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HEALTH AND WELLBEING BOARD

WEDNESDAY, 30TH SEPTEMBER, 2015

PRESENT: Councillor L Mulherin in the Chair

Councillors N Buckley, D Coupar, S Golton,
and L Yeadon

Representatives of Clinical Commissioning Groups

Dr Jason Broch	Leeds North CCG
Nigel Gray	Leeds North CCG
Matt Ward	Leeds South and East CCG
Phil Corrigan	Leeds West CCG

Directors of Leeds City Council

Victoria Eaton – Consultant in Public Health
Cath Roff – Director of Adult Social Care
Sue Rumbold – Chief Officer, Children’s Services

Representative of NHS (England)

Maira Dumma - NHS England

Third Sector Representative

Heather O’Donnell

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

21 Chairs Opening Remarks

Public Health Funding – Noting the current funding challenges, including the £200m reduction in Public Health funding; the savings required by the NHS Trust Development Agency and the recent changes to Business Rate administration requiring the Local Authority to return £6m to NHS England; the Board considered the best arena in which to discuss the impact of funding changes on front-line services. The Board noted the concerns expressed generally by commissioners, practitioners, providers and service users.

Councillor Mulherin reported that LCC had responded to the Government consultation on the proposals objecting to the cuts in principle and commenting that if the in-year cuts were to be implemented nationally, that they should reflect the fact that Local Authorities such as Leeds were already underfunded for Public Health and that some other Local Authorities were currently over funded. The Chair suggested that the Board hold an additional meeting once the outcome of the consultation and the Governments’

response was released, in order to support the Board's aim to achieve a collective approach to health and wellbeing across the city

22 Appeals against refusal of inspection of documents

There were no appeals against the refusal of inspection of documents

23 Exempt Information - Possible Exclusion of the Press and Public

The agenda contained no exempt information

24 Late Items

No late items of business were added to the agenda

25 Declarations of Disclosable Pecuniary Interests

No declarations of disclosable pecuniary interest were made, however the following additional declaration was made:

Nigel Gray (Leeds North CCG) – Agenda item 14 -Children & Young People's Oral Health Promotion Plan – wished it to be recorded that he had recently been elected Chair of Governors at Scholes (Elmet) Primary School (Federated with Wetherby St James' C of E Primary School) (Minute 35 refers)

26 Apologies for Absence

Apologies for absence were received from Andrew Harris (Leeds South & East CCG) and Gordon Sinclair (Leeds West CCG). Dr Ian Cameron (Director of Public Health) and Nigel Richardson (Director of Children's Services) also tendered apologies and they were represented at the meeting by Victoria Eaton (Consultant in Public Health) and Sue Rumbold (Chief Officer, Children's Services) respectively. Additionally, the Board welcomed Heather O'Donnell as a representative of the Third Sector.

27 Open Forum

The Chair allowed a period of up to 10 minutes to allow members of the public to make representations on matters within the terms of reference of the Health and Wellbeing Board (HWB).

Health Funding – A query was raised over any actions proposed to address the impact of the cuts being made to both NHS and Public Health funding.

The member of the public welcomed the assurance already given about the local response to the Government consultation on local health funding.

Julian Hartley (Leeds Teaching Hospitals NHS Trust) responded. He provided assurance that, despite presenting a significant challenge, negotiations seeking to minimise the impact on front line services were ongoing with the TDA (NHS Trust Development Authority) and Monitor (Sector Regulator for Health Services in England)

28 Minutes

RESOLVED – That, subject to an amendment to minute 5 to refer to 'CPAG – the NHS England Clinical Priorities Advisory Group', the minutes of the meeting held 10th June 2015 be agreed as a correct record

29 Development of Primary Care Services (General Practice)

The Board received a report from the three Leeds Clinical Commissioning Group Chairs providing information on the developments taking place in general practice across Leeds as part of the citywide response to the national drive to develop 7 day working and to improve access to general practice services. The report outlined the challenges faced by general practices in reconfiguring both teams and infrastructure to achieve this.

Dr Chris Mills, Clinical Lead (Leeds West CCG), gave a presentation on the key themes of the report and highlighted the drivers for change as being the changes to the population demographics, technology and the workforce

The Board discussed the following themes:

- The take up of the offer of 7 day appointments and the costs of non-attendance. It was agreed the Board should support measures encouraging take-up.
- The integration of local pharmacy provision to support 7 day general practice and the need to develop relationships between the two services
- Noted that the three Leeds CCGs had different operational models which affected patients' access to 7 day working. Additionally, 7 day working was not mandatory.

