

# Minutes of the Meeting of the HEALTH AND WELLBEING BOARD

Held: MONDAY, 19 JUNE 2017 at 2:00 pm

# **PRESENT:**

# Present:

Jill Smith

<u>Present:</u>		
Councillor Sarah Russell Chair for the Meeting in the Deputy City Mayor's absence.	-	Assistant City Mayor, Children's Young People and Schools, Leicester City Council.
Andrew Brodie	-	Assistant Chief Fie Officer, Leicestershire Fire and Rescue Service
Karen Chouhan	_	Chair, Healthwatch Leicester.
Councillor Piara Singh Clair	-	Assistant City Mayor, Culture, Leisure and Sport, Leicester City Council.
Frances Craven	-	Strategic Director, Education and Children's Services, Leicester City Council.
Chief Inspector Jed Keen	-	Local Policing Directorate, Leicestershire Police.
Dr Peter Miller	-	Chief Executive, Leicestershire Partnership NHS Trust.
Liz McDermott	-	Commissioning Manager, Office of the Police and Crime Commissioner.
Richard Morris	-	Director of Operations and Corporate Affairs, Leicester City Clinical Commissioning Group
Councillor Abdul Osman	_	Assistant City Mayor, Public Health, Leicester City

Council.

Trust.

Chief Nurse, University Hospitals of Leicester NHS

Ruth Tennant – Director of Public Health, Leicester City Council.

# In attendance

Graham Carey – Democratic Services, Leicester City Council.

#### 72. APOLOGIES FOR ABSENCE

John Adler Chief Executive, University Hospitals of Leicester

**NHS Trust** 

Lord Willy Bach Leicester, Leicestershire and Rutland Police and

Crime Commissioner

Leicester City Council

Steven Forbes Strategic Director Adult Social Services, Leicester

City Council

Prof. Azah Farooqi Co-Chair, Leicester City Clinical Commissioning

Group

Mark Gregory Leicestershire General Manager, East Midlands

**Ambulance Service** 

Andy Keeling Chief Operating Officer, Leicester City Council

Chief Supt Andy Lee Head of Local Policing Directorate, Leicestershire

Police

Will Legge Divisional Director, East Midlands Ambulance

Service

Roz Lindridge Locality Director Central NHS England, Midlands

and East (Central England)

Sue Locke Chief Executive, Leicester City

**Clinical Commissioning Group** 

Councillor Rory Palmer Deputy City Mayor, Leicester City Council

Dr Avi Prasad Co-Chair, Leicester City Clinical Commissioning

Group

Toby Sanders Senior Responsible Officer, Better Care Together

Programme

# 73. 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.

# 74. MEMBERSHIP OF THE BOARD

Members noted the membership of the Board for 2017/18 approved by the Council on 11 May 2017 as follows:-

# **City Councillors**

Councillor Rory Palmer, Deputy City Mayor - Chair

Councillor Adam Clarke, Assistant City Mayor – Energy and Sustainability

Councillor Piara Singh Clair, Assistant City Mayor - Culture, Leisure and Sport

Councillor Abdul Osman, Assistant City Mayor - Strategic Partnerships and Change

Councillor Sarah Russell, Assistant City Mayor – Children, Young People and Schools

# **NHS Representatives**

John Adler, Chief Executive, University Hospitals of Leicester NHS Trust

Professor Azhar Farooqi, Co-Chair, Leicester City Clinical Commissioning Group

Sue Lock, Managing Director, Leicester City Clinical Commissioning Group

Dr Peter Miller, Chief Executive, Leicestershire Partnership NHS Trust

Dr Avi Prasad, Co-Chair, Leicester City Clinical Commissioning Group

Roz Lindridge, Locality Director Central NHS England – Midlands & East (Central England)

#### **City Council Officers**

Andy Keeling - Chief Operating Officer

Frances Craven - Strategic Director – Education and Children's Services

Stephen Forbes - Strategic Director - Adult Social Care.

Ruth Tennant - Director of Public Health

# **Local Healthwatch and Other Representatives**

Karen Chouhan, Chair, Healthwatch Leicester

Lord Willy Bach, Leicester, Leicestershire and Rutland Police and Crime Commissioner

Chief Superintendent, Andy Lee, Head of Local Policing Directorate, Leicestershire Police

Andrew Brodie, Assistant Chief Fire Officer, Leicestershire Fire and Rescue Service

# **Standing Invitees: (Not Board Members)**

Toby Sanders, Senior Responsible Officer, Better Care Together Programme Richard Henderson, Acting Chief Executive, East Midlands Ambulance Service NHS Trust

#### 75. TERMS OF REFERENCE

The Board's Terms of Reference approved by the Council on 11 May 2017 were noted.

