



**LINCOLNSHIRE HEALTH AND
WELLBEING BOARD
5 DECEMBER 2017**

PRESENT: COUNCILLOR MRS S WOOLLEY (CHAIRMAN)

Lincolnshire County Council: Councillors Mrs P A Bradwell (Executive Councillor Adult Care, Health and Children's Services), C N Worth (Executive Councillor Culture and Emergency Services), Mrs W Bowkett, R L Foulkes, C R Oxby and N H Pepper

Lincolnshire County Council Officers: Debbie Barnes (Executive Director of Children's Services), Glen Garrod (Executive Director of Adult Care and Community Wellbeing) and Tony McGinty (Interim Director of Public Health Lincolnshire)

District Council: Councillor Donald Nannestad (District Council)

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

Healthwatch Lincolnshire: Sarah Fletcher

NHS England: Not represented

Officers In Attendance: Andrea Brown (Democratic Services Officer) (Democratic Services), Alison Christie (Programme Manager, Health and Wellbeing Board), Graham Anthony Marsh, Semantha Neal (East Lindsey District Council) and David Stacey (Programme Manager, Public Health)

19 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Dr Stephen Baird and Councillor C E H Marfleet. There were no replacement members in attendance.

20 DECLARATIONS OF MEMBERS' INTEREST

There were no Members' interests declared at this stage in the proceedings.

It was noted, however, that in relation to item 6b – *Lincolnshire Pharmaceutical Needs Assessment 2018*, the clinicians on the Board may be involved in this assessment as many GPs had dispensing practices in Lincolnshire.

21 MINUTES OF THE MEETING OF THE LINCOLNSHIRE HEALTH AND
WELLBEING BOARD MEETING HELD ON 26 SEPTEMBER 2017

RESOLVED

That the minutes of the meeting held on 26 September 2017 be confirmed and signed by the Chairman as a correct record.

22 ACTION UPDATES FROM THE PREVIOUS MEETING

RESOLVED

That the completed actions as detailed be noted.

23 CHAIRMAN'S ANNOUNCEMENTS

In addition to the announcements, as printed on page 19 of the agenda pack, the Chairman reported that she had attended the Rural Health and Social Care Roundtable at the NHS Confederation in London on 21 November 2017, on behalf of the Chairman of the LGA Community Wellbeing Board. It was noted that the rural perspective of Lincolnshire had been reiterated throughout the day both by Councillor S Woolley and Jan Sobieraj, Chief Executive of United Lincolnshire Hospitals NHS Trust (ULHT).

RESOLVED

That the Chairman's announcements be noted.

24 DECISION/AUTHORISATION ITEMS24a Joint Health and Wellbeing Strategy

Consideration was given to a presentation by David Stacey (Programme Manager – Strategy and Performance) which provided details of the further development of the Joint Health and Wellbeing Strategy for Lincolnshire following the engagement feedback.

The presentation included the following information:-

- Joint Health and Wellbeing Strategy (JHWS) Timeline;
- Background;
- Approach;
- Mental Health and Emotional Resilience – Children and Young People;
- Adult Mental Health;
- Carers;
- Physical Activity;
- Housing;
- Dementia;
- Obesity;
- Safeguarding;
- Common Areas;

- Key Messages;
- Potential Governance; and
- Delivering the JHWS.

The presentation explained the principles of the timeline and the framework criteria set for the timeline. Stakeholder engagement was essential in order to build public and patient confidence in the process and decisions would be made based on clear value choices underpinned by a sound evidence base.

The findings of the JHWS engagement had been presented at the Board in September 2017 where it was agreed that further work would be undertaken on the 'stand out' JSNA priority areas. This work would give further consideration to some of the key themes which had emerged from the engagement process and included prevention and early intervention; collective action across a range of organisations; tackling inequalities and equitable provision of services; and the ability to deliver transformational change to improve health and wellbeing.

It was reported that it was proposed to hold HWB-led Network Events to build leadership and drive change. These events would support multi-agency partnership working and collaborations which had been suggested following discussions with the Carers leads. The events were intended to provide key messages that HWB and JHWS should be at the forefront of leading a system shift towards joint commissioning for prevention.

