

HEALTH AND WELLBEING BOARD

WEDNESDAY, 25TH MARCH, 2015

PRESENT: Councillor A Ogilvie in the Chair

Councillors J Blake, N Buckley and
S Golton

Representatives of the Clinical Commissioning Groups

Dr Andrew Harris – Leeds South and East CCG

Dr Gordon Sinclair – Leeds West CCG

Phil Corrigan – Leeds West CCG

Directors of Leeds City Council

Dr Ian Cameron – Director of Public Health

Nigel Richardson – Director of Children's Services

Representative of NHS (England)

Moirá Dúmma – NHS England

Third Sector Representative

Susie Brown – Zest – Health for Life

Representative of Local Health Watch Organisation

Linn Phipps – Healthwatch Leeds

Tanya Matilainen – Healthwatch Leeds

Representatives of NHS Providers

Chris Butler – Leeds and York Partnership NHS Foundation Trust

Bryan Machin – Leeds Community Healthcare NHS Trust

59 Election of the Chair

The Chief Officer, Health Partnerships, advised the Board of the Chairs apologies.

In the absence of Councillor Mulherin, the Clerk reported that Councillor Ogilvie had offered to Chair the meeting and sought the Boards' approval.

RESOLVED – That Councillor Ogilvie be appointed Chair of the meeting

60 Appeals against refusal of inspection of documents

There were no appeals against the refusal of inspection of documents

61 Exempt Information - Possible Exclusion of the Press and Public

The agenda contained no exempt information

62 Late Items

No formal late items of business were added to the agenda, however Board Members were in receipt of a supplementary pack containing a revised version of the March 2015 "Delivering the Strategy" document (minute 75 refers)

63 Declarations of Disclosable Pecuniary Interests

No declarations of disclosable pecuniary interest were made

64 Apologies for Absence

Apologies for absence were received from Councillor Mulherin, Jason Broch (Leeds North CCG), Nigel Gray (Leeds North CCG), Matt Ward (Leeds Couth & East CCG), Dennis Holmes (LCC Adult Social Care), Julian Hartley (Leeds Teaching Hospitals NHS Trust) and Thea Stein (Leeds Community Healthcare NHS Trust)

65 Open Forum

No matters were raised by the public on this occasion

66 Minutes

RESOLVED – That the minutes of the previous meeting held on 4th February 2015 be agreed as a correct record

67 The 3 Leeds CCGs' 2-year operational plans - refresh

The Clinical Commissioning Planning Leads submitted a report providing an overview of clinical commissioning in Leeds, highlighting where the CCGs had already worked with many stakeholders, including the Health and Wellbeing Board, to agree existing CCG plans and providing assurance that this engagement process would be maintained as broader plans are refreshed and updated in the light of progress to date.

Liane Langdon (Leeds North CCG) and Sarah Lovell (Leeds South & East CCG) attended the meeting to present the report and provided assurance that CCG plans remained consistent with the overarching Joint Health & Wellbeing Strategy for the area.

During discussions, the following issues were highlighted:

- The findings in respect of “life lost” due to ill health and that the incidents of accident had begun to appear as an emerging factor
- Local confidence and resilience, the ability to provide the skills in Leeds to support Leeds residents and economy
- Role of Transformation Board in skills development/mapping/ retention
- Mental health as a priority, the choices available for the patient and appropriate implementation of the choice system
- The possibility that the work should involve other organisations not within the health and wellbeing field (i.e. highways services during discussions on accident prevention). It was agreed that this could be reviewed when the overarching JHWS was refreshed

In considering the role of the HWB the following matters were noted for consideration:

- To review changing patient health trends
- To review the underlying causes of potential “life lost” years

RESOLVED –

- a) That the comments made during discussions on the implications of new and amended aspects of the planning guidance and the proposed responses be noted
- b) Having considered the planned responses, agree that the responses do give due regard to the Joint Health and Wellbeing Strategy
- c) Having considered how the Health and Wellbeing Board may be involved in the further development of New Models of Care, the following be noted:
 - To review changing patient health trends
 - To review the underlying causes of potential “life lost” years

68 Update on the position of the primary care co-commissioning in Leeds

Further to minute 56 of the meeting held 4th February 2015, the Board received an update report from the Chief Officer, Leeds North Clinical Commissioning Group.

