

Minutes of the Meeting of the PUBLIC HEALTH AND HEALTH INTEGRATION SCRUTINY COMMISSION

Held: WEDNESDAY, 9 AUGUST 2023 at 5:30 pm

PRESENT:

Councillor Whittle (Chair) Councillor Bonham (Vice Chair)

Councillor Gopal

Councillor Kitterick

In Attendance

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1. APOLOGIES FOR ABSENCE

Councillor Whittle as the Chair led on introductions.

Apologies for absence were received from Councillor March, Westley and Zaman.

2. DECLARATIONS OF INTEREST

There were no declarations of Interest.

3. MINUTES OF THE PREVIOUS MEETING

AGREED:

The minutes of the meeting of the Health and Wellbeing Scrutiny Commission held on 17 January 2023 and on 16 March 2023 were confirmed as a correct record.

4. MEMBERSHIP OF THE COMMISSION 2023/24

The Membership of the Public Health and Health Integration Scrutiny Commission 2023/24 was noted.

Councillor Kitterick informed the Commission that Councillor Sahu may be replacing Councillor Kitterick on the Commission for future meetings.

5. DATES OF THE COMMISSION 2023/24

The dates of the Public Health and Health Integration Scrutiny Commission were noted.

6. QUESTIONS, REPRESENTATIONS AND STATEMENT OF CASE

The Monitoring Officer noted that none had been received.

7. PETITIONS

The Monitoring Officer noted that none had been received.

8. OVERVIEW OF PUBLIC HEALTH AND HEALTH INTEGRATION

The Director for Public Health introduced the item and provided an overview of Public Health and a brief history of the service and highlighted the priorities of Public Health to address health inequalities. The presentation drew Members attention to the 90% of most deprived places in Leicester, Leicestershire and Rutland (LLR) that were in the city.

As part of the discussions, Members queried how the analysis of the information provided could develop council policy and what practical measures could be taken to encourage healthy living environments. It was noted that there were a wide range of decisions that needed to be taken. Furthermore, a programme Manager had been appointed to work across the Council to undertake health impact assessments, which would look at large council projects, policies and programmes and do an independent and robust review on the impact of schemes on peoples health and that other departments had welcomed this.

The Deputy City Mayor for Social Care, Health and Community Safety noted that the Active Leicester Strategy that had just launched which addresses inactivity in areas of the city, demonstrated the active approach to address health concerns in the city and that although this was just a beginning, work was starting to be delivered.

The Vice-Chair of the commission noted that development in local neighbourhoods were impacting local services and requested officers to provide a breakdown of local neighbourhoods in the city and for the commission to explore how local planning policy could be linked to public health matters.

Public Health Partners continued to deliver the presentation to help Members of the Commission understand key service areas, some of the priorities and challenges. The Chief Operating Officer for the Integrated Care Board provided an overview on the Integrated Care System and the focus on integration going into the future. The presentation highlighted 4 core purposes and 13 pledges which would help develop a plan over the next 5 years to meet the health

needs of the population and manage the budget set by the Department for Health and Social Care.

As part of the discussions, it was noted that:

- Measures were in place to measure both qualitative and quantitative to demonstrate the success on pledges which will be received by the Health and Wellbeing Board
- The plan was created with the main audience considered to be the Department of Health and Social Care but the short sharp videos were created to engage communities and were proving to be effective and would be rolled out further to reach within communities
- Practical changes and improvements on the reorganisation would support improved services for the population
- GP appointment availability within 2 weeks for face-to-face appointments was a metric in the plan, this was clearly heard from the city population and a trajectory was available for Members

The Chair took the opportunity to note that there was an item on GP accessibility on the Work Programme and this would come to Commission in due course.

The Chief Nurse further delivered a presentation providing an overview of University Hospitals Leicester (UHL) and the 7 priorities currently being worked on which made up the interim strategic plan with the new strategy co created with the public, that will be published in September 2023. It was also noted that the Urgent and Emergency Care plan and a robust plan for the access to plan care had been published in March 2023 and the two went hand in hand and as a system work was being delivered to provide a safe, timely and sustainable service for all.

As part of the presentation, it was also noted that:

- Preparations for winter 2023 were well underway and although it would be challenging, the service were in a better starting position than last year
- Ambulance handover times had reduced by 85% compared to last year due to a range of interventions, including the new ambulance escalation unit at the LRI, delivering a better experience for patients coming into the hospital and allowing for the ambulance to be back in the community as soon as possible
- Following the pandemic, Leicester's hospitals had the most challenging recovery trajectory in the country and now significant inroads were being made on the recovery
- Two-year wait times had been eliminated and fewer patients were now waiting list for a year, these numbers have been disrupted due to the industrial action, but phase 1 of the East Midlands Planned Care Centre was having a positive impacts on patients waiting list.
- UHL has been approved to deliver on its preferred way forward for the reconfiguration programme with huge investments in Leicester's hospitals and patient care and the new facilities were due for completion by 2023.

The Group Director, Strategy and Partnerships provided an overview on the Leicestershire Partnership Trust (LPT) vision, key focusses and how this was delivered with a workforce of about 76,000 people. As part of the discussions Members of the Commission requested more information on the Crisis Cafes also known as Wellbeing Cafes which was a local initiative, making services more accessible run by local community groups. It was suggested that these were really beneficial hubs in the community supporting a range of innovative examples within the community.

AGREED:

- That the overview presentations be noted
- That the arising issues from the meeting around access to GP practices and the link between Public Health and Planning be considered for the work programme
- That the Public Health Team and the Health Partners be requested to consider how the Integrated Care Services topic can be broken down and each individual strand added to the work programme for consideration by the Commission.

9. CHILDREN'S HEALTH AND WELLBEING SURVEY

The Deputy City Mayor for Social Care, Health and Community Safety, introduced the item on the Childrens Health and Wellbeing Survey.

The Director for Public Health delivered a presentation providing the commission with an overview of the findings of the survey. It was noted that:

- Survey results were available on the Leicester Open Data Platform and that further analysis of the findings of the survey was an option for the Commission.
- The survey results would be used for commissioning targeted provisions and services.
- Each school that had participated in the survey have had a breakdown of their results and feedback had been positive with schools designing their own strategies following the findings.

As part of the discussions, it was noted that alternative activities to get children away from screens should be considered. Although technological devices were considered to be beneficial, it was also suggested that if used incorrectly, they could be problematic. The Director of Public Health noted that there were tools to balance and manage children's consumption on devices, but it was also important to ensure an alternative was available and that tools were in place so that children use their time on devices to benefit themselves independently.

In response to the Chair's query on representation in the survey, the Director for Public Health noted that the survey had a good representative sample which was compared to different types of measures.

In further discussions, members of the commission queried the high level of

bullying in schools. In response to the queries raised it was noted that although bullying took up different forms and was difficult to police, schools had made huge progress on tackling bulling. It was suggested that observed bullying was easier to tackle and that school nursing services also provided social education on bullying.

Members of the Commission raised their concerns with sanitary products for a high proportion of teenage girls who may not be able to afford them due to the current economical climate. It was noted that all schools were required to provide sanitary products and that as an authority it was evaluating how this could be rolled out across more council buildings.

AGREED:

- 1) That the Officers be thanked for the report
- 2) And that the report be noted.

10. WORK PROGRAMME

That the arising issues from the meeting including issuing an invitation for each of the lead health partners to outline their vision and priorities in more detail be considered for the work programme for the municipal year.

11. ANY OTHER BUSINESS