

Minutes of a meeting of the Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 22 June 2017.

PRESENT

1. Appointment of Chairman.

RESOLVED:

That the appointment of Mr E F White CC as Chairman of the Health and Wellbeing Board be noted.

2. Appointment of Vice Chairman.

RESOLVED:

That the appointment of Dr Andy Ker, Chairman of the Integration Executive, as Vice Chairman of the Health and Wellbeing Board be noted.

3. Minutes and Action Log.

The minutes of the meeting held on 16 March 2017 were taken as read, confirmed and signed.

The Board also noted the Action Log, which provided an update on actions agreed by the Board at its previous meetings.

4. Urgent Items

There were no urgent items for consideration.

5. 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.

Vandna Gohil declared a disclosable pecuniary interest in the report on Healthwatch Re-commissioning (item 12 refers) as she was the Director of Healthwatch Leicestershire and undertook to leave the room during discussion of that item.

6. Position Statement by the Chairman.

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

- Focus on Hinckley Leisure Centre
- Preventing and Treating Falls in Leicestershire
- Hospital Housing Discharge Support
- Carers Week

- Policy Briefing: Children and Social Work Act
- Policy Update: Air Quality
- Refreshing our Approach to Performance Reporting at the Health and Wellbeing Board
- A selection of national publications

The possibility of having a University representative on the Health and Wellbeing Board was raised, in order to widen the membership. This would be considered.

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

7. 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.

8. Summary Care Record.

The Board considered a report of the Leicester City CCG, West Leicestershire CCG and East Leicestershire and Rutland CCG giving an update on the Leicester, Leicestershire and Rutland Electronic Record Sharing project, focusing around Summary Care Record v2.1. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

During Phase 1 of the project, the roll out of the Summary Care Record to primary care, concerns had been raised by GPs regarding the quality of the template. It was confirmed that feedback from GPs had been collated and that an updated version would be available in July. However, it was not clear whether all feedback had been responded to. Board members were asked to feedback any issues to James McKean, Project Manager, Electronic Record Sharing.

It was noted that Phases 2 and 3 of the project had commenced recently, and progress was being made. The effectiveness of Phase 2, where the Summary Care Record would be made available for use in secondary care organisations, would be measured through its usage and uptake. Data would be provided by NHS Digital. The main challenge in Phase 3 related to the governance of sharing information between health and social care.

It was noted that one of the drawbacks to the Summary Care Record was that it was based on source data from GP records and therefore relied on these being kept up to date. Consideration was also being given to the benefits of information sharing through SystemOne.

It was requested that a detailed progress report be presented to the next meeting of the Health and Wellbeing Board, and that this report include assurance on how GP feedback from Phase 1 had been addressed.

RESOLVED:

- (a) That the update on the LLR Electronic Record Sharing project be noted;
- (b) That a further detailed report be presented to the next meeting of the Health and Wellbeing Board.

9. Better Care Fund 2017/18 - 2018/19.

The Board considered a report of the Director of Health and Care Integration which provided an update on the preparation and submission of the Better Care Fund (BCF) Plan for 2017/18-2018/19, and on the inclusion of additional resources allocated to the County Council for adult social care, as announced by the Government in March 2017. A copy of the report marked 'Agenda Item 7' is filed with these minutes.

It was noted that the BCF Policy Framework had been published on 31 March 2017, but the technical BCF guidance for 2017/18-2018/19 was still awaited at the time of the meeting. No date had yet been confirmed for the formal submission of the BCF Plan to NHS England, but was expected to take place in the next few weeks.

The Government had confirmed the local authority allocations within BCF plans from April 2017. The County Council had prepared an initial expenditure plan detailing how the additional adult social care grant funding would be allocated over the next three years through the BCF pooled budget. The BCF Plan for 2017/18-2018/19 had been updated to reflect this, and now had a pooled budget totalling £52m for 2017/18 and £56m for 2018/19.

The budget was managed through a Section 75 agreement of the NHS Act 2006 between the County Council and the two County CCGs. Assurance was required locally and nationally that the BCF Section 75 Agreement had been extended for a further 12 months, and plans were in place, via the Integration Executive, to undertake this work between June and July 2017.

It was noted that the risk register had been refreshed and the rating of risks moderated to align them to other corporate risks recorded by the CCGs.

RESOLVED:

(a) That the draft BCF Expenditure Plan, attached as Appendix A to the report, be approved;

(b) That the preparations and governance arrangements for the submission of Leicestershire's Better Care Fund (BCF) Plan for 2017/18 – 2018/19 to NHS England be noted;

(c) With regard to the additional adult social care grant allocation of £19.7m announced by the Government in the Spring Budget:-

- (i) That it be noted that this funding is allocated to the County Council for the purposes indicated in the grant conditions but will be incorporated into the BCF Plan as required by the BCF Policy Framework;
- (ii) The agreement reached with NHS partners on the spending of the grant be welcomed; and
- (iii) The impact of additional grant on the BCF pooled budget from April 2017 be noted;

(d) That the timescale for updating the rolling BCF Section 75 Agreement and associated governance arrangements be noted.

