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HEALTH AND WELLBEING BOARD

MONDAY, 20TH FEBRUARY, 2017

PRESENT: Councillor R Charlwood in the Chair

Councillors D Coupar, B Flynn, S Golton
and L Mulherin.

Representatives of Clinical Commissioning Groups

Dr Jason Broch	NHS Leeds North CCG
Dr Gordon Sinclair	NHS Leeds West CCG
Nigel Gray	NHS Leeds North CCG

Directors of Leeds City Council

Dr Ian Cameron – Director of Public Health
Cath Roff – Director of Adult Social Services
Sue Rumbold – Children’s Services

Representative of NHS (England)

Moira Dumma - NHS England

Third Sector Representative

Kerry Jackson – St Gemma’s Hospice

Representative of Local Health Watch Organisation

Lesley Sterling-Baxter – Healthwatch Leeds

Representatives of NHS providers

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

42 Welcome and introductions

The Chair welcomed all present and brief introductions were made.

43 Appeals against refusal of inspection of documents

There were no appeals against the refusal of inspection of documents.

44 Exempt Information - Possible Exclusion of the Press and Public

The agenda contained no exempt information.

45 Late Items

No formal late items of business were added to the agenda.

46 Declarations of Disclosable Pecuniary Interests

There were no declarations of disclosable pecuniary interest.

47 Apologies for Absence

Apologies for absence were received from Councillor G Latty, Steve Walker and Julian Hartley. Councillor B Flynn, Sue Rumbold and Liz Kay were welcomed as substitute members.

48 Open Forum

No matters were raised by members of the public under the Open Forum.

49 Minutes

RESOLVED – The minutes of the previous meetings held 20th October and 24th November 2016 were approved as a correct record.

50 Matters Arising

20/10/16

Minute 15a) St Gemma’s Hospice – Councillor Charlwood briefly reported on a visit to St Gemma’s Hospice undertaken by Board members and expressed her support for the Hospice as an example of best practice for the City.

Minute 27 Future in Mind, Leeds – Councillor Mulherin reported on the recent launch of the strategy and a copy of the summary document was made available for Board members.

51 Introducing the Leeds Commitment to Carers

The Board received a report from Leeds Carers Partnership on the “Leeds Commitment to Carers” which included a series of carer and organisational statements; recognising the Leeds Carers Partnership as a key strategic influencer and champion.

The report was presented by Mick Ward, (Integrated Commissioning, Adult Social Care & NHS Leeds North CCG) and Val Hewison (Chief Executive, Carers Leeds).

Ms Hewison reported that in her discussions with carers, repeated themes were love (for family carers); carers feeling invisible (all the focus is on the person being cared for); and fear (of what may happen in the future if they were not there to care). She reported that most care in Leeds was provided by a family carer, and most carers do not access services for themselves, they attend only to access care with/or for the recipient of care. It is important to ask “are you a Carer?” at that point

She highlighted that the Carers Commitment should:

- Ensure that recognition, partnership and support for carers is our ‘usual business’.
- Ensure that carers are able to continue to work and act as a carer. Just giving 10 hours of family care has detrimental impact on a carer’s own career or education
- Tie together the strands of the previous 5 Year forward view (emphasised prevention and carers wellbeing) and the Sustainability & Transformation Plan (focus on relationships)

Finally, the Board congratulated the Carers Leeds Partnership Board as it had been awarded the Health Service Journal Award for Integrated Commissioning for Carers in recognition of its integrated approach to carers support.

Discussions included consideration of:

- The scale of the task of offering support to carers, noting that 1:10 of the population were carers
- Carers' identification, acknowledgement and support could be achieved through partnership working. It was reported that partnership with 3rd sector organisations had already been secured; respite care was available to support carers; and partners could influence other commissioners/provider to ensure that carer support is built into all parts of business and work plans.
- The role of the Steering Group to record and monitor progress against an organisation's own action plan.
- The ongoing work to secure agreement from each LCC Directorate to sign up to the action plan
- The change in the carer workforce - from older persons caring for their spouse/partner to carers tend to be of working age – and concern over the difficulty in identifying young carers and older people with learning difficulties who now cared for their elderly parents/family member. The comments regarding identification of young carers were noted for further consideration by all present

In conclusion the Chair expressed the support of the Board and commended the work of the partnership

RESOLVED

- a) To endorse the Leeds Commitment to Carers.
- b) That the Leeds Carers Partnership be tasked with promoting the Leeds Commitment to Carers and reviewing all action plans
- c) That the Leeds Carers Partnership be requested to present a progress report in 2018

52 Reducing Health Inequalities through Innovation and System Change

The Board considered the report of the Head of Health Innovation, Leeds Health Partnerships on how innovation and system change provide the means by which the reduction of health inequalities will be delivered. The report set the scene for a series of presentations on the key issues and opportunities to be addressed in an effective programme of delivery. Additionally the report included an overview of the scale of health inequality in Leeds and the role of economic growth, the Leeds Digital Strategy and investment through partnership.

