

HEALTH AND WELLBEING BOARD

WEDNESDAY, 11TH DECEMBER, 2019

PRESENT: Councillor F Venner in the Chair

Councillors S Arif and A Smart

Representatives of Clinical Commissioning Group

Dr Gordon Sinclair – Chair of NHS Leeds Clinical Commissioning Group
Sabrina Armstrong - Director of Organisational Effectiveness, NHS Leeds CCG

Directors of Leeds City Council

Dr Ian Cameron – Deputy Director of Public Health
Sal Tariq – Deputy Director, Children and Families
Sue Rumbold – Chief Officer, Children and Families

Representative of NHS (England)

Anthony Kealy - NHS England

Third Sector Representative

Alison Lowe – Director, Touchstone

Representative of Local Health Watch Organisation

Dr John Beal - Healthwatch Leeds

Representatives of NHS providers

Sara Munro - Leeds and York Partnership NHS Foundation Trust
Julian Hartley - Leeds Teaching Hospitals NHS Trust
Thea Stein - Leeds Community Healthcare NHS Trust

Representative of Leeds GP Confederation

Simon Boycott – Head of Development and Governance / Company Secretary

The Governance Officer informed members that Councillor R Charlwood had sent her apologies due to recovering from a recent operation. Councillor F Venner was elected as Chair for the duration of the meeting. The Chair wished Councillor Charlwood a speedy recovery.

30 Welcome and introductions

The Chair welcomed all present and brief introductions were made. Members were reminded of the implications of purdah, due to the upcoming General Election.

Matt, from Slung Low, was invited to speak to the Board. Matt provided members with the history of the meeting venue, as one of the oldest working men's clubs in the country and a hub for the local community. Members were

also informed that Slung Low, a theatre company funded by the Arts Council, took over the day-to-day running of the Holbeck in 2016 and regularly hold workshops and other events for the local community. The Chair thanked Matt for his hospitality and the work of Slung Low.

The Chair also provided a brief overview of the Big Leeds Chat that took place on 7th November 2019, along with a number of smaller engagement events across the city.

31 Appeals against refusal of inspection of documents

There were no appeals.

32 Exempt Information - Possible Exclusion of the Press and Public

There were no exempt items.

33 Late Items

There were no late items.

34 Declarations of Disclosable Pecuniary Interests

There were no declarations of disclosable pecuniary interests.

35 Apologies for Absence

Apologies for absence were received from Councillor R Charlwood, Councillor S Golton, Cath Roff, Paul Money, Supt. Jackie Marsh, Tim Ryley, Steve Walker and Jim Barwick.

Councillor S Arif, Sabrina Armstrong, Simon Boycott, Sal Tariq and Sue Rumbold were in attendance at the meeting as substitutes.

36 Open Forum

Dr John Puntis, Leeds Keep our NHS Public, raised some concerns regarding the implications of the West Yorkshire and Harrogate (WY&H) Health and Care Partnership's 'Improving Planned Care' programme for patient access, particularly in relation to the evidence base behind the programme and the level of input from clinicians. The Director of Public Health advised Dr Puntis that a well-represented clinical senate in Leeds had thoroughly assessed the thresholds set out in the 'Improving Planned Care' programme.

Dr Puntis also stated that the NHS Long Term Plan is reliant upon private companies to develop Integrated Care Systems (ICS), and sought the Board's views in relation to global collaboration. The Chief Officer (Health Partnerships) informed Dr Puntis that there was a clear consensus in Leeds that negotiations would not be open to private companies in the United States.

Mr Mike Shaw, a support worker for people living with HIV, raised concerns with living conditions for vulnerable people in the private rented sector in Leeds, and referred to a number of cases of rat infestations that private landlords had refused to resolve. Mr Shaw felt that in the absence of legislation to force landlords to see to such issues, there was a requirement for the Council to embed a joined-up approach to ensure that cases of vermin infestation are resolved as quickly as possible. Members recognised the challenge with engaging with the private rented sector, and advised that the matter would be passed on to Council teams.

37 Minutes

RESOLVED – That the minutes of the meeting held 16th September 2019 be approved as an accurate record.

38 Priority 3: Strong, engaged and well-connected communities - Developing our Local Care Partnerships

The Chief Executive of Leeds Community Healthcare submitted a report that provided an overview of Local Care Partnerships (LCPs) to Health and Wellbeing Board. The paper described why Leeds health and care system is developing Local Care Partnerships, how they fit with other activity in Leeds, and the current stage of development.

Kim Adams, Head of Local Care Partnership Development, introduced the report and provided members with a PowerPoint presentation, including examples of successful community engagement projects undertaken by well-established LCPs. Members were advised that the LCPs across the city were at varied levels of progress, and of the importance of recognising that culture change and relationship building takes time.

Members discussed a number of matters, including:

- *Population Health Management.* Members were keen to understand how the LCPs will contribute to improving the health of the most deprived communities the fastest, and were informed that the Population Health Management approach was designed to ensure that LCP plans and projects are tailored to the strengths and challenges of individual communities. There was support for this approach, however, members noted that the wider health inequalities that are true for Leeds as a whole should still be considered.
- *Representative membership.* There were a number of comments around the make-up of LCPs, and the need for wider health partners such as pharmacists and dentists to be included. There was also some discussion around ensuring that successful models for ‘Children and Family Hubs’ were shared between LCPs to encourage the family first approach within the health and social care setting. Additionally, Members sought reassurance that licensing and planning teams were engaged in relevant work streams.

