



**LINCOLNSHIRE HEALTH AND
WELLBEING BOARD
27 SEPTEMBER 2016**

PRESENT: COUNCILLOR MRS S WOOLLEY (CHAIRMAN)

Lincolnshire County Council: Councillors C N Worth (Executive Councillor for Culture and Emergency Services), D Brailsford, B W Keimach and C R Oxby.

Lincolnshire County Council Officers: Debbie Barnes (Executive Director of Children's Services), Glen Garrod (Executive Director of Adult Social Services) and Dr Tony Hill (Executive Director of Public Health Lincolnshire).

District Council: Councillor Jeff Summers (District Councils Representative).

GP Commissioning Group: Dr Kevin Hill (South Lincolnshire CCG), Dr Sunil Hindocha (Lincolnshire West CCG) and District Councillor Jeff Summers (District Councils Representative).

Healthwatch Lincolnshire: Sarah Fletcher.

NHS England: Jim Heys.

Officers In Attendance: Steve Blagg (Democratic Services Officer), Alison Christie (Programme Manager, Health and Wellbeing Board), Mandy Clarkson (Consultant Public Health Wider Determinants) (Public Health), Philip Garner (Adult Health Improvement Manager), Chris Weston (Consultant in Public Health - Health Intelligence)), Sophie Dickinson (Lincolnshire Health and Care), Sarah Furnley (Lincolnshire East CCG) and David Stacey (Programme Manager, Public Health).

11 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors Mrs P A Bradwell (Executive Councillor for Adult Care, Health and Children's Services), N H Pepper (Support Councillor Culture and Emergency Services) and Dr P Holmes (Lincolnshire East CCG).

12 DECLARATIONS OF MEMBERS' INTEREST

There were no declarations made at this stage of the meeting.

13 MINUTES OF THE LINCOLNSHIRE HEALTH AND WELLBEING BOARD
MEETING HELD ON 7 JUNE 2016

RESOLVED

**LINCOLNSHIRE HEALTH AND WELLBEING BOARD
27 SEPTEMBER 2016**

That the minutes of the previous meeting of the Lincolnshire Health and Wellbeing Board held on 27 September 2016, be confirmed as a correct record and signed by the Chairman.

14 ACTION UPDATES FROM THE PREVIOUS MEETING

The Board received an update of actions since the previous meeting of the Board on 7 June 2016.

A Board Member enquired about the reason for the delay in examining the Board's composition with regard to District Council membership. He requested that this matter should be brought forward for consideration. The Chairman stated that the ideal time to address the matter was after the County Council Election in 2017 as the Council might have new Members elected who would require training, support and added that the Board was a Committee of the Council.

RESOLVED

That the report be noted.

15 CHAIRMAN'S ANNOUNCEMENTS

The Board received a report in connection with the Chairman's announcements.

The Chairman drew attention to the details of letter she had sent to the Chief Executive of the United Lincolnshire Hospital Trust raising concerns about the level of emergency provision in the south of the county, in particular, the capacity of the Ambulance Service to be able to respond to any increase in demand. She stated that there had been a campaign in the south of the county about the lack of a proper ambulance service and its detrimental impact locally.

Comments by the Board and officers included a specific case of a patient from Grantham who had refused to be taken to Lincoln because of his concerns about getting back to Grantham and the Police had taken patients to hospital because there was no ambulance available. It was noted that the South Lincolnshire CCG was examining this issue because of the importance of this service.

RESOLVED

That the report be noted.

16 DECISION/AUTHORISATION ITEMS

16a Annual Assurance Report

LINCOLNSHIRE HEALTH AND WELLBEING BOARD
27 SEPTEMBER 2016

The Board received a report in connection with the progress being made to deliver the outcomes in the Joint Health and Wellbeing Strategy. The progress was detailed on the Strategy's Scorecard and Theme Dashboard for 2015/16.

