



**LINCOLNSHIRE HEALTH AND
WELLBEING BOARD
24 SEPTEMBER 2019**

PRESENT: COUNCILLOR MRS S WOOLLEY (CHAIRMAN)

Lincolnshire County Council: Councillors C N Worth (Executive Councillor Culture and Emergency Services), Mrs W Bowkett, C E H Marfleet, C R Oxby and N H Pepper

Lincolnshire County Council Officers: Glen Garrod (Executive Director of Adult Social Services) and Professor Derek Ward (Director of Public Health)

District Council: Councillor Donald Nannestad (District Council)

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

Healthwatch Lincolnshire: Sarah Fletcher

NHS E/I: Hayley Jackson

Police and Crime Commissioner: Marc Jones

Lincolnshire Co-Ordinating Board: Elaine Baylis

Officers In Attendance: : Alison Christie (Programme Manager, Health and Wellbeing Board), Samantha Neal (Chief Commissioning Officer), Heather Sandy (Interim Director of Education), Councillor Dr Michael Ernest Thompson, John Turner (Senior Responsible Officer, Lincolnshire Sustainability and Transformation Partnership), Rachel Wilson (Democratic Services Officer) (Democratic Services) and Kevin Johnson (Acting Commissioning Manager - Commercial)

11 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillor Mrs P A Bradwell OBE and Debbie Barnes OBE, Head of Paid Service/Executive Director Children's Services.

It was noted that Heather Sandy, Interim Director of Education, was in attendance in place of Debbie Barnes OBE, Head of Paid Service/Executive Director Children's Services.

12 DECLARATIONS OF MEMBERS' INTEREST

There were no declarations of interest at this point in the meeting.

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13 MINUTES OF THE MEETING HELD ON 11 JUNE 2019

RESOLVED

That the minutes of the meeting held on 11 June 2019 be signed by the Chairman as a correct record.

14 ACTION UPDATES

There were no action updates to report.

15 CHAIRMAN'S ANNOUNCEMENTS

The Chairman's announcements were set out at agenda item 5 of the agenda pack. In addition, the Chairman advised that Jo Churchill, a former Lincolnshire County Councillor had been appointed as Parliamentary Under Secretary of State for Prevention, Public Health and Primary Care and it was hoped that she would be able to work with the Lincolnshire Health and Wellbeing Board in the future.

16 DECISION ITEMS

16a The Lincolnshire Better Care Fund (BCF)

Consideration was given to a report which included the Better Care Fund (BCF) 'Narrative Plan' for 2019/20. It was reported that as with previous plans this must be agreed by the Board prior to submission. The Plan would also be approved by the Executive Director of Adult Care and Community Wellbeing in consultation with the relevant Executive Councillors on behalf of the County Council. The plan was in the process of being considered by the Clinical Commissioning Group's (CCG's). The report also provided an analysis of the latest performance concerning the BCF metrics.

The Executive Director for Adult Care and Community Wellbeing introduced the report and highlighted that whilst the Board received regular updates on the BCF as an information item, this report included the narrative plan that was to be submitted to government for approval to allow the authority to spend the money from April 2019 – 2020. The time frame for approvals did not always match with the reality of when the funding was to be spent.

It was highlighted that there would be a sizeable loss if the Government did not continue with the BCF in some form. The narrative plan that was contained within the report was set against the template provided by the government. A final decision was expected in November 2019 and it was expected that it would be processed and approved without undue delay. The end of the BCF had been moved back from March 2020 to March 2021 and so would continue for a further year. This would allow the government time to come up with a longer term solution.

The narrative plan for Lincolnshire had been subject to NHS, district council and county council involvement. It reflected the narrative plan that was agreed the

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previous year as part of a two year programme. It was noted that the conditions that went with the BCF had not changed for a number of years. There were three main conditions – to protect social care, to ensure the supply of social care services and to support the NHS with the provision of out of hospital care.

Expectations from government had been reduced and there was now more of a focus on Delayed Transfer of Care (DTOC) which had a high profile on the national agenda. It was reported that Lincolnshire was in a good place for meeting some of these conditions. It could be expected that subject to national changes, the funding would be used to further integration from 2020/21 onwards. Lincolnshire had one of the largest pooled budgets in the country.

The signatories were the four CCG's, the County Council and the Health and Wellbeing Board. The decision to approve this was critical due to the necessity of the funding which was used to underwrite the base budgets as well as some new investments. The Plan needed to be submitted by 27 September 2019. It was currently going through the CCG's decision making processes and Councillor Mrs P A Bradwell OBE, Executive Councillor for Adult Care, Health and Children's Services would sign on behalf of the County Council.

