

HEALTH AND WELLBEING BOARD

WEDNESDAY, 4TH FEBRUARY, 2015

PRESENT: Councillor L Mulherin in the Chair

Councillors J Blake, N Buckley, S Golton,
and A Ogilvie

Representatives of the Clinical Commissioning Groups

Dr Jason Broch – Leeds North CCG
Dr Andrew Harris – Leeds South and East CCG
Dr Gordon Sinclair – Leeds West CCG
Nigel Gray – Leeds North CCG
Matt Ward – Leeds South and East CCG

Directors of Leeds City Council

Dr Ian Cameron – Director of Public Health
Dennis Holmes – Deputy Director of Adult Social Services
Sue Rumbold – Chief Officer, Children’s Services

Representative of NHS (England)

Moira Dumma – NHS England

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
Julian Hartley – Leeds teaching Hospitals NHS Trust
Thea Stein – Leeds Community Healthcare NHS Trust

41 Appeals against refusal of inspection of documents

There were no appeals against the refusal of inspection of documents

42 Exempt Information - Possible Exclusion of the Press and Public

The agenda contained no exempt information

43 Late Items

With the agreement of the Chair and the Health and Wellbeing Board, one formal late item of business was added to the agenda entitled “NHS England ‘New Models of Care’ Programme”. This matter required urgent consideration as the closing date for submissions of expressions of interest in the development of a new model of care was stated as being 9th February 2015. (minute 56 refers)

Additionally, the Board was in receipt of a supplementary pack containing Appendix 1 to agenda item 9 “City Wide Planning Co-ordination” (minute 51 refers)

44 Declarations of Disclosable Pecuniary Interests

No declarations of disclosable pecuniary interest were made

45 Apologies for Absence

Apologies for absence were received from Susie Brown (Zest); Phil Corrigan (Leeds West CCG) and Nigel Richardson (LCC Childrens Services)

46 Open Forum

No matters were raised by the public on this occasion

47 Chairs Remarks

Noting receipt of apologies from Nigel Richardson, the Chair reported that LCC Childrens Services was currently undergoing an Ofsted inspection. Councillor Mulherin also reported on the following areas of interest for the Board

- Noted the publication of the 5 Year Forward Plan
- “One Year On” Celebration of Leeds as an Integration Pioneer
- Noted a successful workshop on Personal Budgets
- Funding settlements for both Local Authority’s and local NHS Trusts had been announced, with a report anticipated for the March Health and Wellbeing Board on the implications of the settlement

48 Minutes of the previous meeting

RESOLVED – That the minutes of the previous meeting held 22nd October 2014 be agreed as a correct record

49 Matters Arising

Minute 38 – Proposed Congenital Heart Disease Standards and Service Specifications consultation – the Chair confirmed that a response had been submitted to the consultation and circulated to Board members previously

50 Leeds Mental Health Framework

The Board considered the report of the Chief Officer, Leeds North National Health Service Clinical Commissioning Group (NHS CCG) on the development of the Leeds Mental Health Framework 2014-2017 and set out the ambitions of the Mental Health Partnership Board.

Dr Manjit Purewal, Leeds North Clinical Commissioning Group addressed the meeting, providing a General Practice perspective of the issues. Jane Williams provided the Board with an overview of the background, aims and priorities of the Framework and the consultation already undertaken.

The Board welcomed the development of the Framework and in discussions, considered the following issues:

- The current and long term impact of a 24/7 work culture on the workforce
- More emphasis to be given to the needs of young people throughout the Framework, noting the current restructure of children’s mental health services

- The governance model and performance measurement
- Relevant indicators to be used to provide the Board with the assurances it sought
- The need to recognise the role of the Third Sector in mental health services

Discussions on the role of the Board in supporting the Framework considered those actions the Board could take, including:

- to challenge the performance monitoring
- to identify and tackle non consistency
- encourage wider participation to support the implementation of the Framework

The Board noted the following requests for action

- Further detail on the co-production intentions
- A report back on the outcome

RESOLVED-

- a) To note the contents of the Mental Health Framework and the work of the Mental Health Partnership Board
- b) To note the contents of the discussions on the role of the Health and Wellbeing Board in further progressing the principles of parity of esteem between mental and physical health; and delivery of the Mental Health Framework.