Discussion between the Board and officers included the following topics:-

- There was a declining trend in the eight indicators which was welcome;
- It was noted that cases of liver disease were increasing and there was a need to focus on the strategy to tackle this issue and for a partnership approach;
- The elderly population was increasing rapidly and finding beds was becoming an issue. The strategy was going in the right direction but it was recognised that this issue was becoming more prominent;
- Increased mortality amongst the under 75's was becoming an issue in some communities due to inappropriate life styles. It was noted that an audit of GP practices was being undertaken to assess the take-up of health checks;
- The District representative queried the point in the report that the Board agreed to hold each other to account but there had been no discussion about at the Board about the decommissioning of services. The District representative was advised that the 2016/17 commissioning intentions for CCGs, Adult Care, Children's Services and Public Health were discussed at the informal Health and Wellbeing Board meeting in February 2016, to which all District Councils were invited to attend. In addition, the CCGs Operational Plans for 2016/17 were formally presented to the Board in March 2017;
- The Council had written to the Government about the reduction in funding for Public Health. It was hoped to address the reduction in funding of Public Health when local authorities had responsibility for setting their own priorities;
- The challenge faced was where to direct preventive resources and how to prioritise these resources as there were no easy choices for the NHS or Local Authorities. There was a need to consult the public and other agencies to identify constraints and the alternative options available;
- Elected Members faced election every four years and therefore there was a need to regularly examine priorities and the allocation of resources. Prevention was better than cure in the long term;
- The statistics in Theme One for physical activity did not match those given by Sport England. Officers were unaware how Sport England had produced their statistics or whether it was possible to measure statistics down to a District Council level;
- The presentation by The Sports Partnership was about the Sports England Strategy and their new arrangements on how funding was going to be allocated. The Chairman stated that engagement had taken place around these new arrangements and not everyone was aware. Officers stated that they would check exactly what the Sports England document was and get back to the Board;
- Gainsborough Town Council had received funding from West Lindsey District Council to support football at youth level but this funding was coming to an end. Over 2,000 young people had been involved and the activity should be encouraged. It was the case that the dividend from physical activity did not

**LINCOLNSHIRE HEALTH AND WELLBEING BOARD
27 SEPTEMBER 2016**

become apparent for many years and it was necessary to convince funding bodies that this was worth supporting;

- Theme 4 – there had been a lot of good work taking place with improving education attainment and narrowing the gap between those receiving free school meals and those not receiving them. The key challenge was obesity in children which was being tackled by the Government's national plan which Lincolnshire was following;
- The integration of health teams was welcomed;
- Children needed to feature in the Transformation Plan and District Councils also had a part to play;
- There was a lot of work to do in connection with reducing the number of Non-Accidental Injury cases particularly in teenagers and there would be a focus on this area in the future;
- Mental illness in children was an issue. Officers stated that the Safeguarding Board was examining risk in this area and the CAMHS transformation plan was helping to revise the service specification;
- There was a lot of emphasis on examination results especially in English and Maths. Officers stated that examination results were selected as the performance measure including measuring the gaps between those living in financial disadvantage and those not. This was a priority area;
- One of the reasons why Lincolnshire was not narrowing the education attainment gap was because Lincolnshire was not as well funded as other local authorities. Officers stated that there was a lot of work taking place in Lincolnshire to narrow the attainment gap for children eligible for free school meals and the government was being lobbied about school funding; and
- It was agreed that housing problems had an effect on health and was being addressed in the Strategy. Officers stated that support was given to people living independently and that fuel poverty was still a major issue. Details of the Energy Switch initiative were available on the County Council's website. Officers stated that a review of housing and support accommodation for 16-24 year olds was also needed.

RESOLVED

That the report, comments made by the Board and the responses of officers, be noted.

16b Prioritisation Framework for the Development of the Joint Health and Wellbeing Strategy

The Board received a report in connection with the need to agree the Prioritisation Framework for the development of the Joint Health and Wellbeing Strategy following a workshop held on 12 July 2016, involving members of the Board, partners and stakeholders.

Discussion between the Board and officers included the following topics:-

- There was an error in the criteria within the table under Exercise 2 of

LINCOLNSHIRE HEALTH AND WELLBEING BOARD
27 SEPTEMBER 2016

Appendix A of the report. Officers agreed to change the Public Acceptability weighting from high to medium to correct this;

- A similar error was included in Appendix B. Officers agreed to review weighting of all criteria in Appendix B to ensure the weighting of criteria in the Prioritisation Framework was correct;
- The District Councils stated that the Prioritisation Framework accurately the findings from the workshop;
- The Framework stood up to scrutiny and it was very good to show that comparisons had been made; and
- The Board discussed whether the criteria covering "Magnitude of benefit" and "Number of people benefitting" should be combined into one criterion as recommended. It was agreed that these were two different things and, as such, should be separated back out into two criteria as originally proposed. Officers agreed to make the necessary changes to the Prioritisation Framework to reflect this.