In delivering the JHWS, it was proposed to align this to the JSNA as a continuous process. This would not, therefore, be a fixed strategy covering a specific timeframe period but an iterative process of prioritisation to reflect changing needs over time. The vision required a change in thinking to view the JHWS as an ongoing process which set out visions and outcomes rather than a static document, much like the JSNA.

During discussion, the following points were noted:-

- Although Active Lincolnshire was noted within the presentation that they were the lead for the work around Physical Activity, it was confirmed that there were also other active providers;
- There was an opportunity for the JHWS to also act as the Children and Young People Plan for Lincolnshire. It was noted, however, that there was no specific mention of safeguarding of children within the JHWS. It was explained that there was a statutory requirement by the Department of Education (DfE) to have a Children and Young People Plan but that this did not need to be separate should all the statutory requirements already be in one plan. To avoid criticism by Ofsted, particular mention of safeguarding and safety of children and young people would have to be included, whether as a separate topic or as a 'golden thread' running throughout the JHWS. Safeguarding elements would also include Adults. The Board was happy to ensure that this element was incorporated into the JHWS and asked officers to look at ways to do this;

LINCOLNSHIRE HEALTH AND WELLBEING BOARD**5 DECEMBER 2017**

- In addition to safeguarding, further discussion took place in regard to ensuring that the underpinning of safety and security for wellbeing in general be somehow included into the JHWS. The Board supported the need to include safeguarding as a cross cutting theme. It was reinforced that it was the responsibility of the members of the Lincolnshire Health and Wellbeing Board to promote the health of the residents of Lincolnshire where required and, to this end, the Local Authority's execution of enforcement duties and powers;
- In relation to Potential Governance, it was agreed that a specialist in each field would be required to lead on the group, for example the Physical Activity Alliance;
- It was reported, however, that Active Lincolnshire were also looking to set up a group as they had done a considerable amount of data collection work and, although it was acknowledged that this was for their own strategy, it was suggested that links could be made to share data and avoid duplication;
- A suggestion was made to amend '*Embed prevention in integrated Neighbourhood Teams across all JHWS priorities*', as a potential JHWS theme, to '*Embed prevention in integrated locality working across all JHWS priorities*';
- A more formalised governance arrangement was to be implemented for this strategy which would include regular progress reporting to the Board. Regular reviews and updates to the strategy would be made following prioritisation discussions as and when required.

RESOLVED

1. That the presentation and comments of the Board be noted; and
2. That the statutory requirements for safeguarding be amended to be more obvious throughout the document.

24b Lincolnshire Pharmaceutical Needs Assessment 2018

Consideration was given to a report by Tony McGinty (Interim Director of Public Health), on behalf of the Pharmaceutical Needs Assessment (PNA) Steering Group, which invited the Board to approve the draft PNA in preparation for the consultation planned between 11 December 2017 and 11 February 2018.

The Interim Director of Public Health introduced the report and explained that the completion of a Pharmaceutical Needs Assessment (PNA) was a statutory duty for Health and Wellbeing Boards to undertake at least every three years. The data contained within the assessment would be used to plan pharmaceutical services in the county which best met local health needs.

The Board delegated the work to publish a PNA by 1st April 2017 to a PNA Steering Group with regular updates to the Board on its progress. The draft PNA was approved by the Steering Group at its meeting on 10 November 2017. Pending the approval of the Board, it would then be made available for a mandatory 60-day consultation.

The results of the consultation would be considered by the Steering Group on 28 February 2018, following which a final PNA would be produced with a

LINCOLNSHIRE HEALTH AND WELLBEING BOARD
5 DECEMBER 2017

recommendation to the Board at its meeting on 27 March 2018 to publish the document. It was also confirmed that the final PNA must be published no later than 31 March 2018.

It was reported that the consultation, at this stage, was targeted at pharmaceutical professionals (pharmacists, chemists, etc) and not designed for members of the public due to its complex and technical content.