The Board was provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- It was commented that a lot of issues were due to a lack of communication and there was a need to work with the hospitals. It was noted that East Lindsey had dedicated discharge workers.
- It was highlighted that the County Council placed people out of county as well as in private hospitals which made it difficult to co-ordinate care for leaving hospital.
- It was queried how many people came into Lincolnshire for care from out of county and the Board was advised that Lincolnshire was a net exporter, and the numbers of those coming in from out of county were relatively low. It was acknowledged that out of county placements did cause issues, however, this was a challenge across the country.
- It was noted that when people had elective surgery they could choose to go to a private hospital for NHS care.
- It was queried what was being done to improve the position, and the Board was advised that discussions were taking place with NHS colleagues about this. It was noted that there were some patients who were placed in London hospitals.
- There was a need for a proactive date of discharge, as not all out of county hospitals would provide this. If there was not a predicted date of discharge, this could cause a delay of 12 - 24 hours for the patient leaving hospital.
- It was commented that there was not just one thing that would resolve this. Credit should be given to colleagues for the achievements made so far.

RESOLVED

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That the Lincolnshire Health and Wellbeing Board approves the BCF Narrative Plan for 2019/20 and notes the update to performance activity.

17 DISCUSSION ITEMS**17a Lincolnshire NHS Healthy Conversation 2019 - General Update**

The Health and Wellbeing Board received an update from John Turner, Accountable Officer, Lincolnshire Clinical Commissioning Groups, which provided a summary of the Healthy Conversation 2019 campaign and detailed the activity to date, feedback and results as well as next steps in the campaign.

It was reported that the campaign had commenced in March 2019 and would conclude on 31 October 2019. The final engagement events were due to take place in Grantham and Boston. Feedback received from the public had been taken on board.

The Board was provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- It was essential to set out the things which were important to Lincolnshire.
- The two further workshops were due to take place in Grantham on 9 October 2019 and Boston on 10 October 2019. The details of these sessions would be released shortly.
- The Healthy Conversation 2019 exercise had been quite informative, and as these events were brought to a conclusion, there was a need to keep the conversation going on a permanent basis across the county. Therefore, people were being recruited to sit on a citizens panel as a number of people at events had indicated that they would be interested in getting involved. It was suggested that an update could be brought back to the Board when the Panel was more fully developed.
- In relation to the Citizens Panel, it was noted that there was a need for reassurance that there was still a place for Patient Participation Groups and that their work would not be duplicated.
- There were local priorities as well as national ones. Travel and transport were significant issues for patients in Lincolnshire. There was real support for integrated care across the county.
- It had been pleasing to see how open people had been about their willingness to engage virtually with health services.
- It was commented that there seemed to be more events towards the south of the county. The Board was advised that the nine largest towns in the county had been visited, and due to some of the local issues which had been raised, it had been considered appropriate to return for more in depth events.

RESOLVED

That the progress on the delivery of the Health Conversation 2019 campaign be noted.

17b Joint Health and Wellbeing Strategy Housing and Health priority

Consideration was given to a report by Councillor Wendy Bowkett, Chairman of the Housing, Health and Care Delivery Group which highlighted progress made against the objectives in the Joint Health and Wellbeing Strategy Housing and Health delivery plan. It was reported that good progress had been made, setting the foundations for concerted, joint action by a range of partners who would meet during the autumn to develop and extend the delivery plan, with a focus on accelerating progress.

The Health and Wellbeing Board was guided through the report and members were provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- When the Joint Strategic Needs Assessment (JSNA) was out for consultation, one issue that was repeated was the need for good quality housing, and it was subsequently made a priority. Districts were asked to lead, and the Health and Wellbeing Board was grateful for all the work they had done as well as taking on the challenge and working with colleagues and districts.
- It was commented that there was some good work taking place.
- The importance of incorporating green spaces into new build estates was highlighted as a person's environment could affect their wellbeing.
- A single point of contact for DFG's was proposed as people often went to the County Council or were referred through occupational health, rather than going to the district council. The aim was to make it easier for people to understand.
- One councillor highlighted that they had carried out a piece of work in relation to new builds, to determine what the costs were to make slightly wider doorways, lower windows etc., and it was found that the costs would be negligible. It was queried whether anyone had adopted this. It was noted that it was dependent on who was building the houses.
- The district and county councils had a duty to ensure that any planning permission was granted appropriately. It was queried whether there was anything to prevent planning authorities from specifying that new builds had to incorporate features such as wider doorways and corridors. It was noted that houses were predominantly built by private developers and so there was a market element involved. It was also noted that the government policy was that if there were no planning objections then the permission should be granted. This was not something which could prevent a development from going ahead.
- It was highlighted that there were people who had spent their whole life in the same house and community, and if they were able to adapt their property they would be able to stay in their own home for much longer. Planning rules did not always support the development of a range of new properties, for example in a small village, which might enable someone to remain there in later life.
- There was a need to ensure that houses were designed around being homes for life. It was a very simple thing to accomplish, if it was incorporated into the building process at the right time.