RESOLVED

1. That the feedback from the workshop on the Prioritisation Framework be noted and welcomed.
2. That, subject to the amendments identified by the Board in Exercise 2 of Appendix B, for developing the next Joint Health and Wellbeing Strategy for Lincolnshire, the Prioritisation Framework be agreed.

17 DISCUSSION ITEMS

17a Joint Commissioning Board - Update Report

The Board received a progress report of Lincolnshire's Better Care Fund (BCF) 2016/17.

Officers highlighted various aspects of the report including potential changes to the BCF which were likely to be announced with the Comprehensive Spending Review in November. Disabled Facilities Grants was another issue in Lincolnshire as one District Council had requested their full funding allocation. The Joint Commissioning Board had recommended that the Health and Wellbeing Board should not release the full allocation although there was a risk that this action could lead to a further challenge by the District Council in question as the legal advice was that the available guidance was unclear and open to interpretation. Discussions were on-going with the District Council to secure consensus across the county and a focus on how best to use next year's allocation.

Discussion between the Board and officers included the following topics:-

- Officers stated that the Delayed Transfer of Care (DTC) performance was an ongoing challenge and that the national data indicated the worst performance for many years. Both acute and non-acute delays needed to remain a priority;

- With regard to the issue raised in the report about the Disabled Funding Grant did the District Council concerned have its own housing stock as some Local Authorities allocated this responsibility to Housing Associations? Officers replied that the Council concerned did have its own housing stock;
- Had officers spoken to the District Council concerned in connection with its funding issues? Officers stated that all of the District Councils had been informed about this matter;
- The Board needed a consistent approach to all of the District Councils in connection with the Disabled Funding Grants;
- What were the legal and financial implications for District Councils? Officers stated that the District Councils needed to hold a collective view on this matter so that a more efficient system could replace the current version where each District acted largely in isolation to each other; and
- The narrative between BCF and the Sustainability Transformation Plan (STP) was important, notably in relation to future integration plans. There was a need to improve care provision to allow people to stay in their own home rather than in hospital and it was important to maintain this vision.

RESOLVED

1. That the report be noted.
2. That the recommendation of the Joint Commissioning Board not to accede to the request from the single concerned District Council in connection with their Disabled Fund Grant for 2016/17, be agreed.

17b Lincolnshire Sustainability and Transformation Plan - (including Lincolnshire Health and Care)

The Board received a progress report in connection with the Sustainability and Transformation Plan (STP).

Discussion between the Board and officers included the following topics:-

- Planning for the STP had been on-going for the last two years;
- Uncertainty about the ability of being able to transpose information from the Lincolnshire Health and Care Programme to the STP;
- The public did not have enough information about the STP and there was a need to ensure that they were fully informed. Officers stated that it was proposed to consult the public and there had been a lot of consultation already. It was proposed to have an engagement plan to show how the STP would be delivered. The STP would be published before Christmas 2016 and there would be full engagement with the public;
- How robust were the financial plans for the STP? Officers stated that there were two elements, one element for changing the requirement and secondly a judgement was required in connection with increasing the workforce as it was going to take a number of years to recruit staff; and

LINCOLNSHIRE HEALTH AND WELLBEING BOARD
27 SEPTEMBER 2016

- It was important that questions to the public should be kept simple as simple as it was a complicated subject.

RESOLVED

That the report be noted.

17c District/Locality Updates

It was noted that there were not any District/Locality updates to report.

18 INFORMATION ITEMS

19 AN ACTION LOG OF PREVIOUS DECISIONS

The Board received a report which gave details of decisions taken by the Board since its previous meeting held on 7 June 2016.

RESOLVED

That the report be noted.

20 LINCOLNSHIRE HEALTH AND WELLBEING BOARD - FORWARD PLAN

The Board received its Forward Plan. It was noted that the meeting of the Board scheduled for 28 March 2017, had been brought forward to 7 March 2017 because of the County Council Election.

21 RETIREMENT OF TONY HILL, EXECUTIVE DIRECTOR OF COMMUNITY WELLBEING AND PUBLIC HEALTH

The Chairman stated that this was Tony Hill's last meeting as he was retiring. She thanked him for his services to the Board and added that Tony had been at the forefront in establishing the Board and on behalf of the Board she wished him well in his retirement.

The meeting closed at 4.00 pm