



Minutes of a meeting of the Shadow Health and Wellbeing Board held at County Hall, Glenfield on Thursday, 21 March 2013.

PRESENT

Leicestershire County Council

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

Lesley Hagger  
Dr Peter Marks

Leicestershire LINK

Kevin Blanks  
Geoff Smith

Leicestershire District/Borough Councils

Cllr John Boyce

Leicestershire Constabulary

Chief Superintendent Chris Thomas

NHS Commissioning Board Local Area Team

David Sharp

119. Minutes.

The minutes of the meeting held on 14 December 2012 were taken as read, confirmed and signed.

120. Urgent Item - Fit for Work: Improving Health, Tackling Health Inequality.

The Chairman advised the Board that he had agreed to consider as an urgent item a report on the Fit for Work Team: Improving Health, Tackling Health Inequality.

121. 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.

122. Position Statement.

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

Progress in Shadow Form  
Agenda  
Policy and Regulatory Matters.

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

123. 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.

124. Services for Health and Wellbeing.

The Board considered a report of the Director of Adults and Communities which presented the key findings from the evaluation of the Wellbeing Wednesdays Celebration in October 2012, recommendations for the continuation of the Celebration in 2013 and an update on the launch of the National Public Library offer for Health. A copy of the report marked 'N' is filed with these minutes.

A leaflet relating to the National Public Library offer for Health was circulated at the meeting; a copy is also filed with these minutes.

RESOLVED:

- (a) That the report be noted and the wellbeing initiatives be supported;
- (b) That officers be thanked for the work they had undertaken so far to promote health and wellbeing through the Communities and Wellbeing Service.

125. Action Plans for Joint Health and Wellbeing Strategy.

The Shadow Board considered a report of the Director of Public Health which set out the process for and progress to date in developing and agreeing action plans to support the delivery of the key strategic objectives agreed in the Joint Health and Wellbeing Strategy. A copy of the report marked 'B' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) Concern was expressed that there was an inconsistency in the willingness to share birth data with children's centres. It was suggested that this could be picked up during the development of information sharing agreements between the NHS and Local Authorities.
- (ii) It was noted that, unlike the other priorities from the Joint Health and Wellbeing Strategy, there was no overarching group to oversee the delivery of the mental health objectives. It was suggested that this work could be divided up and assigned to existing groups within the

substructure. However, concern was expressed that sharing responsibility for these priorities across the Health and Wellbeing Board substructure could result in a loss of expertise and lack of momentum, co-ordination and focus on delivery against this priority.

RESOLVED:

- (a) That the progress that has been made to date in developing the action plans be noted;
- (b) That officers be requested to develop proposals for accountability arrangements for the mental health priority in the Health and Wellbeing Strategy to be considered at the next meeting of the Board;
- (c) That a final version of the action plans be submitted to the next meeting of the Board by the Chairmen of the respective Subgroups.

126. Local Strategy on Suicide Prevention.

The Shadow Board considered a report of the Director of Public Health which provided an update on the work of the Leicestershire, Leicester and Rutland (LLR) Suicide Audit and Prevention Group and presented the draft LLR Suicide Prevention Strategy and Plan. A copy of the report marked 'C' is filed with these minutes.

Arising from discussion, the following points were raised:-

- (i) It was suggested that references in the Strategy to children should be strengthened and that a representative of children's social care should be appointed to the Group and appropriate links made to the Local Safeguarding Children Board.
- (ii) The aim to promote mental health amongst children and young people was welcomed although it was noted that the creation of Academies had made it more difficult to deliver a consistent programme. It was vital to establish networks with schools to progress this; Public Health were considering investing some funding in this area.

RESOLVED:

- (a) That officers be requested to take the comments now made into account when producing the final version of the Suicide Prevention Strategy;
- (b) That the approach outlined in the LLR Suicide Prevention Strategy and Plan be supported;
- (c) That governance of the LLR Suicide Audit and Prevention Group be considered during the development of proposals for accountability arrangements for the mental health priority in the Health and Wellbeing Strategy.

127. Quality, Performance Management and Accountabilities in the New Health Service Structure.

The Shadow Board considered a report of the Chief Executive of Leicestershire County Council which set out the performance management, quality and accountability arrangements in place following the changes in National Health Service structure and in particular those now required to support the implementation of the Health and Wellbeing Strategy and the work of the Health and Wellbeing Board. A copy of the report marked 'D' is filed with these minutes.

