

## **HEALTH AND WELLBEING BOARD**

**THURSDAY, 16TH SEPTEMBER, 2021**

**PRESENT:** Councillor F Venner in the Chair

Councillors S Arif, Close, Eaton, S Golton,  
M Harland, N Harrington, Hartley, Ryley  
and Stein

### **Representatives of Clinical Commissioning Group**

Tim Ryley – Chief Executive of NHS Leeds Clinical Commissioning Group

### **Directors of Leeds City Council**

Victoria Eaton – Director of Public Health

Chris Dickinson – Head of Commissioning, Children and Families

### **Third Sector Representative**

Pat McGeever – Health for All

Darren De Souza - Touchstone

Pip Goff – Forum Central

### **Representative of Local Health Watch Organisation**

Hannah Davies – Chief Executive of Healthwatch Leeds

### **Representatives of NHS providers**

Cathy Woffendin - Leeds and York Partnership NHS Foundation Trust

Julian Hartley - Leeds Teaching Hospitals NHS Trust

Thea Stein - Leeds Community Healthcare NHS Trust

### **Representative of Safer Leeds**

Supt. Richard Close – West Yorkshire Police

Jane Maxwell – Area Leader, Communities, Leeds City Council

### **Representative of Leeds GP Confederation**

Gaynor Connor – Leeds GP Confederation

## **1 Welcome and introductions**

The Chair welcomed all present and brief introductions were made.

## **2 Appeals against refusal of inspection of documents**

There were no appeals.

## **3 Exempt Information - Possible Exclusion of the Press and Public**

There were no appeals.

#### 4 **Late Items**

There were no late items.

#### 5 **Declaration of Interests**

There were no declarations of disclosable pecuniary interests or other interests.

#### 6 **Apologies for Absence**

Apologies for absence were received from Dr John Beal, Anthony Kealy, Jason Broch, Cath Roff, Sal Tariq, Jim Barwick, Sara Munro and Dr Alistair Walling. Chris Dickinson, Gaynor Connor and Cathy Woffendin were in attendance as substitutes.

#### 7 **Open Forum**

There were no matters raised on this occasion.

#### 8 **Minutes**

**RESOLVED** – That the minutes of the meeting held 29<sup>th</sup> April 2021 be approved as an accurate record.

#### 9 **Joint Strategic Assessment 2021 - Draft Summary Report**

The Head of Intelligence and Policy (Leeds City Council) submitted a report that sets out progress in producing the 2021 Joint Strategic (Needs) Assessment (JSA). The production of a JSA on a three-yearly cycle is a joint responsibility between Leeds City Council and the NHS Leeds CCG to inform the Health and Wellbeing Strategy. Specifically, the JSA aims to shape priorities, inform commissioners, and guide the use of resources as part of the commissioning strategies and plans for the city, by understanding the core drivers of health and wellbeing.

Mike Eakins, Intelligence and Policy Officer at Leeds City Council provided an overview of the analysis set out within the report, the key findings and policy implications. It was also confirmed that the JSA would become a 'real-time' database of information, in recognition of the constantly evolving health and care system.

Members discussed a number of matters, including:

- *Identifying successful approaches.* Members sought more information about the findings relating to successful action taken to narrow the gap. Members noted the benefits of licensing policy, with selective licensing schemes providing further opportunities to identify needs through the selective licensing scheme in some of the most deprived areas in the city.

- *Wider determinants of health.* Members noted that wider determinants of health will have the greatest effect on the key challenges identified within the JSA in the long term, and therefore require commitment from all health partners across the city as Team Leeds through commissioning and multiagency response to issues such as housing. The Chair requested that an item to consider the quality of provision of housing across the city be scheduled for a future meeting.
- *The role of the Board moving forward.* Members noted that the assessment provides an extensive evidence base, and that the subsequent strategies and action plans will be presented to the Board at a later stage. Members also suggested introducing a number of bold ambitions to future plans, such as to reduce the rate of long-term conditions in the city, and noted that upcoming plans and strategies must align with existing work streams and strategies across the health and care system.

**RESOLVED** – That the contents of the report, along with Members’ comments, be noted.

## **10 How health and care organisations are working together in Leeds to tackle health inequalities**

The Leeds Tackling Health Inequalities Group submitted a report that proposes that the Health and Wellbeing Board holds the health and care system to account in making changes to tackle health inequalities and requires organisations to publicly say what has happened and what more is to be done.

