



Leicester
City Council

Minutes of the Meeting of the
HEALTH AND WELLBEING BOARD

Held: THURSDAY, 20 SEPTEMBER 2018 at 5:30 pm

P R E S E N T :

Present:

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| Councillor Clarke
(Chair) | – Deputy City Mayor, Environment, Public Health and Health Integration, Leicester City Council. |
| John Adler | – Chief Executive, University Hospitals of Leicester NHS Trust. |
| Matt Cane | – Leicestershire Fire and Rescue Service. |
| Phil Coyne | – Strategic Director, City Development and Neighbourhoods |
| Harsha Kotecha | – Chair, Healthwatch Advisory Board, Leicester and Leicestershire. |
| Steven Forbes | – Strategic Director Social Care and Education, Leicester City Council. |
| Sue Lock | – Managing Director, Leicester Clinical Commissioning Group |
| Councillor Danny Myers | – Assistant City Mayor, Entrepreneurial Councils Agenda, Leicester City Council. |
| Dr Avi Prasad | – Co-Chair, Leicester City Clinical Commissioning Group. |
| Inspector Nicola Preston | – Local Policing Directorate |
| Councillor Sarah Russell | – Deputy City Mayor, Children and Young People's Services, Leicester City Council. |
| Ruth Tennant | – Director of Public Health, Leicester City Council. |

In attendance

Graham Carey

– Democratic Services, Leicester City Council.

138. APOLOGIES FOR ABSENCE

Apologies for absence were received from:-

Lord Willy Bach	Leicester, Leicestershire and Rutland Police and Crime Commissioner
Andrew Brodie	Assistant Chief Fire Officer, Leicestershire Fire and Rescue Service
Councillor Piara Singh Clair	Deputy City Mayor Culture, Leisure, Sport and Regulatory Services
Councillor Vi Dempster	Assistant City Mayor, Adult Social Care and Wellbeing
Professor Azhar Farooqi	Co-Chair, Leicester City Clinical Commissioning Group
Chief Supt Andy Lee,	Head of Local Policing Directorate, Leicestershire Police
Roz Lindridge	Locality Director Central NHS England – Midlands & East (Central England)
Dr Peter Miller	Chief Executive, Leicestershire Partnership NHS Trust
Mark Gregory	General Manager, Leicestershire, East Midlands Ambulance Service NHS Trust

139. DECLARATIONS OF INTEREST

Members were asked to declare any interests they might have in the business to be discussed at the meeting. No such declarations were made.

140. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

That the Minutes of the previous meeting of the Board held on 12 July 2018 be confirmed as a correct record.

141. FUTURE IN MINDS

Chris West, Director of Nursing and Quality presented a report and presentation on the progress made in relation to implementation of the Local Transformation Plan and next steps for 2019-21 in relation to the Future in Mind Programme.

The Leicester, Leicestershire and Rutland's Transformational Plan aimed to:-

- Develop in partnership with children and young people (C&YP) and key stakeholders.
- Set out a multi-agency approach to improve mental health and wellbeing in children and young people.
- Address gaps in current service provision.

The vision for the Plan was that children and young people would have access to the right help at the right time through all stages of their emotional and mental health development. This would require a whole system approach to delivering a range of emotional, mental health and wellbeing services that met all levels of need. This would be achieved through:-

- Engagement with all stakeholders, including education, social care, health, police, housing and justice, and children & young people and their families.
- Developing a shared work plan with key priorities, including joint commissioning.
- Improved interfaces between agencies to reduce fragmentation in commissioning and service delivery so that organisational boundaries were not barriers to care.

The progress and implementation of the Transformation Plan would be monitored through monthly Future in Mind Governance Meetings. The presentation provided an update on progress in 2018-19 and the plans for 2019-21.

