



HEALTH AND WELLBEING BOARD: 17 SEPTEMBER 2015

POSITION STATEMENT FROM THE CHAIRMAN

SECTION ONE: LOCAL DEVELOPMENTS

IMPORTANT MESSAGES AND KEY FACTS

TO KEEP WELL AND USE HEALTH AND CARE SERVICES WISELY THIS WINTER

	<p>Self Help</p> <ul style="list-style-type: none">• Take the flu vaccine if you're eligible, and persuade friends and family to do the same• Keep warm, look after your health• Seek help early before your condition escalates• Offer practical support to friends, family, and neighbours to keep everyone well this winter, including sharing these tips with others• The NHS Choices website has wealth of information to help with self- care/symptom checking and includes advice on common winter illnesses http://www.nhs.uk/staywell#winter-illnesses
	<p>Need Help? Call 111</p> <ul style="list-style-type: none">• If you're not sure which NHS service you need, if you need medical help or advice but it's not a life-threatening situation, you don't have a GP, you need health information, or reassurance about what to do next• "Phone before you go" – calling 111 before heading to A&E or your urgent care centre is the smart call to make• An adviser will ask you questions to assess your symptoms and then give you the advice you need• They can direct you straightaway to the best service for you in your area, and even book you in• If NHS 111 advisers think you need an ambulance and/or to visit the Emergency Room, they will immediately help you with these arrangements• They can also direct you to an out-of-hours doctor, an urgent care centre or a walk-in centre, a community nurse, an emergency dentist or a late-opening chemist• You should call 111 for mental health crisis as well as urgent physical care needs• NHS 111 in the East Midlands has been selected as an exemplar site for mental health care by NHS England, for the quality of care for callers with mental health needs



Ask your pharmacist

- Always think whether self-care is appropriate and can your pharmacist help?
- Make sure you are prepared and have a sufficient amount of your routine prescription(s) or any self help/over the counter supplies, especially over holiday periods or if bad weather may affect you getting out and about.
- Pharmacists are expert in many aspects of healthcare and can offer advice on a wide range of long-term conditions and common illnesses such as [coughs](#), [colds](#) and [stomach upsets](#).
- You don't need an appointment and many have private consultation areas, so they are a good first port of call. Your pharmacist will say if you need to seek further medical attention.



See your family doctor (GP)

Although there is a common belief that it is difficult to get an appointment with your GP, it is important to contact them. Don't let things escalate when early help and advice could have prevented this. When your GP surgery is closed the GP practice answering service/out of hours service or NHS 111 can advise you.

GPs assess, treat and manage a whole range of health problems. They also provide health education, give vaccinations and carry out simple surgical procedures. Your GP will arrange a referral to a hospital specialist should you need it.

There are lots of new initiatives in place across Leicester, Leicestershire and Rutland to improve access to GP services. Check with your local practice about their current opening hours and make sure you take up any wellness checks offered to you including your flu vaccination.



Visit an urgent care service

If you need to see someone in person, it's not an emergency, but you have a minor illness or injury which can't wait, then there are Urgent Care Centres and Walk-In Centres across LLR which you can attend **without an appointment**. These are often managed by nurses and some also have doctors and they are open outside office hours. You'll be seen quickly by a clinician and they can treat a wide variety of urgent conditions e.g.

- Dislocations can be assessed and dealt with by the advanced nurse practitioners
- Wounds can be attended to and stitched
- Vaccinations such as tetanus shots can be given
- Some urgent care centres can undertake x-rays and set broken bones, check by calling NHS 111.



999 and Accident and Emergency

Only call 999 when it's an emergency.

A&E departments provide vital care for life-threatening emergencies, such as loss of consciousness, suspected heart attacks, breathing difficulties, or severe bleeding that cannot be stopped. If you're not sure it's an emergency, call [111](#) for advice.

The ambulance service always works to get the right emergency care to the right person at the right time. This may be telephone advice, face to face in your home or conveyance to either urgent care centres or the emergency department depending on need. Trained staff in 999 call centres and on ambulances are able to advise and treat on the scene so that only about half of the calls involve taking patients to hospital.

