



**LINCOLNSHIRE HEALTH AND
WELLBEING BOARD
5 JUNE 2018**

PRESENT: COUNCILLOR MRS S WOOLLEY (CHAIRMAN)

Lincolnshire County Council: Councillors Mrs W Bowkett, R L Foulkes, C R Oxby and N H Pepper

Lincolnshire County Council Officers: Debbie Barnes OBE (Executive Director of Children's Services) and Professor Derek Ward (Director of Public Health)

District Council: Councillor Donald Nannestad (District Council)

GP Commissioning Group: Dr Sunil Hindocha (Lincolnshire West CCG) and Dr Kevin Hill (South Lincolnshire CCG)

Healthwatch Lincolnshire: Sarah Fletcher

NHS England: Hayley Jackson

Police and Crime Commissioner: Joanne Davison

Lincolnshire Co-Ordinating Board: Elaine Baylis

Officers In Attendance: Andrea Brown (Democratic Services Officer) (Democratic Services), Alison Christie (Programme Manager, Health and Wellbeing Board), Ruth Cumbers (Urgent Care Programme Director, Lincolnshire East CCG), Hayley Jackson (NHS England (Leicestershire and Lincolnshire Area)), Tony McGinty (Interim Director of Public Health), David Stacey (Programme Manager, Public Health), Councillor Dr Michael Ernest Thompson and Melanie Weatherley (Chair of Lincolnshire Care Association (LinCA))

1 ELECTION OF CHAIRMAN

RESOLVED

That Councillor Mrs S Woolley be elected as the Chairman of the Lincolnshire Health and Wellbeing Board for 2018/19.

COUNCILLOR MRS SUE WOOLLEY IN THE CHAIR

2 ELECTION OF VICE-CHAIRMAN

RESOLVED

2

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

5 JUNE 2018

That Dr Sunil Hindocha be elected as the Vice-Chairman of the Lincolnshire Health and Wellbeing Board for 2018/19.

3 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors C E H Marfleet, Mrs P A Bradwell and C N Worth, G Garrod and Dr S Baird.

Apologies for absence were also received from Marc Jones (Police and Crime Commissioner), who was replaced by Joanne Davison (Partnerships and Delivery Manager, Office of the Police and Crime Commissioner), and Jim Heys (NHS England) was replaced by Hayley Jackson (NHS England).

4 DECLARATIONS OF MEMBERS' INTEREST

There were no declarations of Members' interest received at this point of the proceedings.

5 MINUTES OF THE MEETING OF THE LINCOLNSHIRE HEALTH AND WELLBEING BOARD HELD ON 27 MARCH 2018

RESOLVED

That the minutes of the meeting held on 27 March 2018 be confirmed and signed by the Chairman as a correct record.

6 ACTION UPDATES FROM THE PREVIOUS MEETING

RESOLVED

That the completed actions, as detailed, be noted.

7 CHAIRMAN'S ANNOUNCEMENTS

The Chairman referred to the announcements published within the agenda pack and those circulated to the Board under separate cover.

In relation to the Ofsted Report, the Executive Director for Children's Services confirmed that the team was delighted at the outcome. The staff had worked tirelessly and achieved a good outcome following the focussed visit by Ofsted. It was acknowledged that further work was required to improve services but the overall outcome was that the authority was working extremely well to improve outcomes for children.

RESOLVED

That the Chairman's announcements be noted.

8 DECISION/AUTHORISATION ITEMS

8a Terms of Reference and Procedure Rules, Roles and Responsibilities of Core Board Members

Consideration was given to a report by Alison Christie (Programme Manager Health and Wellbeing) which invited the Board to reaffirm the Terms of Reference, Procedure Rules and roles and responsibilities of Board Members.

It was agreed that the Key Roles and Responsibilities of Individual Core Members, as listed on pages 46 and 47 of the agenda pack, should also include the Office of the Police and Crime Commissioner and the Chairman of the Lincolnshire Coordination Board of the STP.