A combined, non-binding expression of interest had been submitted to the NHS England Yorkshire and Humber Area Team (NHSE) for the co-commissioning of primary care from April 2015 by the 3 Leeds CCGs with NHS England.

Gordon Sinclair (Leeds West CCG) presented the report which set out the consideration given to the proposed approaches to co-commissioning in relation to General Practice in the first instance. Following release of a further NHS England Policy document, the CCGs had determined that a Level 1 submission would be most appropriate for Leeds. The presentation highlighted key areas for consideration in terms of governance; design and implementation; performance management; and recognised possible conflicts of interest as CCGs would be tasked with commissioning General Practice services. The HWB noted that the new way of working would present a shift of budgets from hospital care to General Practice and the need to support General Practice to ensure service delivery.

In discussions, the Board welcomed the work undertaken and commented as follows:

- The need to better understand the implications of Level 3 full delegation for the future
- Whether existing CCG structure/models remained appropriate for the proposed new way of working
- The need to ensure that services developed having regard to council service models

In conclusion the Board received assurance that public involvement in the Level 1 model would be retained through the existing public engagement structures operated by the Leeds CCGs.

RESOLVED -

- a) To note the comments made during discussions on the work done to develop primary care co-commissioning in Leeds, and the opportunities and risks outlined in this paper
- b) That the issues discussed be identified as fulfilling the HWBB objective to help the development of primary care in Leeds, and how members of the HWBB can positively influence this agenda.
- c) To note the continued consultation and the desire for greater public involvement in this development, and on local opportunities to engage (e.g. Member Health Champions)

69 Personalisation and Personal Budgeting across Health and Social Care in Leeds

The Board received a joint report of the Director of Adult Social Care, Leeds City Council, and the Chief Operating Officer, Leeds South and East NHS Clinical Commissioning Group. The report provided the background to the introduction of the national policy and strategy around personalisation and personal health budgets; and the current position and activity across health and social care in Leeds.

Sue Kendall (Leeds South East CCG), Paul Bollom and Peter Roderick (Leeds City Council) presented the report highlighting the request for the Board to consider what steps could be taken to initiate transformative change in the way that personalised care and personal budgets are delivered and coordinated in the city and how the voice of the service user is involved at all levels in the strategy and delivery of personalised care.

In discussions, the Board considered the following:

- The current take up of the personalisation budgets by existing service users
- Resource implications
- How to evaluate the success of the scheme and the need to recognise individual needs, creative schemes and outcomes in any future monitoring
- The co-ordination of the scheme across the city's service providers
- Modelling of future service provision and how that is supported by the CCGs
- The need to develop the local market place and conditions to encourage take-up; the necessary skilled workforce and to develop brokerage to support individuals seeking to utilise personalisation for their needs
- The need to evaluate the likely step change consequences for partner organisations, staff and service users and supported the suggestion to undertake a pilot project to facilitate a modelling exercise to enable partners to better understand and support service users seeking to utilise the scheme to meet their needs.

RESOLVED

- a) To note the outputs of the Health and Wellbeing Board workshop on personalisation, and the ongoing work in the city to improve care by giving people more choice and control
- b) That having noted the recommendations set out in the report at b) seeking Identification of specific areas of this work the Board has a high level of ambition to progress as part of delivering the Joint Health and Wellbeing Strategy, including giving an opinion on numbers or proportions of people the Board wishes to be in receipt of truly personalised care and over what timescale would they care to seek to achieve it and c) make recommendations on how this work can be coordinated across the city and consider how this coordination could be organised and resourced, the Board agreed to request the development of a strategic group to determine:
 - i. the impact of increased personalisation on future service provision (activity /financial)
 - ii. A review of the "step change" required within care provider organisations to support the personalisation of care packages

70 Joined Up Leeds

The Board considered the joint report of the Chief Officer Health Partnerships and Chair Leeds Informatics Board providing an update of the outcome of the city wide discussions held between the public sector and Leeds citizens on the issue of health and social care data sharing.