The Leeds Growth Strategy - Colin Mawhinney provided an overview of the Strategy 2011/16 which was currently under review. The Strategy had taken account of the diversity of the city, quality of life as well as measurable outputs and had recognised the role of partnership working. The review would focus on implementation; and consider the impact of Brexit, employment and the predicted economic growth for Leeds, particularly in the digital and education sectors. Key to being able to address health inequality was a strong; growing economy. Future productivity was influenced by health, skills and support. Small and Medium Enterprises (SME's) were a large part of the healthcare sector in Leeds providing a number of jobs and requiring support as they expanded.

The Board received a short video presentation. Representatives from 4 SMEs highlighted the advantages of being based in Leeds – the collaborative approach between the business and education sectors; the local talent pool; skills, support and transport infrastructure which encouraged easy access to the city and allowed SMEs a greater regional reach to provide services and encourage staff.

Challenges ahead included ensuring the continued development of a local talent pool with relevant skills; and encouraging local commissioners/business to buy local products and services.

The Board welcomed the context and framework for inward investment provided by the presentation and noted comments on issues including:

- Securing new jobs for Leeds residents
- The existing skilled workforce in the digital and education economy. Further consideration to be given to create opportunities for different skills/workforce to support other parts of the general economy which in turn will raise the standard of the health and wellbeing of Leeds citizens
- The challenge of encouraging uptake of health and care jobs when pay, conditions and hours may not be seen as favourable as other sectors
- Recognition of the link between economic deprivation and health inequality and the need to target economic growth, education and new skills to areas of deprivation.

The Leeds Digital Strategy – Dylan Roberts emphasised the role of Digital Economy in supporting health and wellbeing of the population and identified the link between Leeds' Digital Roadmap and the Leeds Health & Care Plan – a place based approach will support the appropriate platform on which to create and share design principles. Arrangements were being put in place to deliver a city digital team supported by NHS Digital. The Board was urged to consider the positive impact of digital/technology on self-care and prevention and the opportunity for SMEs to establish new products – such as a smartphone app. It was noted that European funding had been secured to support Leeds companies to fund innovative products

(Moira Dumma, Gordon Sinclair and Councillor D Coupar withdrew from the meeting for a short while)

The Board heard from Victoria Betton of mHabitat, a company supporting digital innovation in the NHS and wider public sector. The company had received funding to consider the challenge around digital practising and she highlighted the need to update the technology in use in the health care sector to better support practitioners in the field – such as appropriate smart phones for home visits.

Discussion recognised that the use of digital technology can be transformative and is crucial in many health and care service workplaces; although it was acknowledged that the initial roll-out of technology to staff was not without

challenges. It was suggested that sharing digital design principles should ensure SME's capabilities and ensure the future of information sharing.

Leadership in Innovation and System Change – Mike Messenger, Leeds Centre for Personalised Medicine & Health, joined the meeting via Skype from San Francisco. The 2016 Precision Medicine Catapult had encouraged Leeds developers/practitioners to consider personalised medicine and health in all three health settings – hospital, general practice and community health. Leeds developed a whole system approach which was now being mooted as a best practice example. The challenge now was to develop and use new products and ways of working much sooner. Precision medicine aimed to improve and enrich decisions taken by individuals about their own health, wellbeing and care through the use of technology. The technology could also be used to identify when/or if a patient may become ill, or assist with identifying appropriate medicine

(Moira Dumma left the meeting at this point)

Leeds was seen as being a good place to trial precision medicine due the diverse population and medical needs, the large healthcare system and because of the relevant expertise and skills already in the city within the universities and hospitals.

Mr Messenger explained that the founding principle of the co-operative was to utilise the data already available in care packages and care paths, and to identify where added value was gained, or lost, on the patients' care path. He identified current challenges as being:

- gaining access to real time data from care services which prevents the co-operative undertaking service modelling
- gaining access to patients and consent to use their data.

Board members noted the comments made during the video presentation seeking to encourage commissioners to review their procurement mechanisms and expressing concern that Leeds CCGs did not procure Leeds made products. The Board also noted the response that discussions were being held with CCGs on this matter.

The Board felt it was important to identify which organisations will lead and progress the roll-out of the various initiatives and to ensure that localities with historical health challenges are included.

In conclusion the Board commented that technology was not just about productivity, but was a facilitator to interact with patients and hold citizens' information. Increasingly, technology in the health and care sector should empower individuals to help them get what they want out of health and care services.

Having considered the report and presentations, the Board

RESOLVED –

- a) Noted the further opportunities for the Board to progress and provide strategic direction identified during discussions

- b) Noted the discussions on how members of the Board can further support the work
- c) To receive future progress reports as and when appropriate

53 Any Other Business

West Yorkshire & Harrogate Sustainability & Transformation Plan

Freedom of Information request – Councillor Flynn sought assurance that no information had been withheld from the published WYH STP. He reported on a recent FOI request made to secure the publication of the appendices to the STP, which had been refused by NHS Wakefield CCG under the provisions of Section 36(2) (ii) of the FOI Act. Relevant representatives assured the Board that they were not aware that any information had been withheld from the public domain, and had attended STP meetings where a transparent approach had been agreed.

Next Steps – Confirmation of the date for publication, recorded as December 2017 in the WYHSTP, was requested. It was agreed that this information would be provided directly to the Board member.

54 Date and Time of Next Meeting

RESOLVED – To agree that the next meeting on 20th April 2017 would be re-scheduled as an informal workshop for Board members.