The focus in In 2017-18 had been on a system-wide 'children & young people's emotional, mental health and wellbeing' pathway. Services included:

- Primary Mental Health Teams.
- Resilience (including resilience in schools, 0-19 healthy child programmes).
- Online counselling.
- Social Care & Early Help (Local Authority Services).
- Early Intervention (working with voluntary sector).
- Specialist Mental Health (working with CAMHS and specialist teams e.g. early psychosis, eating disorders).
- Crisis Resolution and Home Treatment.
- Learning Disability Assertive Outreach.
- Family Action Post Sexual Abuse Counselling.
- Liaison Psychiatry.

- City Early Intervention Psychology Support (CEIPS).

Going forward in 2019-20, the pathway would be shaped by continuing partnership work with children, young people, families, carers and professionals. Investments for had already been identified to help transform services further, these included:

- Interventions for children & young people who had Autism with or without Learning Disability.
- ADHD.
- Triage & Navigation Service.
- Trailblazer Mental Health Support Teams working in partnership with education providers.
- The Mistle Project developing a 'wraparound' service for looked after children (LAC).
- Support for children & young people who had come into contact with the criminal justice system and developing trauma focussed interventions.

The Transformation Plan had been approved all 3 CCGs in the LLR footprint and had been shared with NHS England.

Members of the Board commented that the implementation of the Triage and Navigation Service was key to reducing inappropriate referrals to CAMHS and to ensure that children and young people would get the right help at the right time and make the best use of services that were in place to support them. It was considered that the triage system could considerably reduce the number of inappropriate referrals to CAMHS.

RESOLVED:

That the progress on the implementation of the Local Transformation Plan be noted and that the proposed steps for 2019/21, as outlined in the report and presentation, be supported and that the Board receive a further report to review progress in 12 months time.

142. LEICESTER CITY COUNCIL WINTER PLANNING

The Board received a presentation on Leicester City Council's winter planning arrangements from the Strategic Director of City Development and Neighbourhoods.

It was noted that:-

- That the Council provided 254 bed spaces with the ability to call upon an additional 10 severe weather beds at the Dawn Centre and another 10 beds across faith venues through One Roof Leicester.
- The Council was one of the authorities with the lowest record of needing to rely on providing bed and breakfast services, but these would be utilised if required.

- The Revolving Door service provided intensive services which had proved successful in providing alternative accommodation to prevent individuals and families from becoming homeless.
- The Council's initiatives were also achieving a sustained reduction in the numbers of people sleeping rough.
- The Council also worked with energy companies to install solid wall insulation in Council houses and to provide low cost energy which assisted in enabling vulnerable people to stay warm in severe weather.
- The Council had responded to a large number of boiler failures and repairs in Council houses during the last winter and had enhanced providing information to tenants online.
- The Highways Department had a Winter Service Plan to prioritise gritting of essential road routes, to keep bus routes usable and emergency vehicles to access hospitals etc. Major routes to schools were also prioritised and over 400 grit bins were provided around the city to enable footpaths to be usable in severe winter weather and these contributed to reducing falls and injury.

In response to a question from the Chief Executive of the Leicester CCG concerning rapid access to support and intervention services to assist discharges from hospital and reduce bed-blocking, the Strategic Director commented that whilst it was recognised that improving heating conditions in patients homes could be somewhat lengthy to implement with third party involvement, officers were looking at improving identifying these needs earlier in the process and not when the patient was being discharged.

RESOLVED:

That the Strategic Director be thanked for his informative presentation.

143. RESILIENCE PLANNING ARRANGEMENTS FOR WINTER 2018/19

The Board received a presentation providing an overview of practical winter planning arrangements and health care winter planning arrangements by the Leicestershire, Leicester City, and Rutland (LLR) health and social care system, including plans for frail & multi-morbidity patients.

Mr Mike Ryan, Director of Urgent and Emergency Care, LLR, Phil Coyne, Strategic Director, City Development and Neighbourhoods, Rachna Vyas, UHL and Mark Pierce Leicester City CCG all contributed to the presentation.