Fiona Fylan (Brainbox Research) and Rebecca Nichells (Leeds Care Record) attended the meeting highlighting the need to understand the publics' views about the concept, benefits and perceived risks of sharing information in order to create an information sharing network.

During the presentation which highlighted the overwhelming support of the consultees for information sharing for the use of the public good, the following matters were discussed:

- the rise of social network use, and subsequent change in public perception of information sharing, security and storage
- The consultees' acknowledgement of the impact of not sharing information between service providers
- Analysis of the views by age range and experience

RESOLVED

- a) To note the full set of results from the Joined Up Leeds research on citizens' views on information sharing, and in particular, the section on what would reassure citizens about how their information is used
- b) To continue to promote the individual data-sharing initiatives in the city, as there is clear support from citizens for using information to better plan services and deliver more seamless health and social care.
- c) To support any future initiatives to enable citizens to take a greater role in owning their health and social records.
- d) To encourage further conversations and engagement in the city about the concept of information sharing. Joined Up Leeds should be seen as

the start of exploring how sharing information could help to improve health and wellbeing for citizens within Leeds.

- e) To request that the findings of the report and any further engagement initiatives are used to create and deliver a data sharing framework for the city

71 Communicating and Engaging on Health and Wellbeing in Leeds

The Board received the report of the city wide communications and engagement group which provided an update on progress made against the existing HWB Communications and Engagement Framework.

Phil Jewitt, LCC Communications Manager presented the report which outlined the intention to review and revise the framework and better coordinate the wider health and wellbeing communications network and activity and form closer working with other boards, in particular the Transformation Board.

The report also included an overview of examples of recent work and a response to the Full Council resolution of 12th November 2014.

Discussions outlined the Boards objective for raising awareness of the role of the HWB and how key messages could be released through social media to promote wider public engagement with health and social care issues

RESOLVED -

- a) That the progress made in implementing the existing communications and engagement framework, in light of the examples provided in Appendix 1 of the report, be noted
- b) That approval be given to the revision of the framework to reflect upcoming changes in the JHWS and Joint Strategic Needs Assessment (JSNA) and the Transformation Board programme of work. Additionally, the comments made in respect of how information is shared about the work of the HWB and how Leeds residents access information through social media were noted for consideration during the framework review
- c) To note the opportunity for more regular updates to assure progress and provide early awareness of upcoming engagement opportunities to ensure the Boards' full involvement.
- d) That support be given to the use of 'Inspiring change' communications material where people can expect to be invited to have their say on transformational service changes.
- e) That the above proposals be agreed as an appropriate response to the Full Council resolution of 12th November 2014

72 Understanding the Financial Position and Challenge across Health and Social Care in Leeds

The Board discussed the joint report of the Interim Director of Adult Social Care, Leeds City Council and Chief Operating Officer, Leeds South & East Clinical Commissioning Group. The report provided an overview of the financial context and challenges facing the Leeds health and social care economy; and the financially sustainable measures being put in place to transform the system for the benefit of citizens.