51 Citywide planning co-ordination

The Clinical Accountable Officer, Leeds South & East Clinical Commissioning Group, presented a report providing an update on the work of the City Wide Planning Co-ordination Group for health and social care services - which had been established to review service changes and monitor the progress of the transformation of those services.

During discussions, the following issues were highlighted:

- The need to ensure the work of the Transformation Board connects to frontline provision
- The consultation exercise undertaken by the Group had given providers the opportunity to identify and recognise other providers/partners work – this had aided the mapping exercise
- The need to publicise events and news as they occur
- The Group's remit should include identification of those services which are not delivering and give consideration to how the new priorities can be applied to existing work streams
- To recognise that the 5 year view and solutions to economic challenge will be establishment of new ways of working and the integration of services
- Would welcome the development of communications and engagement on this work, including a mapping exercise

The Board discussed its own role, including:

- lending weight to overarching goals and drive to specific actions – such as service providers’ approach to patient experience
- providing voice and influence on behalf of communities
- to concentrate on and simplify key priorities in order to promote and clearly communicate them to health and wellbeing and social care providers and staff
- To consider the role and economic modelling of the Transformation Board, mindful of the economic challenges faced

RESOLVED

- a) To note the contents of the report and the outputs of the group’s work so far (as detailed in appendix 1).
- b) That, having considered how this supports the 5 Year Forward View, and whether other / additional work is required, the following matters be highlighted as matters to pursue:
 - A further report be presented in the 2015/16 Municipal Year considering the role and economic modelling of the Transformation Board, mindful of the economic challenges faced
 - Within this, to clarify the Top 3 priorities for the Health and Wellbeing Board to actively support
 - The development of communications and engagement in order to simplify communications
- c) To note the contents of the discussion on the timelines and extensive work being done across the provider and commissioner landscape in health and care, particularly the following information which could be included within the Planning document:

52 Children and Young People's Plan 2015-19

The Board received the report of the Director of Children’s Services on the Children and Young Peoples Plan 2015-19. The report highlighted the initial list of Challenges for the new Plan, and that consultation already undertaken with partners had highlighted the need to give greater emphasis to shared priorities for improving emotional and mental health outcomes for children, young people and their families

Sue Rumbold, Chief Officer (Partnership, Development and Business Support) Childrens Services presented the report which sought consideration of the current priorities contained within the Children and Young Peoples Plan and emphasised the Board’s role as a key partner in the delivery of the Plan.

The number of outcomes, priorities and strategies that were common to both the Plan and the Joint Health and Wellbeing Strategy were noted and the Board highlighted the following:

- Recognised the challenge that transition can present for some children and young people
- The need to emphasise the “role of families”, young people’s mental health and the Best Start Plan throughout the Plan
- Noted the inclusion of performance indicators within the Plan and the intention to strengthen outcomes

RESOLVED

- a) To note the content of the Children and Young Peoples Plan and the process of discussion and engagement that has taken place
- b) To endorse the strategic Plan and to support the development of a detailed implementation plan
- c) That the comments made during consideration of how the Board would like to monitor progress on implementation be noted for action

53 Best Start Plan on a Page

The Leeds Best Start Strategy Group submitted a report on the Leeds Best Start Plan setting out a broad preventative programme from conception to age 2 years which aimed to ensure a good start for every baby, with early identification and targeted support for vulnerable families early in the life of the child. The Plan had been developed in partnership and with parent engagement and was presented as the basis for discussion on the proposed priorities and indicators. The Boards endorsement of the Plan and support for development of a detailed implementation plan were sought

Sharon Yellin, Consultant, Children and Families Public Health Team, presented the report and discussions highlighted the following matters:

- Linking this Plan to existing service models would support efficient resource prioritisation
- the need to map existing provision
- The scope for the Board to influence strategic investment and to translate the Plan to the various levels of service and workforce development
- The balance between planning/resourcing for the future and addressing immediate priorities
- Noting the financial challenge ahead, the Board highlighted the need to undertake a cost benefit analysis of where early interventions had made a long term difference, in order to establish a business case for this approach. If investment into the Best Start Plan was to be supported, then relevant empirical data would be required. The Board noted that the developing Leeds dashboard would utilise relevant national and specific local indicators. Members noted the comment that that compelling evidence was required to present to the Clinical Commissioning Groups in order to inform their view of commissioning and realign expenditure to the priority