Emergency Department (ED) at Leicester Royal Infirmary

- ED is appropriate for the most serious and life threatening conditions only.
- Our ED department is one of the busiest in Europe, and we're proud of it. We have the right facilities to treat you and help recover from the most serious and life threatening injuries.
- Every day over 650 patients access emergency services at the Leicester Royal Infirmary, making it the busiest single site delivering emergency care in the NHS.
- Around 200 patients each day come to us wanting urgent treatment which could be provided elsewhere.
- We have an urgent care centre on site and you may be directed there, following the new triage system which operates at the ED front door.





Better care together

Leicester, Leicestershire & Rutland health and social care

<http://www.bettercareleicester.nhs.uk/>

The agenda and papers for the November BCT Partnership Board meeting which takes place on November 19th at 9.30am, and arrangements for future meetings can be found via this weblink. <http://www.bettercareleicester.nhs.uk/about-us/partnership-board/>

All Partnership Board Meetings are open to the public.

Leicestershire Partnership 
NHS Trust

Providing targeted support for people with mental health needs

Leicestershire Partnership NHS Trust is working with Richmond Fellowship to develop the timely support provided for people who need urgent support or advice about their mental health. A review of the services shows a low demand for the two city-based drop-in services launched last year, so these have been replaced with a more targeted service for people who want face-to-face support. This includes a new service based at Leicester University. The last open drop-in sessions were in October.

Any adult in Leicestershire and Rutland who needs urgent advice or support with their mental health can still access help by calling **0808 800 3302**. And you can make an appointment for face-to-face support by calling the same number.

Chris Crane, Service Manager for Crisis Care at LPT, said: “it’s really good to work in partnership with Richmond Fellowship to look at ways of supporting people within Leicester, Leicestershire and Rutland and the new service will help people receive early intervention support for their crisis needs, providing a service that is easier to access within their educational environment is a really exciting addition to the current crisis support offered.

(Calls to the 0808 800 3302 helpline are free from landlines and mobile networks 3, O2, Orange, T Mobile, Virgin Mobile and Vodafone. Other networks offer free calls to 0808 numbers – callers who are uncertain are advised to check with their provider).



The Leicestershire BCF makes its third quarterly report to NHS England on 27th November where our overall progress in meeting the national conditions and metrics is assessed for the period July – September 2015.

The Leicestershire programme continues to demonstrate impact and good progress against the majority of the national conditions and metrics, including reducing delayed bed days where the improved performance achieved earlier in the year was sustained between July and September and the implementation of new data sharing capability via Care and Health Trak. However the target to reduce admissions by 2,041 by December 31st 2015 will not be met, with a forecast year end position of 1,750 avoided admissions being delivered via our 4 emergency admissions avoidance schemes.

The process to refresh the BCF plan is already underway led by the integration Executive and includes assessing the evaluation findings of a number of our key developments this year, in order to inform future commissioning intentions.

Further national guidance is expected in December with a refreshed BCF plan anticipated to forming part of the NHS England planning submission milestones for CCGs that are required between January and April 2016.

The Better Care Exchange provides a portal for sharing best practice in implementing integrated health and care including via the Better Care Fund. See: <https://bettercare.tibbr.com/tibbr/web/login>

Materials from the Leicestershire Integration Programme including Emma's Story Animation and our article from the HSJ on housing discharge support have been posted on the portal and featured in the Better Care Exchange newsletter.



The Leicestershire Healthwatch Board met on 12th November and the agenda and papers can be found at this link:

http://www.healthwatchleicestershire.co.uk/sites/www.healthwatchleicestershire.co.uk/files/20151112_agenda_hwl_board_12_november_2015.pdf

SECTION TWO: DEVELOPMENT SUPPORT FOR HEALTH AND WELLBEING BOARDS



HWB Chairs/Vice Chairs and Adult Social Care portfolio holders induction session

If you are new to the role of HWB Chair/ Vice-Chair or as Adult Social Care portfolio holder there is an induction session to introduce the key issues in the health and care agenda nationally and the support on offer to you.

Leadership Essentials for HWB Chairs - 2015/16 brings an opportunity to put HWBs in the driving seat of local system leadership. This two-day fully subsidised residential session brings together HWB Chairs and Vice Chairs to actively learn from each other through the LGA's tried and tested approach to leadership development.

Support and tools - Our Programme offers a range of support and tools including Leadership sessions for Chairs of HWBs, mentoring for HWB Chairs, a Revised Self-Assessment Tool.