The presentation had been circulated with the agenda for the meeting and outlined Leicestershire, Leicester City, and Rutland (LLR) health and social care system approach to focusing efforts toward building greater and sustainable resilience across urgent and emergency care of patients and covered the following topics:

- What system performance looked like last winter;
- An assessment of the major causes for pressure that we

- experienced;
- The lessons that were learnt as a result;
- The actions to avoid similar issues; and
- An assessment of LLR's readiness for the coming winter

The presentation also commented upon the following:-

- The increasing pressures being faced by health and social care services during the winter period resulting from:-
 - 80% of the hospital beds being occupied by patients over 75 years of age (20% of the population) who required more care and longer stays in hospital.
 - Emergency surgical cases had exceeded normal levels.
 - The length of stay for medical patients at UHL had increased by nearly 2 days from January to March 2018.
 - Norovirus and flu had resulted in bed closures at both UHL and LPT, and higher levels of staff sickness/absence were experienced during the peak periods of demand.
 - High levels of elective surgery cancellations than previous years consequent upon following national instructions to all acute Trusts.
 - 30% increase in calls to NSH111.
 - Ambulances service were regularly at higher escalation levels and patient handover times had been higher than expected.
- The lesson learned from 2017/18.
- The actions being implemented to avoid similar issues arising next winter including:-
 - A focused review and revision of the system-wide Escalation Plan.
 - Improved patient assessment areas arising from the second part of the A&E development following the opening of the full emergency floor in June 2018.
 - A realignment of UHL's bed capacity and creating additional capacity equivalent to 3 wards to meet the expected increase in medical patient demand.
 - Improving access to IT systems enabling clinicians to see the patient's clinical record.
 - Improved protocols between UHL and EMAS.
 - Improved communications systems between consultants and GPs.
 - Introduction of a Red Bag scheme in care homes which had proved successful elsewhere.
 - Supporting more patients to better understand and manage their own conditions, especially those with respiratory conditions.
 - Improved discharge pathways.
 - Designing a new pathway for frail patients based on local needs and national standards and utilising other interventions to reduce social isolation and engage carers and voluntary organisations.
 - The Flu & Immunisation programme for the forthcoming winter.
 - Introduction of a LLR programme to identify frail and multimorbid

patients and assess their needs and wishes and provide a response based upon on a comprehensive assessment of need involving medical, cognitive, functional, social and environmental considerations.

- The ongoing arrangements for implementing actions will be constantly monitored by the A&E Delivery Board and any learning would be fed into updated versions of the plans to achieve constant improvement.

Board members commented that:-

- Utilising and supporting pharmacies in raising awareness of the services they can provide and health promotions to provide preventative measures and treat minor conditions could reduce pressures on hospital admissions by reducing the number of patients presenting at A&E conditions that could have been treated elsewhere.
- NHS 111 had an important role to play in where they referred callers for treatment.
- The frailty initiative had reduced admissions but there were still considerable numbers of patients with frailty conditions being admitted into the system.
- UHL's performance in patient handovers had improved from being the worst in the EMAS area to being average for the last two months.
- Although extra beds could be provided, this was still dependent upon the ability to provide sufficient nursing staff to operate them.

RESOLVED:-

That everyone be thanked for contributing to the presentation and that front line staff be thanked for their work in delivering the strategy.

144. CHILDREN, YOUNG PEOPLE & FAMILIES HEALTHY WEIGHT STRATEGY

The Board received a report and presentation on the Children, Young People & Families Healthy Weight Strategy from Laura Carvell, Programme Officer (Children) Public Health and Clare Mills, Lead Children's Commissioner, Public Health.

It was noted that the results of the National Childhood Measurement Programme from 2015/16 showed that 20% of Reception pupils were either overweight or obese and this increased to 37% for Year 6 pupils. Whilst the National averages for children who were overweight and obese were of concern, there were significantly higher levels of excess weight amongst Year 6 children in Leicester than the national average. It was estimated that obesity cost the nation approximately £27m and had an increasing effect on infant mortality.