One Member suggested that the information items should be circulated via email only and not be included on the agenda at Board meetings. This was acknowledged and the Board advised that this was the intention.

RESOLVED

That the Terms of Reference, Procedural Rules and Board Members' Roles and Responsibilities, with the amendment noted above, be reaffirmed.

8b Joint Health and Wellbeing Strategy for Lincolnshire 2018

Consideration was given to a report by David Stacey (Programme Manager Strategy and Performance) which asked the Board to formally sign-off the new Joint Health and Wellbeing Strategy for Lincolnshire and all associated delivery plans.

The four key elements of the report were highlighted to the Board:-

1. New Joint Health and Wellbeing Strategy;
2. Delivery Plans;
3. Governance and Accountability Framework; and
4. Feedback from Engagement.

The following priority areas for the new Joint Health and Wellbeing Strategy (JHWS) had been agreed by the Board and it was confirmed that Obesity remained a key priority for consideration:-

- Mental Health and Emotional Wellbeing (Children & Young People);
- Mental Health (Adults);
- Carers;
- Physical Activity;
- Housing;
- Obesity; and
- Dementia.

Each of the Priority Delivery Groups had been working on the development of more detailed delivery plans for each of their respective priority areas within the JHWS.

The Governance and Accountability Framework provided a more formalised governance arrangement and included a process for the Board to undertake regular reviews and updates following further prioritisation discussions as and when required.

A summary of engagement feedback was included within the report and was intended to share and discuss the outcomes with each of the priority delivery groups to ensure this was considered within ongoing delivery planning, where appropriate.

There were no questions asked of officers in relation to this report.

RESOLVED

1. That the publication of the Joint Health and Wellbeing Strategy document be agreed;
2. That the basis for progressing the delivery of the Joint Health and Wellbeing Strategy for Lincolnshire by way of Delivery Plans be agreed;
3. That the adoption of the proposed Governance and Accountability Framework by the Lincolnshire Health and Wellbeing Board be agreed; and
4. That the feedback from the most recent online engagement be noted.

9 DISCUSSION ITEMS

Due to the availability of officers, it was agreed that agenda item 9b – "*Health and Care Workforce – Recruitment and Retention*" be taken prior to item 9a – "*Winter review and Planning*".

9a Health and Care Workforce - Recruitment and Retention

Dr Adrian Tams (Workforce Transformation Manager (Lincolnshire)) gave a presentation which highlighted the issues faced in Lincolnshire and the steps being taken to address staff shortages and skills gaps.

The presentation included the following slides:-

- Lincolnshire Workforce Challenges;
- Context;
- Lincolnshire isn't alone.....;
- July 2017 – May 2018 STP Data;
- Local Workforce Context (Planned and Current Workforce Data across Providers);
- Lincolnshire Issues
 - Attraction, Recruitment and Retention;
 - Workforce Supply, Demand and Planning;
- Addressing the Issues
 - Local Workforce Action Board & Sustainability and Transformation Partnership;
 - Workforce Transformation: A to B Plan;
 - Talent Academy – 'Grow our own';
 - University of Lincoln & Medical School; and
 - National Centre for Rural Health and Social Care;

- 5 NHS Priorities
 - Mental Health;
 - Cancer;
 - Urgent and Emergency Care;
 - Integrated Care and Public Health; and
 - Maternity
- Workforce Action Groups (programmes of work to ensure the delivery of the Workforce and OD Strategies)
 - STP Programme Board;
 - Workforce Delivery Group (HR Streamlining; Partnership; and Talent Academy);
 - LWAB;
 - Workforce & OD Programme Board;
- LWAB/STP – Partnership Working;
- Workforce Transformation – Whole Systems Partnership;
- Workforce Development;
- Conclusions
 - Lincolnshire Healthcare Workforce is suffering from a number of workforce issues;
 - Considerable partnership working with Health Education England, providers, social care and HEI's although more collaboration needed;
 - Issues are being addressed in Lincolnshire;
 - Health and Wellbeing Board – integrated partnership, collaboration and inclusion into the STP, Workforce and OD Programme Board and Workforce Planning activities.