During discussion, the following points were noted:-

- Access to pharmacies at weekends, especially in rural areas, was highlighted as an issue and a suggestion made that even opening for two hours per day would be beneficial to residents;
- It was acknowledged that the provision was reduced over the weekend but, when benchmarked with other areas, Lincolnshire did not particularly stand out which was the reason why the county did not officially have a 'technical gap';
- Although not directed at members of the public, it was suggested that some may wish to comment on the document. It was explained that there was no legal obligation to distribute paper copies of the document and that it would be available on the LCC website. It was also reiterated that anyone intending to answer the questions would have to read all elements of the document to be able to do so;
- The consultation at this stage was to ascertain if the assessment gave an accurate picture of current services in Lincolnshire; and
- Healthwatch had also been part of this process and it was confirmed that they would be happy to assist any member of the public who wished to understand the content and answer the questions. Healthwatch would also be publicising the PNA throughout their own networks also.

RESOLVED

1. That the conclusions of the draft Pharmaceutical Needs Assessment (PNA) be noted;
2. That the draft PNA, in preparation for consultation, be approved by the Board;
3. That a consultation on a draft PNA for Lincolnshire planned between 11 December 2017 and 11 February 2018 be noted; and
4. That the progress and project plan timelines from the 'Lincolnshire PNA Steering Group' on the production of the 2018 Lincolnshire PNA be noted.

24c Lincolnshire Health and Wellbeing Board Membership Review

Consideration was given to a report by the Interim Director of Public Health which set out the proposed changes arising from the review of membership for the Board's approval. Any revisions to membership which required a change to the Council's Constitution would be presented to Full Council for approval in February 2018.

Following the Board's decision in June 2017 to consider its membership, nine Health and Wellbeing Boards, identified by the LGA as 'best practice', were reviewed although only two examples were two tier areas. Four neighbouring HWB areas in the East Midlands were also considered.

**LINCOLNSHIRE HEALTH AND WELLBEING BOARD
5 DECEMBER 2017**

The Working Group, made up of representation from the County Council, CCGs and District Councils, met on 31 October 2017 to consider the findings. The recommendation following these discussions was to extend core membership to add the:-

- Police and Crime Commissioner to enable closer joint working on key areas such as mental health; and
- Chairman of the Lincolnshire Coordination Board to strengthen the links with the STP.

It was confirmed, however, that discussions were still ongoing regarding potential wider changes to the overall composition of the Board's membership, specifically in relation to CCG engagement and to ensure continued senior clinical input; and the balance of the political representation between the County Council as the accountable body and the District Councils.

The Chairman stressed that this change would not be the only opportunity to consider the Board's membership and discussions would continue in order to present one proposal to Full Council in February 2018.

During discussion, the following points were noted:-

- Councillor D Nannestad indicated that there had been an agreement made at the Working Group to propose the appointment of a second District Council representative to the Board. Other members of the Working Group acknowledged that there had been discussion about the increase in District Council representation but that the majority had agreed that the 'dual-hatters' currently on the Board would sufficiently represent the District Councils in addition to the formally appointed representative. Councillor Nannestad disagreed and asked that his dissatisfaction with the outcome be noted; and
- It was confirmed that there were no plans to change the representation of the CCGs but that further discussion would be held on the actual number of representatives required.

RESOLVED

- That the membership changes, as recommended by the Working Group, to add the Police and Crime Commissioner and the Chairman of the Lincolnshire Coordination Board be endorsed; and
- That the proposed recommendations be formally submitted to Full Council in February 2018, to enable appropriate changes to be made to the County Council's Constitution, be agreed.

Councillor D Nannestad asked that this vote against these resolutions be recorded due to his view that this was not agreed at the Working Group.

At 3.25pm, Councillor Mrs P A Bradwell left and did not return.

25a East Lindsey Strategic Health and Wellbeing Partnership's Quality of Life Health and Wellbeing Strategy 2017-18

Consideration was given to a report by Samantha Neal (Strategic Development Manager, East Lindsey District Council, and Vice-Chair, East Lindsey Strategic Health and Wellbeing Partnership) which asked the Board to endorse East Lindsey's Quality of Life Health and Wellbeing Strategy 2017-18 and to note that this would be refreshed in 2018 to align to Lincolnshire's Joint Health and Wellbeing Strategy priorities and timeframes for revision.

Councillor G Marsh (East Lindsey District Council) provided a brief introduction to the item before asking Samantha Neal (Vice-Chair of East Lindsey Strategic Health and Wellbeing Partnership) to introduce the detail of the report.