Dr Mills outlined the key considerations for the future as being:

- Preserving community elements to provide a service to meet the needs and priorities of the local community
- How that service is delivered and by whom
- Whether General Practice could commission the Third Sector to deliver more services, and how that commissioning process is undertaken
- To keep the workforce in mind during the transition period

RESOLVED

- a) To note the progress that is being made with regard to developing 7-day services across Leeds and the commitment to continue to work across the City to share the learning from individual schemes
- b) To lend support to the wider system changes required to support developing new models of care in Leeds
- c) That having considered and discussed what further action could support improvements in access to general practice services across Leeds, the Board identified measures to encourage the take-up of 7 day access to General Practice as being key.

30 Winter Planning and System Resilience in Leeds

The Board received a report from the Chairs of the three Leeds Clinical Commissioning Groups which provided an overview of planning, investment, management and developments across the Health and Social Care system to achieve year round system resilience and the delivery of high quality effective services to its population.

Nigel Gray (Leeds North CCG) and Debra Taylor-Tate attended the meeting to present the report. The following matters were highlighted in discussions:

- The emphasis on encouraging all-year round resilience and the role of the System Resilience Group
- In order to react to influences and plan for eventualities, the Resource, Escalation Action Plan (REAP) had been developed
- The key priorities – the workforce, system flow and future of primary care
- The delayed transfer of care and the expectation of a multi-disciplinary approach to the assessment of both the patients' and the carers' situation.
- The need to ensure that the patient/carer perspective is reflected in building system resilience and that consultation includes patients and service users
- The need to consider the Children and Young People's Plan in order to prepare for service requests and support for children and young people with complex needs. It was agreed that representatives of LCC Children's Services and the CCG would liaise to consider this
- The need to consider a city wide 'bed plan' as well as the community strategy and to recognise that resilience should address overall care, not just measurable quantities such as beds.
- The need to discuss how to manage resilience planning across Yorkshire for mental health services/overnight provision, taking into account the impact of £2.8m budget reduction and different service models

(Linn Phipps and Thea Stein withdrew from the meeting for a short time)

HWB acknowledged the work done in preparing the report and recalled the impact of winter service requests on provision in 2014/15. Looking forward, it was reported that a review of elective surgery was being undertaken in order to better manage requests this year, putting the escalation process at the heart of integrating service responses

RESOLVED -

- a) To note the content of the paper and the establishment of the System Resilience Group and its commitment to continue to work across the City to maintain a resilient Health and Social Care economy
- b) To note the system challenges affecting both national and local delivery and the content of discussions of how joint working in Leeds can support these
- c) To continue to support the integration of Health and Social Care and the critical part it plays in delivering a resilient city and maintaining a positive experience for patients and service users
- d) To support the further development of a system wide Resource Escalation Action Plan (REAP), to initiate a system-wide response to the immediate pressures and achieve further Health and Social Care integration to support resilience

31 Maternity Strategy for Leeds (2015-2020)

The Chief Operating Officer (Leeds South & East CCG) submitted a report providing a brief overview of the Maternity Strategy for Leeds 2015-20 document. The report provided assurance in terms of the robust methodology

of its co-production, and its contribution to key outcomes and priorities of the Leeds Joint Health and Wellbeing Strategy (2013-2015).

Matt Ward (Leeds South & East CCG) presented the paper seeking ratification of the Strategy which had been produced in consultation with service users. The outcome sought to ensure consistency of care throughout pregnancy and early childcare.

The Board broadly welcomed the Strategy and noted the key areas for consideration identified in paragraph 3.1 of the submitted report. Members noted the link between the Strategy and LCC's 'Breakthrough Projects', specifically those seeking to address domestic violence and abuse; and reducing health inequalities. Members briefly discussed the comment that the midwifery service may not be able to provide a bespoke service to meet the needs of all individuals and; in noting the challenges ahead; Chris Butler (Leeds & York Partnership NHS Trust) offered to participate in future discussions which should also consider the impact of public health funding cuts.