Health and Wellbeing peer challenge - Peer challenges are free to councils and Health and Wellbeing boards. They involve bespoke teams of peers from a range of organisations working on site with the council and its partners for four days.

Informing local understanding of health and wellbeing - Through the Health and Wellbeing System Improvement Programme we are bringing together key data and information on health and wellbeing, and the wider issues that affect it. This is to support Health and Wellbeing boards, public health professionals, councils, local people and voluntary organisations in their assessment of local needs and priorities, through benchmarking and monitoring trends.

Body of knowledge on HWBs Shared Intelligence has carried out reviews of the Health and Wellbeing System Improvement Programme. The latest review aims to understand the impact of the programme; to capture system learning; and to make a significant contribution to the national body of knowledge on HWB.

LGA Health and Wellbeing Programme Policy Support Bulletin

The latest health and wellbeing policy bulletin from the Local Government Association is available via http://www.local.gov.uk/web/guest/health/-/journal_content/56/10180/7561650/ARTICLE

SECTION THREE: NATIONAL DEVELOPMENTS



Consultation on the Government's Mandate to NHS England to 2020

The mandate to NHS England sets the government's objectives for NHS England, as well as its budget. In doing so, the mandate sets direction for the NHS, and helps ensure the NHS is accountable to Parliament and the public.

In accordance with the Health and Social Care Act 2012, the Secretary of State must publish a mandate each year, to ensure that NHS England's objectives remain up to date.

A new mandate to NHS England is due to be published following the completion of the Spending Review, to take effect from April 2016. This consultation document sets out how the government proposes to set the mandate to NHS England for this Parliament. The final mandate will be subject to the outcome of the government's Spending Review.

The consultation closes on 23 November and is available via <https://www.gov.uk/government/consultations/setting-the-mandate-to-nhs-england-for-2016-to-2017>

NHS England: Stay Well This Winter Campaign takes to the road

The Stay Well This Winter campaign went on the road on 2nd November as it drives home vital messages to the public.

The campaign is aimed at helping people prepare against the onset of winter and to raise awareness among those in key risk groups – such as the frail and elderly and those with long term conditions and respiratory illnesses.

Five teams will be highlighting the campaign at shopping centres throughout the country over the course of five weeks and telling people how they can best ward off common cold weather-related illnesses.

A joint NHS England and [Public Health England](#) initiative, Stay Well This Winter was officially launched last month and is supported by a national TV, Press and digital campaign.

The roadshows kicked off on 2nd November and appeared for two days at Wallsend in Newcastle, Salford in Manchester, Hinckley in Leicestershire, Bishops Cleeve in Nottingham and Norwich. Over the course of five weeks each show will move around the regions visiting around 67 sites nationwide in total.

The [Stay Well This Winter](#) campaign began in October with a national flu vaccination programme for children. This year the programme is being extended to children in school years 1 and 2, and aims to help three million children between the

ages of 2 and 6. For the first time, the youngest primary school children in 17,000 schools will be eligible to receive the free nasal spray vaccine, making this the largest school-based vaccination programme ever in England.

At the roadshow events, expert advice and support will be provided from the roadshow nurse and staff. In addition, leaflets and posters will inform the public about some of the key actions which will help them stay well this winter including:

- Making sure you get the flu jab if eligible
- Keeping yourself warm – heat your home to least 18 degrees C (or 65F) if you can
- If you start to feel unwell, even if it's just a cough or a cold, then get help from your pharmacist quickly before it gets more serious
- Making sure you get your prescription medicines before pharmacies close on Christmas Eve
- Always taking prescribed medicines as directed

The Stay Well This Winter roadshow will be visiting [destinations across England](#) for five weeks from Monday 2 November until the 5 December 2015.

For further information please visit www.nhs.uk/staywell.

SECTION FOUR: OTHER PUBLICATIONS/RESOURCES/CONFERENCES

Age UK: The Health and Care of Older People in England 2015

This report presents the latest authoritative data on older people's health and care needs and the provision of health and care services in England. Age UK analyses the degree to which these needs are being met by health and care services.

The population in England is ageing and with this comes a rising prevalence of people with multiple health conditions. Many of these are preventable or manageable, but there are concerns that funding for health and care services is not keeping pace with the changes and the system is not providing the right care at the right time in the right place for many older people. This report examines trends in funding, provision and the use of health and care services to investigate whether the health and care system is meeting the needs of older people in England.