10. STP Update - Integrated Locality Teams.

The Board considered a report from the Director of Health and Care Integration providing an STP Update on Integrated Locality Teams. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

With regard to test beds, a number of different aspects were being tested, and the Programme Board would measure which of these had proved to be the most effective. The Programme Board would receive feedback about this in September, and this would inform the model for integrated locality teams to be adopted across LLR. Board members felt that it would be helpful if information was circulated relating to the key performance indicators and the logic model being used to identify overall programme outcomes and the specific performance measures for each test bed.

A Memorandum of Understanding had been developed for the Integrated Locality Teams. There had been challenges in determining the level of detail that should be included in this document and it was expected that the initial MoU would be developed into a more formal governance document, in tandem with wider STP programmes/governance.

RESOLVED:

That the fourth edition of the Leicester, Leicestershire and Rutland Integrated Locality Teams bulletin be noted.

11. Better Care Fund Quarterly Performance Report.

The Board considered a report of the Director of Health and Care Integration which provided assurance regarding the national quarterly requirements for the Better Care Fund. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

With regard to delayed transfers of care (DTC), it was noted that there was still scope for improvements in performance to be made, both by individual organisations and collectively. Performance at UHL had remained fairly constant but there had been a deterioration in performance both at community hospitals and in mental health in-patient wards, where the lower numbers of patient beds meant that any delay had a significant adverse impact on performance. Work undertaken this year would focus specifically on these areas.

The local assessment of the eight High Impact Changes that could be made to improve DTC had been refreshed and improvements in relation to these would be reported as part of the Better Care Fund assurance process. Through the refresh, areas for focus and potential investment had been identified. Patient choice continued to be one of the causes of DTC: actions identified to address this included ensuring patients received the right information about discharge when admitted to hospital and at every stage during their journey. It would also be important to ensure that appropriate services, including housing support, were in place in the community to support discharge.

The DTC position was further complicated by the different reporting requirements across the NHS, Social Care and the Better Care Fund. It was not possible to create a single trajectory to support delivery of the three different metrics. However, the LLR DTC metrics group was developing an integrated dashboard to help with this.

NHS England welcomed the proposal in the Better Care Fund Plan to set a more challenging DTC target and observed that the Better Care Fund schemes had made a

significant difference to delays in the discharge of older people. The focus now needed to shift to working age adults and mental health inpatients. It was also noted that the approach and data collected by Leicestershire for the Better Care Fund had been found to be useful on a regional and national level.

RESOLVED:

- (a) That the contents of the report be noted;
- (b) To note that the quarter four 2016/17 BCF return was approved by representatives on the Integration Executive on 23 May, and submitted to NHS England on 31 May

12. 'It's not in my head': Patient Experiences of Fibromyalgia.

The Board considered a report from Healthwatch Leicestershire which presented the findings of the 'It's not in my head' report. This gave the views, opinions and experiences of individuals with Fibromyalgia from across the country. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

Board members agreed that the condition was poorly understood by all, including GPs, and felt that the 'top ten tips' section of the report was very useful. Although the proposed media campaign around the condition was welcomed, it was suggested that this should be more targeted, focussing on symptoms and delivered through existing channels and services such as Local Area Co-ordinators and First Contact Plus.

RESOLVED:

- (a) To receive the report, key findings and themes;
- (b) To receive the 'It's not in my head!' recommendations, outlined in the report;
- (c) To note the Top 10 Tips contained within the report;
- (d) To note the national profile of the work.

13. Healthwatch Recommissioning.

The Board considered a report of the Chief Executive providing an update on progress with recommissioning a Healthwatch service for Leicestershire. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

The Healthwatch Leicestershire contract was currently delivered by Voluntary Action Leicestershire, and had been extended to 31 March 2018 to align with the Healthwatch contracts of Leicester City Council and Rutland Council to enable joint commissioning, subject to the outcome of consultation. Rutland Council would confirm its participation in the process following a meeting on 18 July.

The Board supported the proposal, provided that the high quality of work from Healthwatch Leicestershire would not be affected by the new arrangements. It would also be important to ensure that the new Healthwatch contract delivered an increased focus on children and young people.

RESOLVED:

That the report be noted.

14. Date of next meeting.

It was noted that the next meeting of the Board would take place on 20 July 2017 at 2.00pm.

2.00 – 3.08pm
22 June 2017

CHAIRMAN