The Board noted the request to consider how it will support, measure outcomes and promote co-production as suggested in the report and was keen to consider the joint priorities between the Health and wellbeing Board and the Best Start Plan in order to better consider implementation, scale and investment

In conclusion, the Board noted a joint Working Group of both the Children and Families and the Health and Wellbeing and Adult Social Care Scrutiny Boards had considered the Plan, lending their support to the document

RESOLVED

- a) To note the contents of the Leeds Best Start Plan and the process of discussion and engagement which has already taken place
- b) To endorse the strategic Leeds Best Start Plan and lend support to the development of a detailed implementation plan
- c) That a further setting out the specifics of how the Board may continue to monitor the implementation of the plan be requested for ongoing consideration by the Health and Wellbeing Board

54 Leeds Pharmaceutical Needs Assessment 2015 DRAFT version

The Board received the report of the Director of Public Health presenting the draft Leeds Pharmaceutical Needs Assessment 2015 for the consideration as part of the formal consultation process. It was noted that a further report, including an evaluation of the consultation, would be presented to the March Board meeting.

The Board briefly considered:

- Whether any gaps in pharmacy provision had been identified through the “talking point” consultation
- The determining factors for the location of pharmacy provision
- That pharmacy outlets would be relied upon for provision of other, related, services in the future

RESOLVED -

- a) To note the progress of the Pharmaceutical Needs Assessment in line with regulatory requirements
- b) That the comments made during discussions on the draft Pharmaceutical Needs Assessment be noted as feedback into the formal consultation process
- c) To note the intention for the final Pharmaceutical Needs Assessment document to be presented to the Health and Wellbeing Board on 25th March 2015 for final sign-off.

55 For Information - Delivering the Joint Health and Wellbeing Strategy: update report

The Board received a copy of the February 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 February 2015 “Delivering the Strategy” Joint Health and Wellbeing Strategy monitoring report

56 Late Item - NHS England 'New Models of Care' programme

At the request of the Chair, the Chief Officer (Health Partnerships) submitted a late item entitled “NHS England “New Models of Care” programme for consideration of the extent of Leeds’ involvement in the proposals, which form part of the NHS England Five Year Forward view published in October 2014. The report was submitted as late item of business as the deadline for receipt of expressions of interest was stated as being 9th February 2015.

The report outlined the intention for locally-determined new models of care to be encouraged and included the guidance for this programme (‘Forward view into Action’) and an Expression of Interest form as appendices to the report.

Dr Andrew Harris, Leeds South and East Clinical Commissioning Group, presented the report on behalf of the three Leeds Clinical Commissioning Groups who had drafted a Leeds submission. The draft bid would be discussed at the Clinical Commissioning Groups Leaders Board on 5 February 2015 prior to submission.

The Board requested a copy of the draft bid to comment upon, in order for the bid to reflect a joined up Leeds approach and commented on the following issues:

- The submission process gave the City the opportunity to draw up a plan for future models of care
- A future “model of care” plan would be a useful tool for the city, regardless of whether the Leeds bid was successful
- The process would promote discussions on resource priorities and service delivery

RESOLVED - To note the contents of the discussions on the NHS England “New Models of Care” programme, and having considered the extent and details of any potential Leeds involvement in it, agree that, in order for the bid to reflect a joined up Leeds approach, a copy of the draft bid be supplied to members of the Board to comment on. Comments to be submitted to Dr Harris

57 Any Other Business

Linn Phipps, Healthwatch Leeds, reported on the open consultation “Investing in Specialised Services”. The Chair agreed that information on this, and the “Joined Up Leeds” consultation would be sent to all Board members

58 Date and Time of Next Meeting

RESOLVED – To note the date and time of the next meeting as Wednesday 25th March 2015, to be held in Room 412, Rosebowl, Leeds Beckett University