RESOLVED:

- (a) That the different elements of performance management, such as the national outcomes frameworks included in Appendix 1 to the report, established to support accountabilities and the operation of the new health system, be noted;
- (b) That the approach and obligations in respect of quality and safety be noted and that these responsibilities be reinforced to all local provider and commissioner organisations;
- (c) That the performance approach set out in paragraphs 47 and 51 of the report, with regard to the various boards maintaining their own robust performance monitoring and reporting arrangements with this Board maintaining oversight of certain key indicators and areas and issues raised on an exception basis and through an overarching health dashboard be endorsed;
- (d) That the relevant officers be requested to consider suitable governance arrangements to support delivery of joint priorities relating to strategy outcomes for mental health;
- (e) That the current areas flagged for performance improvement in paragraph 61 of the report be noted and that the action planning and supporting measure setting work currently being undertaken to support delivery of the Health and Wellbeing Strategy priorities be overseen by the JSNA Steering Board and report to a future meeting;
- (f) That the three local priorities and targets for each CCG for the purpose of Quality Premium Payments, as set out in paragraphs 44 and 45 of the report, be endorsed;
- (g) That the plans to establish a local health performance intelligence network to ensure a streamlined and coordinated approach to the management of health performance data locally and the need to review the operation of health performance management following a pilot period to assess if it is effective and sufficiently well resourced be noted;
- (h) That a report on the Secretary of State's Mortality Project be submitted to the next meeting of the Board.

128. Joint Health and Wellbeing Strategy/Joint Strategic Needs Assessment Steering Board.

The Shadow Board considered a report of the Director of Public Health which set out the revised terms of reference for the Joint Health and Wellbeing Strategy/Joint Strategic Needs Assessment Steering Board. A copy of the report marked 'E' is filed with these minutes.

It was noted that the second paragraph of the terms of reference referred to GP Consortia. This needed correcting to refer to Clinical Commissioning Groups.

RESOLVED:

That the terms of reference for the JHWS/JSNA Steering Board be approved, subject to the comment now made.

129. Update from the Integrated Commissioning Board.

The Board considered an update on the work of the Integrated Commissioning Board. A copy of the report marked 'F' is filed with these minutes.

In the light of the Francis Report and the development of Local Healthwatch, consideration would need to be given to how the Integrated Commissioning Board would engage with the public and patients and reflect their views in its work.

RESOLVED:

That the report and comment now made be noted.

130. Update from the Housing Services Partnership.

The Shadow Board considered an update from the Housing Services Partnership which provided information on the work of the Partnership and sought comments on future priorities. A copy of the report marked 'G' is filed with these minutes

Arising from discussion the following points were raised:-

- (i) It was important to articulate the role housing played in improving health.
- (ii) The Housing Services Partnership needed to take into account that fact that some people found it difficult to maintain a property.
- (iii) New housing was included in the remit of the Housing Planning and Infrastructure Group, which had a role in designing communities. It was important that this Group was aware of the Extra Care Strategy.
- (iv) The Housing Services Partnership would need to link work on the Welfare Reforms with that on the Child Poverty Strategy,

RESOLVED:

- (a) That the Board receive a further report setting out the results of the work of the work with the Chartered Institute of Housing to identify the housing offer to support improved health outcomes across Leicestershire;
- (b) That the comments now made on the future work priority areas be referred to the Housing Services Partnership for consideration;
- (c) That the Housing Planning and Infrastructure Group be invited to a future meeting of the Board.

131. Ageing Well Peer Review

The Shadow Board considered a presentation from the Chief Executive of Blaby District Council which set out the interim findings of the Ageing Well Peer Review which had taken place during February 2013. A copy of the slides forming the presentation is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) The views of private sector organisations would be sought during the next stage of the review.
- (ii) The Supporting Leicestershire Families service model was felt to provide a useful template for the future delivery of Ageing Well. However, it was acknowledged that Ageing Well was a more complex area with significantly more service users affected and more organisations involved.

RESOLVED:

That the presentation be noted.

132. East Leicestershire and Rutland CCG Summary and Update to Draft Annual Plan 2013/14.

The Shadow Board considered a report from East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG) which provided a summary of the development of the ELR CCG draft Annual Plan, presented the Plan on a Page, outlined the key programmes of care and set out the challenges to deliver Quality, Innovation, Productivity and Prevention (QIPP). A copy of the report marked 'H' is filed with these minutes.

Since the report was written the £1.3m gap in QIPP savings had been closed. The CCG was confident it could deliver a balanced plan and manage the risks involved. The selection of local priorities had been challenged by the Local Area Team and the CCG was currently working with the Local Area Team to resolve this.

ELR CCG had been rigorous in its approach to identifying realistic savings that would not impact on quality of care. The savings would focus on helping providers to deliver value for money and care in appropriate settings. It was noted that this would become more difficult as the level of required savings increased.

The Local Area Team confirmed that both local CCGs had been subject to

rigorous challenge on their planning assumptions for 2013/14.

RESOLVED:

That the report and the "Plan on a Page" be noted.

133. West Leicestershire CCG Annual Plan 2013/14

The Shadow Board considered a report from West Leicestershire Clinical Commissioning Group (WL CCG) which set out the 'Plan on a Page' as part of the 2013/14 Annual Plan Process. A copy of the report marked 'I' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) Concern was expressed regarding the quality of services at the George Eliot and Burton on Trent Hospitals, which were used by patients in the WL CCG area. It was noted that the CCG was monitoring issues within these hospitals and working with them to resolve the concerns.
- (ii) Confidence in the Accident and Emergency Department (A & E) at the University Hospitals of Leicester was low due to ongoing performance problems. The Trust was now in 'recovery mode', although the level of challenge involved in transforming A & E was not to be underestimated. It was felt that there was more support across the health economy for transformation plans than had previously been the case due to the Better Care Together Programme. Within this programme, the Emergency Care Network would continue its role in co-ordinating improvements to urgent and emergency care pathways across Leicestershire, Leicester and Rutland.