(Tanya Matilainen withdrew from the meeting for a short while at this point)

RESOLVED -

- a) To note and endorse the Maternity Strategy (2015 - 2020) as critical to the delivery of the Joint Health and Well-being Strategy priority 2 'to ensure everyone will have the best start in life'
- b) That Health and Wellbeing Board members will hold each other and local partners to account to deliver the ambitions of this Maternity Programme

32 Future in Mind, Children and Young People's Mental Health and Wellbeing

The Chief Operating Officer (Leeds South & East CCG) submitted a report on the work undertaken in respect of the national review and publication "Future in Mind" (2015) Children and Young People's Mental Health and Wellbeing. Guidance has now been published, which sets out the requirement to submit a 5-year Local Transformation Plan (LTP) by 16 October 2015, in order to receive the allocated funds.

Matt Ward (Leeds South & East CCG) presented the report, highlighting the preparations underway in Leeds and seeking approval for the Chair of the Board to be authorised to sign off the LTP due to the tight timescales for its' submission.

The Board welcomed the Strategy, noting comments on the need to take account of the health strategies and demographics of neighbouring authorities' and the need to recognise how quickly this service would be taken up

(Matt Ward and Chris Butler withdrew from the meeting for short time at this point)

RESOLVED -

- a) To note and recognise how the recent Leeds whole system review will support the content within the Leeds Local Transformation Plan (LTP)
- b) That the Chair of the Health and Wellbeing Board be authorised to sign off the LTP due to the tight timescales of the submission
- c) To note the intention to submit a full report of the LTP to a subsequent meeting

33 Annual Report of the Health Protection Board

The Director of Public Health submitted the first Annual Report of the Health Protection Board. The Health Protection Board had identified emerging health protection priorities for Leeds since it was established in June 2014 and had developed an annual work plan to support the arrangements in place to protect the health of communities and meet local health needs.

Dawn Bailey presented the Annual Report highlighting the overview provided of the key priorities identified by the Health Protection Board and the work undertaken to address them. Appendix 1 of the report contained the key priorities and indicators, using the Red Amber Green rating to identify progress against the associated development plan.

The following matters were discussed by the Board:

- Cervical Screening. The indicator showed a reduction in the number of screening tests and Members considered how to encourage increased take-up of this service
- Gonorrhoea in Leeds. Whilst noting that the treatment of specific conditions was not within the remit of the HWB, Members were aware of a recent media story and considered the role of Sexual Health Service
- The new migrant health screening service and the barriers new migrants felt in accessing services
- In respect of consultation and engagement, the need to consider the additional information needed to include those people who have opted out of the system

In moving the recommendations, the Chair urged all partners to continue to work together to address the issues raised in the report

RESOLVED

- a) To endorse the Health Protection Board's Annual report.
- b) To note the key priorities identified in the Health Protection Board Annual report.
- c) To continue to contribute and/or support the Health Protection Board.
- d) To note the priorities of the Health Protection Board in their planning for the refresh of the Joint Health and Wellbeing Strategy.

(Heather O'Donnell left the meeting at this point)

34 Leeds Let's Get Active

The Director of Public Health presented an update report on the Leeds Let's Get Active (LLGA) initiative, including the progress made in relation to Year 1 and 2 evaluation results and consideration of future developments.

Mark Allman (LCC Head of Service for Sport) and Steve Zwolinsky (Leeds Beckett University) presented the report which highlighted the effects of physical inactivity on the general health of the population. 64,000 Leeds residents had signed up to the scheme, 15,000 of those from the most deprived areas. Importantly, 80% of those had remained active. Discussions concentrated on the following issues:

The links to employers. The Board noted that this initial scheme had been aimed at the most inactive residents, making use of facilities during day times when usage was low - which generally precluded employed residents. On a practical level, Matt Ward suggested that the scheme outcomes could be reported back to the organisations represented on the HWB – as Leeds employers.

Measurable outcomes – Members were keen to see demonstrable outcomes such as a reduction in the number of GP visits. It was reported that evaluation of the initial LLGA scheme would allow identification of behavioural trends in different areas of the city rather than specific outcomes.

Scheme access – The Board considered availability of the scheme for residents who did not live near a facility, and whether the scheme could be expanded to include the wider family group. In response, it was noted that future phases of the initiative could develop additional activities in co-production. Evaluation of results would inform future schemes and monitoring of the wider impact would be valuable, for instance, did participants also stop smoking.