There had previously been a Healthy Weight Strategy from 2009-2013 covering both adults and children prior to the responsibility of Public Health transferring from the NHS to local authorities in 2013. Given the national focus on

childhood obesity and the opportunities that arose from Public Health being with the Council, it was decided that it was an appropriate time to develop a new strategy for Children and Young People. The new strategy had been developed by a multi- disciplinary Steering Group.

The Strategy's ambitions were to:-

- Create an environment where children and young people were supported to be fit and happy by:-
 - Celebrating and enjoying good food.
 - Being confident and having a positive body image.
 - Being fit, strong and active.
- Work with a range of organisations to promote affordable health food and drink and enable Leicester to be a healthy environment to live and grow up in.
- Improve children's knowledge about healthy eating and physical activity and encourage them to make positive choices.
- Encourage adults who live or work with children to be good role models who have positive relationships with food and physical activity.

The Strategy encompassed pulling together the work already delivered by partners by bringing them together to deliver a joined-up approach for programmes related to healthy weight. The Strategy would be supported by an Action Plan to capture other key actions and explore a number of new projects and initiatives.

One such initiative was the 1,000 Tweaks designed to be a low-cost initiative to encourage businesses, organisations, families and individuals to make small and easy changes to bring about changes in behaviour. A tweak was defined as something that involved:-

- A little change by an organisation, business, family or individual to help children eat healthy and be more physical activity.
- A small and easy to implement change.
- A person could easily start straight away.
- A person could easily do on their own.
- No cost or little cost to implement.

The Board were shown a short promotional video of individuals and groups describing the tweaks they had made.

The Chair commented that he had previously written to all Board members urging them to consider making a Tweak. He asked members to submit their Tweaks to the lead officers and the Leicester Mercury before the next Board meeting.

The Chief Executive of UHL NHS Trust stated that staff in the Trust had

already embraced the initiative across departments. One Tweak that had proved popular had been to provide free fruit in the children's outpatients department.

RESOLVED:

That the officers be thanked for their presentation and that Board Members be encouraged to participate in the 1,000 Tweaks initiative and to publicise them.

145. QUESTIONS FROM MEMBERS OF THE PUBLIC

The following questions had been submitted in advance by Viran Patel who was not in attendance at the meeting:-

Supporting Statement

The JSNA does not provide the full waiting list for primary care and secondary care services for assessment and diagnosis. Given that it is up to the statutory authority to deal with making sure that public sector equality is upheld will they do the following:

Question 1

“Will the chair including all associated bodies that commission local services, now ask or provide waiting lists for each contract in place for assessment and diagnosis, in the NHS and provide the total cost of clearing each waiting list?”

Question 2

“Will the chair request that the waiting list for all Social Care services are published on a monthly basis for review emergency or otherwise, and the first assessment and provide a cost for each month to clear that waiting list?”

Question 3

“Will the board then provide the list to the Sectary of State for Health and Social Care, to make sure they are aware of the waiting list and hold them to account on funding the clearing of such waiting list under the health and social care act and the care act?”

The Chair stated that as the questioner was absent from the meeting a written response would be sent to Mr Patel.

The Chair then invited other questions from members of the public. There were no other questions submitted.

146. DATES OF FUTURE MEETINGS

The Board noted meetings would be held on the following dates:-

Thursday 22 November 2018 – 10.00am
Thursday 28 February 2019 – 5.00pm

Meetings of the Board are scheduled to be held in Meeting Rooms G01 and 2 at City Hall unless stated otherwise on the agenda for the meeting.

147. ANY OTHER URGENT BUSINESS

There were no items of Any Other Urgent Business.

148. CLOSE OF MEETING

The Chair declared the meeting closed at 7.17 pm.