#### 76. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

That the Minutes of the previous meeting of the Board held on 3 April 2017 be confirmed as a correct record.

# 77. LEICESTER CITY CHILDREN'S IMPROVEMENT PLAN 2016-18

The Strategic Director Education and Children's Services submitted a report on the Leicester City Children's Improvement Plan 2016-18. This iteration of the Improvement Plan was approved in draft form by the Leicester City Children's Improvement Board (LCCIB) in January 2017 and was last updated in March 2017. The Board were asked to consider the contents of the plan and any implications it had for Board members' organisation and to make any comments on aspects of the Plan.

The Strategic Director Education and Children's Services stated that the LCCIB had embarked upon a vigorous programme in response to the inspection findings in March 2015. Following a moderate start there had been a significant strengthening of the performance monitoring framework and improved delivery of data by partner agencies. The partnership had been essential to the vast improvements that had been made and had led to a number of new developments including the neglect strategy, refreshed guidance on injuries to non-mobile babies and engagement with young people

and front line staff.

The issues identified by the LCCIB were highlighted in the report and these 9 areas continued to be the focus for the next stage of development. The LCCIB had recently met and had signed off on all the recommendations from the previous Ofsted Report but there was still work to be done in relation to consistency and quality of practice. Whilst improvements had been made as a result of having robust plans in place for undertaking early health assessments for local children in care who were living in other areas of the country and for mental health care provision for children in care generally, further improvements were still required. As the role of LCCIB reduced around these areas and was replaced by an increasing role for the Leicester City Safeguarding Board's, it was important to ensure the governance roles between the two bodies were understood.

The Chair commented that it had been a long journey and she wished to echo the thanks to those involved in the partnership who have worked openly through some difficult circumstances. It was also important that when the authority moved out of 'Inadequate' it was important for these partnership relationships to be maintained because there would still be work to be done to achieve a 'Requires Improvement' rating which would still require a significant journey to deliver the consistency and quality of service to young people. The ultimate aim should be to work towards achieving a rating of 'Outstanding'.

#### AGREED:

- 1) That the report be received and partners in the LCCIB be thanked for working together to achieve the improvements to date.
- 2) That the acronyms used in Children's Services be appended to this and other reports in the future.

# 78. TIME TO CHANGE LEICESTER: CAMPAIGN 2017/18

The Director of Public Health submitted a report on the Time to Change Leicester: Campaign 2017/18. Time to Change was a national charity that worked to combat the stigma and discrimination faced by those who spoke about their experience of mental health problems. Officers had been working in conjunction with Time to Change to develop a programme specifically for Leicester based upon the national campaign; using their national resources and support.

It was noted that:-

- a) Although there was co-ordinating and steering group for the programme, the real driver for the initiative would need to come from the partnership of Board members.
- b) In effect, the Council would become a hub to enable the Time to Change resources to be channelled across the city in ways which were best suited

to local circumstances.

- c) A proposed local campaign had been produced to run from August 2017 to 2018 with the aims of:-
  - Changing the behaviour and attitude of the local population towards people with mental health problems.
  - Reduce the levels of reported mental health stigma and discrimination in the local area.
  - Empower people with experience of mental health problems to be at the heart of all agreed local activity.
- d) The first phase would be a Stop the Stigma campaign, working in partnership with the Council's communications unit to target different groups throughout the year with appropriate material for the particular group. These groups would be:-
  - Men and be would be launched in July.
  - Children and Young People (July-August) focusing in the Summer reading Challenge.
  - Schools and places of education including mothers through the September back to school period.
  - Working age adults with a focus on workplace stress, this would be an ongoing focus.
  - Higher education and student mental health in February to coincide with the university mental health awareness dates.
- e) The second part of the campaign would be the proposed community grants fund. This was intended to mirror the Time for Change national grant fund to support groups working to tackle stigma and attitudes in their communities. £50,000 had been allocated locally to this fund. Guidance was still being developed for applicants but there was no specific project types being stipulated. However, any projects must be able to demonstrate that they are able to work towards combating stigma and discrimination around speaking about mental health in their own areas of the community.
- f) The Steering Group comprised stakeholders, voluntary sector, local businesses, schools, Time to Change East Midlands and mental health partners, including champions' representatives. The Governance arrangements were fully outlined in the report.
- g) 7 businesses and organisations had already signed up to the programme and more were encouraged to take part. These businesses and organisations would be supported by the Steering Group and had representation upon it. The Resilience Service would also be involved.

