framework for Special Educational Needs and Disabilities.

163. Update of Joint Health and Wellbeing Strategy 2013-16.

The Board considered a report of the County Council which reviewed the current Joint Health and Wellbeing Strategy and proposed changes based on the new health and social care system to ensure that the strategy through to 2016 reflected the system changes and that key health and wellbeing issues continued to be addressed. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

RESOLVED:

- (a) That the reformat of the strategy to align it with the current key strategic drivers of the local health and wellbeing partnership be approved;
- (b) That the incorporation of Learning Disabilities as a priority in the Joint Health and Wellbeing Strategy be noted;
- (c) That the performance frameworks of the Unified Prevention Board, Integration Executive, Learning Disabilities Board and Leicestershire County Council's Corporate Strategy be used to measure progress against the delivery of the strategy;
- (d) That the Health and Wellbeing Board performance reports continue to include updates on CCG performance and local provider performance;
- (e) That the JSNA/JHWS Steering Board be asked to:-
- (i) Monitor the action plans of the key health and social care drivers and provide assurance to the Health and Wellbeing Board that the collective action plans will deliver the key objectives of the Joint Health and Wellbeing Strategy;
 - (ii) Measure progress against the key outcomes identified in the Joint Health and Wellbeing Strategy through the Health and Wellbeing Board performance report on a quarterly basis, with operational delivery led by the sub-groups and their respective action plans;
- (f) That the work programme to fully refresh the Joint Health and Wellbeing Strategy in 2016, incorporating refreshed Joint Strategic Needs Assessment findings, along with the further work relating to the key strategic drivers for health and care as outlined in the report be approved.

164. Health Protection Board Annual Report 2013/14.

The Board considered a report of the Director of Public Health which confirmed that the Health Protection Board was delivering its statutory functions and provided assurance regarding the whole system for health protection across Leicester, Leicestershire and Rutland.

Concern was expressed that there were areas for which no local agreement was in place. This was an area which would be challenged at the next meeting of the Health Protection Board.

It was felt that GPs ought to have a relationship with the Health Protection Board, particularly given their role in care homes where they could help prevent 'flu outbreaks. It was acknowledged that consideration was needed of the ways to share intelligence locally in a meaningful way.

RESOLVED:

- (a) That the Health Protection Board Annual Report 2013/14 be noted;
- (b) That the Director of Public Health be asked to liaise with NHS England and the Clinical Commissioning Groups regarding GP engagement with the Health Protection Board.

165. Revised Terms of Reference for the Integration Executive.

The Board considered a report which presented the revised terms of reference for the Integration Executive for approval. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

RESOLVED:

That the Terms of Reference for the Integration Executive be approved.

166. Date of Next Meeting.

It was noted that the next meeting of the Board would take place on Thursday 12th March at 2.00pm.

2.00 - 4.03 pm
22 January 2015

CHAIRMAN