RESOLVED:

- (a) That the "Plan on a Page" be noted;
- (b) That the Leicestershire and Lincolnshire Area Team be requested to submit a report on A & E Performance to the next meeting of the Health and Wellbeing Board.

134. Direct Commissioning Plan.

The Shadow Board considered a report from the Leicestershire and Lincolnshire Area Team (LLAT) which provided an overview of the roles and responsibilities and planning assumptions of the LLAT within the context of the annual planning round. A copy of the report marked 'J' is filed with these minutes.

Arising from discussion the following points were raised:-

- (i) The primary purpose of the LLAT was to authorise other bodies to commission services. The LLAT recognised that at this stage of the new commissioning system they were directly responsible for commissioning a wider range of services than would be the case in the future. The Health and Wellbeing Board would need to challenge the LLAT to reduce its

direct commissioning responsibilities and monitor its competence as a direct commissioner.

- (ii) Recruitment and retention of health visitors was a more significant issue in Leicester City than it was in Leicestershire. However, the LLAT was aiming to improve recruitment, retention and morale of health visitors across the subregion in line with government targets.

RESOLVED:

That the progress made with the LLAT Direct Commissioning Plans be noted.

135. System Architecture Update.

The Shadow Board considered a presentation from the Leicestershire and Lincolnshire Area Team which provided information on the role and function of Local Area Teams and Clinical Senates. A copy of the slides forming the presentation is filed with these minutes.

It was noted that the views of Clinical Senates would be reported to the Health and Wellbeing Board through the Local Area Team representative.

RESOLVED:

That the presentation be noted.

136. Leicester, Leicestershire and Rutland Wide Economic Modelling.

The Shadow Board received a report from the Leicestershire, Leicester and Rutland Better Care Together Programme which provided an overview of the work on economic modelling that was currently taking place and details of the progress to date. A copy of the report marked 'K' is filed with these minutes.

RESOLVED:

That the report be noted.

137. Public Health Transition.

The Shadow Board received an oral update from the Director of Public Health on the progress made with Public Health Transition. It was anticipated that the transition would be completed by the end of March 2013 although formal sign-off of the transfer schedule was still awaited.

RESOLVED:

- (a) That the update now provided be noted;
- (b) That the officers involved be thanked for the work they have undertaken to achieve a successful transfer of Public Health from the Primary Care Trust to the County Council.



138. Statutory Health and Wellbeing Board.

The Shadow Board considered a report of the Chief Executive of Leicestershire County Council which set out the changes needed to enable the Shadow Health and Wellbeing Board to be established as a statutory committee of the County Council on 1 April 2013. A copy of the report marked 'L' is filed with these minutes.

RESOLVED:

- (a) That the amendments to the County Council's Constitution be noted;
- (b) That the Terms of Reference for the Health and Wellbeing Board be approved;
- (c) That the revised arrangements with regard to membership. Voting, substructure, code of conduct and substitutes be noted;
- (d) That the Terms of Reference for the Health and Wellbeing Board Steering Group be approved.

139. Key Findings of the Francis Report, Next Steps and our Local Response.

The Shadow Board considered a report of the Programme Director which summarised the key themes from the Sir Robert Francis Report QC following the public enquiry into the quality of care at Mid Staffordshire NHS Foundation Trust between 2005 and 2009 and set out how local organisations were responding to these findings, the next steps and the role of the Health and Wellbeing Board in this context. A copy of the report marked 'M' is filed with these minutes.

RESOLVED:

- (a) That the report and proposed next steps be noted;
- (b) That local chief officers be requested to submit a report to the next meeting of the Health and Wellbeing Board focusing on the proposed collective response of partners in Leicester, Leicestershire and Rutland, along with recommendations about how the Health and Wellbeing Board will be engaged in this work.

140. Date of Next Meeting.

It was noted that the next meeting of the Health and Wellbeing Board would take place on Thursday 13 June at 2.00pm.

141. Urgent Item - Fit for Work: Improving Health, Tackling Health Inequality.

The Shadow Board considered this matter, the Chairman having decided it was of an urgent nature due to the need for the Fit for Work Service to find funding for 2013/14 by the end of March 2013.

The Shadow Board considered an urgent report of the Director of Public Health which described the work of the Fit for Work Team and presented the case for

the provision of non-recurrent interim funding to keep the service operational before the national health and Work Advice and Assessment Service was launched in Spring 2014. A copy of the report is filed with these minutes.

It was noted that there was agreement between the Clinical Commissioning Groups (CCG) and Public Health Team to provide the required funding. However, this report would be considered by the Integrated Commissioning Board to consider which budget the CCG funding would be taken from.

RESOLVED:

That the Director of Public Health and Clinical Commissioning Groups be recommended to provide non-recurrent interim funding of £120k to the Leicestershire Fit for Work Service.

2.00 pm - 4.30 pm  
21 March 2013

CHAIRMAN