Hannah Davies, Chief Executive of HealthWatch Leeds, introduced the report and presented the health inequalities toolkit developed for health partners to support decision making, along with three commitments for the Board to sign up to:

- 1) To hardwire a focus on the role of health and care in addressing health inequalities, as the future Place Based Partnership’s (PBP – working title) overriding purpose, and through our organisations, Population Boards, Care delivery and Service delivery group, and wider partnerships, requiring them to publicly say what has happened and what more is to be done.
- 2) To lead the culture shift that is required throughout organisations (at all levels) and commit to going further and faster than nationally mandated activity to tackle health inequalities, using the Tackling Health Inequalities Toolkit as a foundation to support our partnership’s individual and collective efforts.
- 3) To consistently establish robust and regular peer to peer support / challenge, including working with the Communities of Interest Network and Allies, to share commonalities and hold each other to account.

**RESOLVED** –

- a) That the contents of the report, along with Members' comments, be noted.
- b) That the Boards commitment to the three recommendations set out above be noted.

## **11 Digital Exclusion**

The People's Voices Group submitted a report that reflects on recommendations made a year ago by the People's Voices Group and views of health and care providers about how they have addressed this key inequalities and access issue.

Hannah Davies, Chief Executive of HealthWatch Leeds, introduced the report and provided an update on the progress against the recommendations one year on from the original Health Inequalities report. Anna Chippindale, HealthWatch Leeds, presented the key themes from service user feedback for digital inclusion within the last 6 months.

Members provided updates on the action taken to progress the recommendations and the challenges faced within their organisations, including:

- Members recognised that digital innovation requires buy in from the entire organisation – from leadership to frontline care providers and service users.
- Leeds Community Healthcare (LCH) have introduced as part of initial assessment a question - 'how would you like me to work with you?' – so that service users can request digital contact, face-to-face, or a combination of the two.
- All health partners had introduced training schemes for service users in the community. It was suggested that digital skills sessions could also be delivered within a health care settings or pharmacies.
- Members noted the additional barrier and training need for people with English as an additional language.
- During pandemic, Leeds and York Partnership Foundation Trust (LYPFT) delivered handheld devices to service users within mental health hospitals to ensure that they maintained contact with friends and families. Community Committees also allocated funding to provide equipment to vulnerable families.

### **RESOLVED –**

- a) That the contents of the report, along with Members' comments, be noted.
- b) That Members link with their Communities of interest ally in preparation for this item to understand how digital exclusion is currently impacting on the communities they work with.

## **12 Leeds BCF End of Year 2020/21 Template and iBCF Update**

The Chief Officer, Resources & Strategy, Adults & Health (Leeds City Council) and the Head of Planning & Performance (NHS Leeds CCG) submitted a report that sought sign off from the Health and Wellbeing Board of the End of Year 2020/21 Template.

**RESOLVED** – That the Board agreed to sign off the Leeds BCF End of Year 2020/21 Template attached as Appendix 1 and noted the benefits and outcomes of the additional iBCF funding.

**13 For information: Connecting the wider partnership work of the Leeds Health and Wellbeing Board**

The Board received, for information, the report of the Chief Officer, Health Partnerships, that provides a public account of recent activity from workshops and wider system meetings, convened by the Leeds Health and Wellbeing Board (HWB). It contains an overview of key pieces of work directed by the HWB and led by partners across the Leeds health and care system.

**RESOLVED** – That receipt of the report be noted.

**14 For information: Leeds Routine Enquiry: GPs and Health Practitioners in 8 GP Practices in Leeds- Evaluation Report 2019**

The Board received, for information, the report of the Safer Leeds Safeguarding & Domestic Violence Team, that report that explores data on the short term impact for victims where GPs and Health Practitioners, who have access to a specialist worker, have proactively screened female patients over the age of 16 for Domestic Violence and Abuse (DV&A).

**RESOLVED** – That receipt of the report be noted.

**15 For information: Putting people at the heart of decision-making - update on progress in planning the Big Leeds Chat 2021**

The Board received, for information, the report of the People's Voice Group that outlines the plans for Big Leeds Chat 2021.

**RESOLVED** – That receipt of the report be noted.

**16 Date and Time of Next Meeting**

The next meeting will be held Wednesday 8th December 2021 at 2.00 p.m.

(Pre-meet for Board Members at 1:30 p.m.)

**17 Any Other Business**

The Chief Officer and the Chair thanked Holly Dannhauser for her support over the years to the Board and the broader work of the Health Partnerships team, and wished her luck in her future ventures.

