

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 14 May 2015.

PRESENT

Leicestershire County Council

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

Clinical Commissioning Groups

Karen English  
Dr Andy Ker  
Prof Mayur Lakhani

Leicestershire Partnership NHS Trust

Dr Satheesh Kumar

Healthwatch Leicestershire

Rick Moore

Leicestershire District/Borough Councils

Cllr John Boyce  
Cllr Pam Posnett

In attendance

Rob Howard, Leicestershire County Council  
Gill Weston, Leicestershire County Council  
Caroline Trevithick, West Leicestershire Clinical Commissioning Group  
Mark Wightman, University Hospitals of Leicester  
Prof Aly Rashid, NHS England

186. Minutes.

The minutes of the meeting held on 12 March 2015 were taken as read, confirmed and signed.

187. Urgent Items.

There were no urgent items for consideration.

188. 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.

189. Position Statement by the Chairman.

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

Local Developments

- Using the Health and Care System Wisely: Choose Better;
- Better Care Together: Transforming Health and Care in Leicester, Leicestershire and Rutland;
- Engaging with the Voluntary and Community Sector;
- Leicestershire Partnership Trust new 'health for teens' website;
- Leicester's Eating Disorder Service;
- New Parking Facilities at Leicester Royal Infirmary;
- Latest results from the Friends and Family Test Survey.
- Leicester's Marvellous Medicine;
- West Leicestershire CCG seeks feedback on plans in Hinckley;;
- Pharmaceutical Needs Assessment Published;
- Mental Health Awareness Week;
- Mental Health Training for Leicestershire's Frontline Staff.

National Developments

- Vanguard for the New Models of Care in the Five Year Forward View;
- Latest News on Integration Pioneers;
- NHS England Announces National Maternity Review;

General Publications

- Measuring National Wellbeing: 2015 Report;
- Sod 70! The Guide to Living Well;
- Tracking the Development of Healthwatch;
- LGA's Support Offer and Resources for Health and Wellbeing Boards.

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

190. Mental Health Investment 2015/16.

The Board considered a report from the Leicester, Leicestershire and Rutland Clinical Commissioning Groups which provided an interim briefing regarding how the additional funding for Mental Health announced in the Budget for 2015/16 would be allocated in Leicestershire. A copy of the report marked 'Agenda Item 5' is filed with these minutes.

It was noted that national funding was also expected for the Child and Adolescent Mental Health Service (CAMHS). The Board reemphasised the importance of CAMHS and the need to seek further assurance that the Better Care Together workstream on the

emotional health and wellbeing of children was progressing at pace, given the range of concerns raised in the recent CAMHS report to the Health and Wellbeing Board.

Concern was expressed that a small number of inpatients were being placed out of area. The number of out of area patients had been reduced to almost zero during the previous summer but this had not been sustained. It was noted that the solution was multi-factorial and that work had been undertaken to improve the promptness and effectiveness of the crisis response service and the availability of alternatives to hospital admission. The health and social care system now needed to work together to reduce length of stay.

It was noted that there was no growth in funding for dementia services. However, the Board was assured that a lot of work had already been undertaken to support the drive for early diagnosis of dementia and that the priorities from the pre-existing Leicester, Leicestershire and Rutland wide dementia strategy, including such initiatives as the introduction of memory clinics, had been implemented. This had included additional capacity at Leicestershire Partnership Trust (LPT) and work on the pathway across primary and secondary care including shared care agreements between LPT clinicians and GPs, which would enable patients to be returned to in primary care at the appropriate stage, thus improving access and wait times for consultant led services at LPT.

Regarding access to IAPT, a further national announcement was anticipated about additional funding. West Leicestershire CCG had identified £90,000 investment for IAPT in advance of the national funding being confirmed. Both CCGs were awaiting further details of the level of funding from NHS England.

**RESOLVED:**

- (a) That the report be noted;
- (b) That further reports to provide assurance on the implementation and impact of the changes, demonstrating how the investment has improved parity of esteem, be submitted to the Health and Wellbeing Board biannually, with the first report in September 2015;
- (c) That the commissioners be advised to seek support from Healthwatch Leicestershire in assessing the impact of the additional investment in mental health from the public's perspective;
- (d) That officers be requested to submit a progress report on the work on the emotional health and wellbeing of children to the next meeting of the Board.