The strategy had been developed by East Lindsey's Health and Wellbeing Partnership whose core members consisted of East Lindsey District Council (ELDC), Lincolnshire County Council (LCC), and Lincolnshire East Clinical Commissioning Group (LECCG) and chaired by LCC Public Health Division. The aim of that partnership was to support delivery of the Lincolnshire Health and Wellbeing Strategy and to contribute towards delivery of a small number of locally-relevant activities.

The strategy action plan included projects, which would be monitored through meeting agreed milestones, and programmes which would be monitored by specific outcome measures.

It was reported that mental health would be included within the refresh in addition to affordable warmth and fuel poverty; finance; safeguarding infrastructure in adults with complex needs. It was also suggested to have a focussed piece of work, to be undertaken collectively, in relation to immunisations.

The Board had no comments to make other than to commend East Lindsey for producing such a concise and informative strategy.

RESOLVED

That East Lindsey's Quality of Life Health and Wellbeing Strategy 2017-18, noting the refresh in 2018 to align to Lincolnshire's Joint Health and Wellbeing Strategy priorities and timelines for revision, be endorsed.

26 INFORMATION ITEMS

26a Sustainability and Transformation Partnership (STP) Update

The Board received a report from the Lincolnshire Sustainability and Transformation Partnership (STP) which provided information on the progress of the seven priorities since the last update in September 2017.

The seven priority areas were:-

**LINCOLNSHIRE HEALTH AND WELLBEING BOARD
5 DECEMBER 2017**

1. Mental Health;
2. Neighbourhood Teams;
3. Implementation of GP Forward View;
4. Service Reconfiguration;
5. Urgent and Emergency Care Transformation;
6. Operational Efficiencies; and
7. Planned Care

RESOLVED

That the report for information be received.

26b Better Care Fund

The Board received a report from Glen Garrod (Executive Director of Adult Care and Community Wellbeing), on behalf of the Joint Commissioning Board, which provided an update on Lincolnshire's Better Care Fund (BCF) plans including the submission of the BCF Narrative Plan and the related Planning Template. The report also included a finance and performance update showing the current position.

The Lincolnshire BCF Narrative Plan and related Planning Template had been submitted to NHS England and approved without conditions.

RESOLVED

That the report for information be received.

26c Housing Health and Care Delivery Group Update

Consideration was given to a report by Councillor Mrs W Bowkett, Chairman of the Housing, Health and Care Delivery Group, which provided an update on the work of the group and the wider Housing for Independence (Hfl) work.

The vision for Hfl was evolving with the principle aim of integrating housing, health and care whilst supporting a vision for joined up services which were focussed on the individual. The aim of Hfl was to help residents remain at home for longer and, therefore, reduce the need for hospital and care admission to avoid unnecessary costs. Work streams included the Joint Strategic Needs Assessment (JSNA) Housing & Health Topic and the modernisation of Disabled Facilities Grants (DFGs).

Councillor Mrs Bowkett reported that the meetings had been well attended and that all partners appeared to be working together to continue positive discussions.

It was further reported that the Chancellor had announced that an additional £43m was to be spent on DFGs in-year and, as that sits outside the BCF, it was advised that this would provide more of a challenge within two-tier areas.

Samantha Neal (Strategic Development Manager, East Lindsey District Council) confirmed that ELDC had received £117k but that this was to be spent and the work completed by the end of March 2018. The money must also be committed by the end of January 2018.

Conversations were underway between the County Council and District Councils to ensure that this money is spent within the guidelines. It was suggested that the Chairman of the Housing, Health and Care Delivery Group write to all District Councils to reiterate the importance of this particular spend.

RESOLVED

That the report for information be received and further comments noted.

26d An Action Log of Previous Decisions

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

RESOLVED

That the report for information be received.

26e 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.

It was suggested by Healthwatch to bring the results of the GP appointment work to the Board which was currently under analysis. It was agreed that it would be more appropriate for the Health Scrutiny Committee for Lincolnshire to consider but that the Board would be pleased to receive a copy for information.

Following earlier discussions, it was agreed to add *Lincolnshire Health and Wellbeing Board Membership* to the Forward Plan.

RESOLVED

1. That the report for information be received; and
2. That an item on the *Lincolnshire Health and Wellbeing Board Membership* be added to the Forward Plan.

The meeting closed at 3.46 pm