The Board noted the LLGA as a good news story for the city as the initiative had a greater positive impact than expected, however its success also brought concern over its sustainability. The Board went on to consider what role it could take to encourage residents to engage with the scheme, noting that several issues influenced the take up of the offer (such as an individual's confidence, complex needs, lifestyle choices, debt management, education). It was agreed that the issue of the Scheme's sustainability would be included on the agenda for the future additional HWB meeting.

RESOLVED -

- a) To note the update of Leeds Let's Get Active and evaluation findings based on research from year 1 and 2 of project delivery.
- b) To note the information outlining the updated evaluation framework for year 3 of Leeds Let's Get Active.
- c) To note the comments made on the contribution of Leeds Let's Get Active to promoting physical activity in the city and the health benefits of that.
- d) To note that the issue of the sustainability of Leeds Let's Get Active initiative post April 2016 would be discussed at the future additional HWB meeting

(Matt Ward and Thea Stein left the meeting at this point)

35 Children and Young People's Oral Health Promotion Plan

The Director of Public Health submitted a report presenting the Leeds Children and Young People (CYP) Oral Health Promotion Plan (2015-19) – the Best Start Plan - for discussion on the proposed priorities and indicators. The report also sought endorsement of the Plan and support for the further development of a detailed implementation plan.

The report outlined the Plan as a preventative programme from 0-19 years which aimed to ensure that every child in the city had good oral health, providing parents, carers, children and young people with access to effective oral health support and targeted interventions to support those at risk of oral health inequalities.

Steph Jorysz and Janice Burberry attended the meeting to present the report and discussed the following matters with the Board:

- Key messages about oral health were not being picked up, possibly because the mechanisms for accessing oral health, outside of visits to the dentist, were traditionally family based. It was also acknowledged that Leeds had a bad reputation for dentist availability.
- The correlation between children's oral health and their parent's oral health. This was addressed by health visitors now being tasked with providing oral health information
- Proposals for a future scheme to invest in free toothbrushes for schools in areas identified as 'in need'

RESOLVED

- a) To consider the content of the Plan and note 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) To agree that the Board will monitor progress as part of its Best Start priority.
- d) The HWB considered how it could lend support to the work, and agreed to assist in the co-ordination of the work and partnerships, and to endorse the emerging Best Start commitments.

36 For Information: Better Care Fund Update

The Health and Wellbeing Board received a joint report from the Chief Officer Resources and Strategy (LCC Adult Social Care) and the Chief Operating Officer (Leeds South & East CCG) on the implementation of the Better Care Fund in Leeds. The report identified the responsibilities of the Health and Wellbeing Board under the BCF Partnership Agreement and provided Leeds' response to the national Quarter 1 BCF reporting process which had been submitted on behalf of the Leeds Health and Wellbeing Board.

RESOLVED - To note the contents of the report.

37 For Information: Progress on recommendations from the Director of Public Health Report 2013

The Board received an update on the progress made on the recommendations from the Director of Public Health's Annual Report, 'Protecting Health in Leeds 2013'.

RESOLVED

- a) To note the good progress made on recommendations from the Director of Public Health Annual report, 'Protecting Health in Leeds' 2013.
- b) To note that the Health Protection Board is now established and has oversight on the priority areas outlined in this report.

38 For Information: Delivering the Strategy

The Board received a copy of the September 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 September 2015 'Delivering the Strategy' Joint Health and Wellbeing monitoring report

39 Any Other Business

Commercial Food Outlets, Leeds Teaching Hospital NHS Trust – Councillor Mulherin reported that the Trust had started a review of the food offer in Leeds' Hospitals, specifically from the commercial food outlets

Pension Fund Investment – Councillor Mulherin received the Boards' support for her to write as Chair of Leeds HWB to the Local Government Pensions SB Advisory Group urging they review the practice of investing in tobacco producing companies for the purpose of the local government pension scheme. The Board noted the suggestion that NHS representatives should also contact their respective pension scheme managers seeking a similar review

40 Chairs' Closing Remarks

The Chair closed the meeting by reporting that Rob Kenyon, Chief Officer, Health Partnerships, would be leaving his post to move to Kent in the New Year 2016. Councillor Mulherin expressed the Board's thanks to Rob for the significant contribution he had made to the work of the HWB

41 Date and Time of Next Meeting

RESOLVED – To note the date and time of the next formal meeting as Wednesday 20th January 2016 at 10.00 am. (There will be a pre-meeting for Board members from 9.30 am)

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