**191. NHS Quality Premium 2015/16.**

The Board considered a report from East Leicestershire and Rutland CCG and West Leicestershire CCG which provided information on specific indicators that related to the Quality Premium 2015/16 and requested support on those indicators where choices needed to be made. A copy of the report marked 'Agenda Item 6' is filed with these minutes.

It was felt that the indicators for the Quality Premium, a nationally prescribed menu from the NHS Outcomes framework that CCGS had to select from, did not support the

principles of health and social care integration; for example the Delayed Transfers of Care target only related to a reduction in delays attributable to the NHS.

There were additional subsets of targets that would sit underneath each indicator. For example, East Leicestershire and Rutland's local priority on care planning would have underneath it targets relating to End of Life Care and reducing emergency admissions. The quality of care plans would be measured through this subset of targets.

It was noted that one of the mental health indicators, which had not been selected for the Quality Premium, was the reduction in the number of people with severe mental illness who were currently smokers.

Despite not being part of the quality premium, Public Health Consultants were keen to work with the CCGs to enable the Stop Smoking Service to support this vulnerable group of people.

RESOLVED:

That the options made by East Leicestershire and Rutland CCG and West Leicestershire CCG, as set out in paragraph 4 of the report, be supported.

192. A Week in Leicester Royal Infirmary: The Patient Perspective.

The Board considered a report from Healthwatch Leicestershire which set out the findings of staff, board members and volunteers who spent four days at Leicester Royal Infirmary in January 2015 listening to patients and talking to staff in Accident and Emergency, the Discharge Lounge, Ophthalmology Eye Clinic and Eye Casualty and the Ear, Nose and Throat Department. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

Healthwatch was commended on the quality of the report and clear presentation of the information. It was suggested that, for further clarity, future reports should consistently use both percentages or whole numbers so the relative proportions of respondents could be understood, putting total numbers into perspective.

It was noted that UHL's Quality and Assurance Committee would receive Healthwatch's report and determine how the issues raised would be progressed. East Leicestershire and Rutland CCG confirmed that its Governing Body had received the report and worked through the key messages it contained for CCGs. The Urgent Care Board would also consider the report and its recommendations.

RESOLVED:

That the recommendations set out on page 7 of the report be supported.

193. Joint Health and Social Care Autism Self Assessment.

The Board considered a report of the Director of Adults and Communities which set out the findings of the 2014/15 Joint Health and Social Care Autism Self-Assessment and provided details of the use of the a Department of Health non recurrent Section 31 grant. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

It was suggested that future reports should provide details of how much improvement was needed to housing and accommodation and the specific areas where this was needed.

It was noted that that the Autism Self Assessment was adult centric, although it did have some regard to children with autism. The Department of Health Grant was for adults only; it was felt that it would be useful to have something similar in place for children.

RESOLVED:

(a) That the Joint Health and Social Care Autism Self Assessment be noted;

(b) That a report on the Leicester, Leicestershire and Rutland Autism Strategy and Action Plan be submitted to the Health and Wellbeing Board in due course.

194. Adjustment to Emergency Admissions Baseline for the Better Care Fund - Urgent Action by the Chief Executive.

The Board considered a report of the Chief Executive which informed the Health and Wellbeing Board of the urgent action taken by the Chief Executive, following consultation with the Chairman of the Health and Wellbeing Board, to approve increasing the total non-elective admission target within the Better Care Fund to 2,041. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

RESOLVED:

That the urgent action taken by the Chief Executive be noted.

195. Better Care Fund (BCF) Quarterly Performance Reporting.

The Board considered a report of the Director of Health and Care Integration which provided assurance on the quarterly reporting requirements for the Better Care Fund including the pay for performance element of the fund, which was linked to achieving reductions in emergency admissions. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

It was noted that an analysis of the types of admissions to UHL made during January – April 2015 was being carried out by the systems resilience group in order to assess where over performance had been experienced and in which patient categories. This data would support the ongoing analysis of the impact of the Better Care Fund Schemes. The analysis would identify such issues as whether, since the introduction of the falls scheme with EMAS, there had been an evident reduction in the number of admissions at UHL due to falls, despite the over performance in the overall number of total emergency admissions in the first quarter. A further report on the findings of this analysis would be submitted to the Health and Wellbeing Board in July.

RESOLVED:

That the process for submitting the first quarterly return to NHS England on 29 May 2015 be approved.

196. Date of Next Meeting.

It was noted that the next meeting of the Board would be held on Thursday 16 July at 2.00pm.

2.00 - 3.15 pm  
14 May 2015

CHAIRMAN