Members were invited to ask questions, during which the following points were noted:-

- It was explained that a lot of work was ongoing with Lincolnshire Partnership NHS Foundation Trust (LPFT), jointly with the CCGs, in relation to children and young people and mental health issues;
- The comparison between Lincolnshire and other areas was discussed and noted that Nottingham had considerably higher staff shortages within mental health than Lincolnshire. In comparison to neighbouring counties, Lincolnshire was reported to be favoured reasonably. Additionally, contracts within LPFT were being reviewed to consider amendments in order to make it easier for staff to work across boundaries;
- The Director of Human Resources and Organisational Development at United Lincolnshire Hospitals NHS Trust (ULHT) explained that there had been difficulty in attracting children's nurses and paediatricians although there had been more success recently in attracting nurses. He continued to explain that middle grade doctors remained an issue for the Trust but that work continued to attract doctors from overseas;
- Although NHS standards for recruitment remained, there had been a considerable amount of work done locally to reduce the length of time taken to recruit staff;
- The Chairman of the Lincolnshire Coordinating Board for the STP reported that she had met with the Minister of State for Health and Social Care, who

fully understood the challenges in relation to delivery of health services in rural counties which could help to support future plans;

- Health Education England fully supported work with local universities and the development of a fast track programme but acknowledged that retention of students following the completion of degrees remained an issues;
- Clearer workforce plans were required to improve the overall issues in Lincolnshire. There was now better partnership working between organisations which meant that workforce plans were more detailed and focussed. However, it was stressed that any support that the Health and Wellbeing Board could give in this area would be appreciated;
- The expectation of the public would require effective management, to ensure that the way in which healthcare was delivered by GPs in the future was clear as this provision would be very different; and
- The Board was reminded that there were over 20,000 people employed within health and social care who were not employed by the NHS.

The Chairman invited representatives from educational establishments within the county to address the Board:-

- Professor Scott Fleming (Executive Dean – Research, Knowledge Exchange and External Engagement at Bishop Grosseteste University) confirmed that the National Centre for Rural Health and Care would be housed at Bishop Grosseteste University and would take residence once the building had been renovated;
- Mark Locking (Managing Director Education and Training – Lincoln College) explained that this had been an area which the college had not been particularly productive in. They were now seriously considering this type of pathway and were currently in discussions with a large national healthcare provider looking at study programmes for 16-18 year olds. The challenge for the college was staffing and being able to secure the appropriate level of lecturers to be able to successfully deliver these pathways. Additionally, there was a need to find a way to promote this work to young people who, generally, were not interested in pursuing this type of pathway. The college also offered apprenticeships but struggle to recruit to them as young people did not see the long term benefits. Additionally, full funding for very low income households for adult learning was available and part-funding of certain qualifications for adults. However, exertion of political pressure to part or fully fund qualifications would help colleges to do more; and
- Professor Andrew Hunter (Deputy Vice Chancellor – University of Lincoln) explained that there was an enormous amount of preparatory work being done by the university to ensure the Medical School would be ready to recruit students from 2019. A visit from the General Medical Council (GMC) was expected on 20 July 2018. The Board was advised that these students would not qualify as practitioners until 2024. Recruitment of lecturers was also being pursued from existing staff within NHS Trusts in Lincolnshire.

The Chairman gave thanks for the frank updates and looked forward to working together to pursue this area further.

RESOLVED

That the report and presentation be noted.

9b Winter Review and Planning

Consideration was given to a report by the Lincolnshire Urgent Care and Emergency Care Delivery Board which provided details of system resilience during Winter 2017/18 and the forward planning process across the health and care system.