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RESOLVED

1. That the report and progress made to date be noted.
2. That the direction of travel to further develop the Housing and Health priority delivery plan be supported.

17c Advancing our health: prevention in the 2020s Green Paper

Consideration was given to a report by Derek Ward, Director of Public Health, which set out a proposed response to the consultation on the Prevention Green Paper. It was reported that on 22 July 2019, the government published its Prevention Green Paper setting out how it planned to embed the principle of 'prevention is better than cure' in order to transform the nation's health over the next decade. The Green Paper posed a number of specific questions and asked for views on the proposals by 14 October 2019.

The Board was advised that the draft response attached was on behalf of Lincolnshire County Council, and there was a need to consider if the Health and Wellbeing Board would like to send a separate response. There was support for a separate response to be sent, and it was suggested that if members had any points they wanted to see included they should send them by e-mail to Alison Christie by 1 October 2019.

When considering if there were any further points that should be included, members were advised to not be constrained by the question itself. If they sent in the comments, officers would work them into the response.

RESOLVED

1. That the draft response to the Prevention Green paper be noted;
2. That a response be sent on behalf of the Health and Wellbeing Board, and any comments for inclusion should be sent to Alison Christie by 1 October 2019.
3. That the Chairman of the Board sign off the response prior to submission on 14 October 2019.

18 **INFORMATION ITEMS**

18a Children's Emotional Wellbeing and Mental Health

The Health and Wellbeing Board received a report from Kevin Johnson, Senior Commissioning Officer, which provided an update on the Joint and Health and Wellbeing Children and Young People's (CYP) Mental Health and Emotional Wellbeing priority, in particular the re-commissioning of Child and Adolescent Mental Health Services (CAMHS). The report outlined the breadth of mental health provision for CYP as well as providing key updates for the Health and Wellbeing Board around the neurodevelopmental pathway (ASD/ADHD and other neurodevelopment disorders); mental health support teams in schools trailblazer; development of the new CYP Emotional Wellbeing and Mental Health Strategy; and refresh of the Lincolnshire Local Transformation Plan (LTP) for CYP mental health.

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The Board was guided through the report and provided with an opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- Concerns were raised regarding the number of families making contact with Healthwatch who were in crisis and were not receiving support as they could not get a diagnosis for their child. Waiting times of between 15 – 18 months were being reported. The Board was advised that a lot of services had been put in place, including an outreach service that would support families without a diagnosis. It was acknowledged that there was a significant waiting list and was something that was being looked at with LPFT.
- It was highlighted that one of the challenges was people being on waiting lists and then not receiving a diagnosis. People should be assessed for need, and if professionals were meeting the needs of the child then a diagnosis would not be relevant.
- It was commented that one thing which was not mentioned was the effects of divorce and break-up of families on children and young people, which could be significant. The Board was advised that there was an emotional wellbeing pathway, which had been designed with young people, and one aspect of this was about resilience.
- It was noted that children went through phases, and there was a need to have a 'pick up' system, for when they were ready to re-engage. It was important that young people were able to reconnect with education/college.
- Concerns were raised regarding the referral time to be seen by a doctor.
- It was noted that the work to provide young people's educational mental health practitioners was excellent.
- It was highlighted that the way this team worked to promote integration was very important, and there was a cross organisational approach. There was a need to maintain and further develop the authority's joint approach.

RESOLVED

That the report be noted.

18b An Action Log of Previous Decisions

The Board received a report which noted the decisions taken since June 2019.

RESOLVED

That the report for information be noted.

18c Lincolnshire Health and Wellbeing Board Forward Plan

The Board received and considered its forward plan.

It was queried whether the Board could have a report on pain relief clinical, however it was felt this more of a scrutiny issue. It was reported that this had been picked up by the CCG's and the Chairman of the Health Scrutiny Committee for Lincolnshire was aware of the issues.

RESOLVED

That the report for information be received.

The meeting closed at 3.38 pm