In response to Members questions it was stated that:-

a) The pledge from partners was an important way forward as it was hoped that the partners would then encourage and influence other organisations they were involved with to become involved as well.

- b) The existing links with the Children's Trust and the Leicester Education Strategic Partnership would be used to engage with those groups who had already looked at mental health issues and would be able to provide immediate support.
- c) The £50,000 for the Community Grant Fund was funded through the current ring fenced public health budget.
- d) The Council was the first in the Country to enter into a partnership with Time to Change and, although it would not bring any additional funding, it would attract considerable resources, campaign materials and expertise in working with schools and businesses in the area of mental health.
- e) The criteria for the grant application currently being developed could be brought back to the Board if required. The timescales were short as it would be important to have projects completed and evaluated by the end of 2018.
- f) There was already a large amount of information available through Time for Change and it was important locally that the projects focused on stigma and were not simply a re-badging of existing projects. Significant progress was envisaged in the next few weeks.
- g) UHL's offer to become involved was welcomed and officers would contact UHL after the meeting to discuss the details of how the engagement could be taken forward. There was a general invitation being issued to communication units across all organisations to be involved in the launch in July and then to take it forward in their respective organisations.
- h) The launch would be in a variety of venues encompassing faith groups, health café type venues as well as pubs to reach as wide an audience as possible.
- i) A number of resources were being used to understand a baseline for current levels of stigma and attitudes to mental health. The resources of Time to Change would also be helpful in establishing the baseline.
- Whilst measuring outcomes were important, it was recognised that the emphasis for this programme should be primarily focused on bringing about change.

Healthwatch Leicester indicated that the Leicester Aging Together Partnership comprising 17 organisations, although working mainly with the over 50s, did undertake much work around mental health which could be useful to utilise in addition to their experience of engaging with men experiencing mental health issues.

The Fire and Rescue Service reported that they had a wide programme of

events with their workforce in relation to mental health issues. The Service would be happy to provide venues and role models to support the programme if this was helpful. There were also similar support arrangements for Police and Ambulance staff.

#### AGREED:

- 1) That the report be received and the initiative be supported.
- 2) It would be useful for the Board to some insight and be able to give a steer on the timescales and the criteria given the short lead in for projects to be implemented and completed by August 2018.
- 3) That partner organisations encourage their communications representatives to attend the launch in July.
- 4) That partner organisations who were not already represented upon the Steering Group be encouraged to send an appropriate representative to future Steering Group meetings.

#### 79. HEALTH AND WELLBEING STRATEGY ENGAGEMENT SESSIONS

The Director of Public Health reminded members of the numerous events that were being organised to refine the Health and Wellbeing Strategy. There were four events in the next month and there had been a good response to attend them from Board Members and their organisations. The first one later in the week was looking at the Healthy Lives strand in the strategy and would be challenging how we invest in diet, obesity, smoking and diabetes to bring about lifestyle changes. The events would be attended by voluntary sector and community groups and key stakeholders in the City to get a broad view of opinions. Other sessions would be held on Healthy Children, Healthy Places and Healthy Minds. Feedback on these sessions would be brought back to the next Board meeting.

### 80. QUESTIONS FROM MEMBERS OF THE PUBLIC

There were no questions from Members of the public.

#### 81. DATES OF FUTURE MEETINGS

Members noted that future meetings of the Board would be held on the following dates:-

Thursday 17th August 2017 – 4.00pm Monday 9th October 2017 – 3.00pm Thursday 7th December 2017 – 10.30am Monday 5th February 2018 – 3.00pm Monday 9th April 2018 – 2.00pm

Meetings of the Board were scheduled to be held in Meeting Room G01 at City

Hall unless stated otherwise on the agenda for the meeting.

# 82. ANY OTHER URGENT BUSINESS

There we no items of Any Other Urgent Business.

# 83. CLOSE OF MEETING

The Chair declared the meeting closed at 2.47 pm.