Ruth Cumbers (Urgent Care Programme Director – SRO STP Urgent Care Programme) introduced the report which provided detail on the following areas:-

- Background;
- Local Context;
- What is behind the pressures?
- Local and national responses to increased pressures;
- Patient Impact;
- Forward Planning Winter 2018/19;
- Governance and Assurance Links;
- Seasonally related illness;
- Winter Communications Plan;
- Business Continuity Plans;
- Demand and Capacity Modelling;
- Supporting the Acute Trust: minimising admissions, improving flow and reducing DTOCs;
- Primary Care;
- Lincolnshire Partnership Foundation NHS Trust (LPFT);
- Lincolnshire Community Health Services (LCHS);
- East Midlands Ambulance Service NHS Trust (EMAS); and
- Lincolnshire County Council (LCC).

The Chairman advised that the report had been thorough and to the point before inviting Members to ask questions, during which the following points were noted:-

- It was reported that a Medical Fit for Discharge Procedure had been finalised and approved and would be fully implemented by September 2018;
- Urgent care streaming had been imposed on Trusts by NHS England and this was to be done within a certain timescale. It was explained that those timescales had been met in Lincolnshire although it was known that the model implemented at such short notice would not be effective. As a result of that, a new specification had been put in place from 1 May 2018, with LCHS delivering the service in Lincoln and Boston;
- Urgent care streaming had also been implemented at Grantham Hospital following the overnight closure but it was stressed that this facility had never been a Minor Injuries Unit as the demand had not been enough to justify the service and it was discontinued;
- It was confirmed that interim beds were still available but stressed that these were interim and that people should go home. The decision was made to

better utilise the reablement service to ensure patients could be independent on discharge. It was suggested that patients became dependent once admitted to an acute bed. Unfortunately, convalescence was not a national policy;

- It was suggested to be beneficial to hold further discussions in relation to pressures in acute paediatrics, child protection medical and the requirements needed to be able to work jointly.

RESOLVED

That the report and contents be considered and noted.

10 INFORMATION ITEMS

10a Better Care Fund

The Board received a report by Glen Garrod (Executive Director of Adult Care and Community Wellbeing) which provided an update on the Better Care Fund (BCF) in Lincolnshire for 2017-2019 and included the current position in relation to finance and performance.

RESOLVED

That the report for information be received.

10b Health and Wellbeing Grant Fund - Update

The Board received a report from Alison Christie (Programme Manager Health and Wellbeing) which provided the half-yearly information on Health and Wellbeing Grant Fund Projects.

RESOLVED

That the report for information be received.

10c An Action Log of Previous Decisions

The Board received a report which noted the decisions taken since June 2017.

RESOLVED

That the report for information be received.

10d Lincolnshire Health and Wellbeing Board Forward Plan

The Board considered the Forward Plan of the Lincolnshire Health and Wellbeing Board which provided Members with an opportunity to discuss the items for future meetings which would, subsequently, be included on the Forward Plan.

A suggestion was made to consider the STP in September as a Discussion Item rather than an Information Item. Further to discussion, it was agreed that this would

be a Discussion Item and that direction of travel and process to-date could be discussed in the public domain.

The Chairman of the Lincolnshire Coordinating Board of the STP agreed to bring a paper to the next meeting in order to share as much information and progress as possible.

RESOLVED

That the report for information be received.

10e Future Scheduled Meeting Dates

The Board received the scheduled meeting dates for the remainder of 2018 and for 2019, all of which will commence at 2.00pm:-

Tuesday 25 September 2018;
Tuesday 4 December 2018;
Tuesday 26 March 2019;
Tuesday 11 June 2019;
Tuesday 24 September 2019; and
Tuesday 3 December 2019.

It was confirmed that electronic appointments would be sent to the Board in due course.

RESOLVED

That the meeting dates be noted.

The meeting closed at 3.45 pm