Key findings:

- Almost £2 billion has been cut from older people's social care in the last 10 years.
- The number of people with unmet care needs has increased from 800,000 in 2010 to over a million in 2015.
- NHS funding has been mostly protected, but has not kept pace with demographic change and growing needs. A £20 billion shortfall by 2020 is expected.
- The number of emergency admissions and readmissions in hospitals is increasing, many of which could be avoidable with more community health and social care services. The pattern of demand on primary services has intensified: the number of times an older person visits a GP practice has increased from seven to 13 on average in just 13 years.
- Rates of admission for ambulatory care-sensitive conditions such as pneumonia, UTIs and congestive heart failure are rising dramatically.

The report is available via <http://www.ageuk.org.uk/professional-resources-home/research/reports/health-care-services/the-health-and-care-of-older-people-in-england-2015/>

C4CC Discussion Paper: How do we develop a person-centred, community-centred workforce, to support people with long-term conditions?

The Coalition for Collaborative Care (C4CC) aims, through the actions of a strong partnership and growing movement of people and organisations, to make person-centred, community-centred care the norm for people living with long-term conditions. To do this, it is taking action to influence and support local systems and practice, and to create enabling conditions at a national level.

This [discussion paper](#) looks at a key element in achieving C4CCs vision: the people who are part of the health and social care workforce. Planning, developing and supporting an integrated workforce that routinely works in a person-centred, community-centred way is a complex and multi-faceted challenge. To make it easier to understand and respond to, C4CC has broken it down into four areas:

- Mind-set challenges for person and community-centred care;
- The specific knowledge and skills that are needed;
- The importance of supportive working environments; and
- Capacity and roles: workforce planning.

This paper is intended to stimulate discussion. It briefly sets out some ideas on:

1. The context: what do we mean by person-centred, community-centred care?
2. The workforce challenge
3. What is needed to create change at the local and national levels?
4. What action might the C4CC partnership take?

The paper is available via <http://coalitionforcollaborativecare.org.uk/features/how-do-we-develop-a-person-centred-community-centred-workforce-to-support-people-with-long-term-conditions/>

King's Fund Briefing: Devolution: what it means for health and social care in England

Devolution of powers and funds from central to local government has emerged as one of this government's flagship policies. Along with powers over housing, skills and transport, the 'Devo Manc' deal between the Treasury and Greater Manchester paves the way for the councils and NHS in Greater Manchester to take control of the region's £6 billion health and social care budget.

Ahead of further devolution deals expected to be announced as part of the Spending Review 2015, this briefing describes the origins of the devolution agenda and charts its progress in relation to health and social care. Before drawing some broad conclusions, the penultimate section explores some of the key policy and implementation questions that remain unresolved. The briefing is available via <http://www.kingsfund.org.uk/publications/devolution>

King's Fund Integrated Care Bulletin

The latest Integrated Care Bulletin from the King's Fund is available via <http://kingsfundmail.org.uk/21A8-3PAQ6-5FFLWOSX4B/cr.aspx>

Information Governance Alliance News: Issue 1

This quarterly newsletter will cover policy, news, views and updates across Information Governance, with regular contributions from NHS England, the Information Commissioner's Office, The Centre of Excellence for Information Sharing and the Strategic Information Governance Network. The first issue is available via <http://systems.hscic.gov.uk/infogov/iga/news/newsissue1.pdf>

Improving the Lives of People with Long term Conditions

NHS Improving Quality (NHS IQ) and Ipsos MORI's Ethnography Centre of Excellence (ECE) have launched a set of resources giving unique insight into the lives of people with multiple long term conditions (LTCs). The resources are the result of an evaluation that identifies ways in which patients feel the health and care system can be improved to meet their needs. The evaluation also aims to help

influence staff behaviour towards patients. Videos and a presentation are available detailing the findings. The work has been carried out through NHS IQ's Long Term Conditions Improvement programme, commissioned by NHS England.

<https://www.ipsos-mori.com/researchspecialisms/socialresearch/specareas/nhspublichealth/navigating-health.aspx>

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Visit our website: www.leics.gov.uk/healthwellbeingboard.htm

Download our Better Care Fund "plan on a page":

http://www.leics.gov.uk/leics_county_bcf_submission_supplementary_appendix_b_bcf_plan_on_a_page.pdf