Ann Hill, (LCC Financial Management Adult Social Care), and Mark Bradley (Leeds South & East CCG) presented the report. Discussions highlighted the following issues:

- Recognition that the financial challenges presented an opportunity to review the pace of transformation but also placed pressure on the partnerships now established between service providers. Additionally, the Board noted a comment in respect of seeking to ensure that resources were spent on services provided by local firms, thus securing local skills, knowledge and employment
- The role of the Transformation Board in assessing Leeds progress against the level of ambition expressed in the 5 Year Forward Plan and the New Models of Care; and in respect of considering how General Practice will work with the Integrated Health and Social care Teams
- Acknowledgement that initiatives such as the preventative agenda; patients' self-management; and co-production could offer solutions to the financial challenges ahead
- The role of the HWB in reviewing the services delivered by partner organisations
- Recognition that, at some point, frank discussions would be required with the public over future health care priorities and expectations. The Board noted the balance between the Best Start Plan on a Page 0-2 years priority against provision of care for the increasing aged population
- Projected benefits of the Best Start Plan to be mapped out at 5, 10 and 15 year intervals to evidence the benefits and inform future care funding. Noted intention to prepare a cost benefit analysis of the Best Start Plan
- "targeted prevention" also regarded as key with a focus on those groups that services could have an early impact on.

RESOLVED –

- a) That the contents of the report be noted and in particular:
 - i. The scale of the financial challenge facing the Leeds' health and social care economy
 - ii. The approach being taken by partners individually and collectively across the health and social care system to address this financial challenge
- b) To agree to receive a further paper in the autumn when many issues will be clearer

73 Approval of the Leeds Pharmaceutical Needs Assessment 2015

Further to minute 54 of the meeting held 4th February 2015, when the Board received a draft of the Leeds Pharmaceutical Needs Assessment 2015-2018

(PNA) for discussion, the Director of Public Health submitted the final Leeds PNA for the Board's approval for publication by 1st April 2015.

The report provided assurance that the regulatory requirements had been followed in producing the Leeds PNA, including stakeholder engagement, identification of health need, mapping provision of services, identification of potential service gaps and a 60 day formal consultation period

RESOLVED - That the Leeds Pharmaceutical Needs Assessment 2015 - 2018 be approved, in line with regulatory timescales.

74 2014/15 Section 256 in respect of Health Funding for Leeds City Council to invest in services to benefit health and overall health gain

The Acting Director of Adult Social Care, Leeds City Council submitted a report seeking approval of the Section 256 Grant agreement 2014/15 - for Funding for Leeds City Council to invest in services to benefit health and overall health gain. A copy of the proposed agreement was appended to the report as appendix A.

RESOLVED - That approval be given to the Section 256 Grant agreement for funding for Leeds City Council to invest in services to benefit health and overall health gain: 2014/15, as attached as Appendix A of the submitted report

75 For Information - Delivering the Joint Health and Wellbeing Strategy - Update Report

The Board received a copy of the March 2015 "Delivering the Strategy" document; a bi-monthly report which gives the Board the opportunity to monitor the progress of the Joint Health and Wellbeing Strategy 2013-15

RESOLVED – To note receipt of the March 2015 "Delivering the Strategy" Joint Health and Wellbeing Strategy monitoring report

76 For Information - Leeds Autism Self-Assessment Framework

The Board received a copy of the Leeds submission for the 2014 autism self-assessment for information

RESOLVED –

- a) To note the ongoing partnership work aiming to bring about the goals of the Leeds autism strategy.
- b) That having read the 2014 autism self-assessment form submission, the contents be approved
- c) To note how better meeting the needs of people on the autistic spectrum (and other vulnerable groups) can contribute to achieving the outcomes of the Health and Wellbeing Strategy.

77 Any Other Business

Safeguarding Children – Nigel Richardson, Director LCC Childrens Services, reported receipt of a joint letter from Department of Health; Ministry of Justice and Department for Communities & Local Government emphasising their joint commitment to information sharing in respect of the protection of children and encouraging relevant service providers to do the same. The Board received assurance that the practice of information sharing was well established in Leeds and that the Leeds Safeguarding Children Board would retain oversight

of the progress of the letter through the various statutory bodies, agencies and service providers. The intention to present a report back in due course was noted

78 Date and time of Next Meeting

RESOLVED – To note the date and time of the next meeting as Wednesday 10th June 2015 at 10.00 am