RESOLVED –

- a) To note the work being undertaken to develop Local Care Partnerships;
- b) To note the Board's understanding that success is dependent on strong relationships fostered through working together on shared priorities with appropriate support;
- c) To note the Board's support for the principle of prioritising time to foster the right culture to make lasting change happen.

39 Leeds System Resilience Plan 2019/20

The System Resilience Assurance Board (SRAB) submitted a report that provided assurance to the Leeds Health and Wellbeing Board that the Leeds health and care system continue to work together to improve the resilience of service delivery.

The Leeds System Resilience Terms of Reference 2019/21 were appended to the report.

Sue Robins, Director of Operational Delivery at NHS Leeds CCG, introduced the report and provided a PowerPoint presentation, highlighting some of the key projected areas of challenge throughout the winter months and other peak times, along with the preventative measures in place to ensure resilience.

Members discussed a number of matters, including:

- *Engagement with children and young people.* There was a suggestion that the 'How does it feel for me?' group be replicated with children and young people, to gain an understanding of their experiences of health and social care services. Members requested an update on the project at a future Board meeting.
- *Affordable warmth.* In response to a query around affordable warmth schemes, Members were advised that the Council were leading on a project to address fuel poverty.

The Chair noted the Board's thanks to Sue Robins ahead of her retirement in the New Year.

RESOLVED –

- a) To note the positive work across the Leeds system over the last year to improve Leeds system resilience;
- b) To note the Board's assurance that comprehensive plans for escalation are in place based upon good governance and communication between system partners.

40 Developing our approach to improving health and wellbeing across Leeds and West Yorkshire and Harrogate Health and Care Partnership

11.1 Draft Leeds Health and Care Plan

The Head of the Leeds Health and Care Plan submitted a report that provided the final draft Leeds Plan summary on a page for approval as well as outlining the progress to date.

Paul Bollom, Head of Leeds Plan, introduced the report and provided members with a PowerPoint presentation. All members also gave a brief update on the commitments of actions on behalf of their individual organisations as set out in the presentation slides.

RESOLVED –

- a) To note the progress and successes of the Leeds Plan to date (section 3.1);
- b) To note that the Leeds Plan summary reflects the priorities that the Board previously agreed (16 September 2019) should be given additional focus (section 3.2.2);
- c) To note the actions that each partner will take to deliver the refreshed Leeds Plan;
- d) To note the Board's support for the development of a system-wide approach to communications and engagement (section 3.4).

11.2 Draft WYH Health & Care 5 Year Strategy

The West Yorkshire and Harrogate Health and Care Partnership submitted a report that presented a further draft of the narrative of the West Yorkshire and Harrogate Health and Care Partnership Five Year Strategy.

The following were in attendance:

- Ian Holmes, Director for West Yorkshire and Harrogate Health and Care Partnership
- Rachael Loftus, Head of Regional Health Partnerships

The Director for WY&H Health and Care Partnership introduced the report and provided members with a PowerPoint presentation, including areas of the strategy focused on the wider determinants of health that had been strengthened following previous engagement.

Members discussed a number of matters, including:

- *Big ambitions.* Members queried the inconsistency between, and in some cases absence of, completion dates of the 'big ambitions' as set out in the report. Members suggested that the dates should echo the five year period, but were informed that some projects were reflective of wider national priorities.
- *Strategy presentation.* Members queried whether the strategy could be presented in a more succinct and easy to digest format for the public and wider workforce. Members were advised that the strategy included

dedicated sections for each programme to allow individuals to only read sections relevant to their lives or work. Members were also advised that the key messages from the strategy would be translated into other multimedia formats, such as video and animation, to reach a wider audience.

RESOLVED –

- a) To note the contents of the report and 5 Year Strategy documents;
- b) To note the links between the 5 Year Strategy and the refreshed Leeds Plan for Health and Care;
- c) To note the timescale and process for finalisation of the documents following the General Election.

Julian Hartley left the meeting at 3:40 p.m., and Thea Stein and Sara Munro at 4:00 p.m., during discussion of this item.

41 For information: Leeds Health and Care Quarterly Financial Reporting

The Board received, for information, the report of the Leeds Health and Care Partnership Executive Group (PEG) that provided a brief overview of the financial positions of the health and care organisations in Leeds, brought together to provide a single citywide quarterly financial report (Appendix 1). This report is for the period ending months ending September 2019.

RESOLVED - To note the contents of the report.

42 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 provided a summary of recent activity from workshops and wider system meetings, convened by the Leeds Health and Wellbeing Board (HWB). The report gave an overview of key pieces of work across the Leeds health and care system, including carers, women in Leeds, and the draft Mental Health Strategy.

RESOLVED – To note the contents of the report.

43 Any Other Business

There were no matters raised on this occasion.

44 Date and Time of Next Meeting

The next meeting will take place on Thursday 20th February 2020 at 12:30 p.m.