



LINCOLNSHIRE HEALTH AND WELLBEING BOARD 26 SEPTEMBER 2017

PRESENT: COUNCILLOR MRS S WOOLLEY (CHAIRMAN)

Lincolnshire County Council: Councillors Mrs P A Bradwell (Executive Councillor Adult Care, Health and Children's Services), Mrs W Bowkett and C E H Marfleet.

Lincolnshire County Council Officers: 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 South West Lincolnshire CCG) and Dr Sunil Hindocha (Lincolnshire West CCG)

Healthwatch Lincolnshire: Sarah Fletcher

NHS England:

Officers In Attendance: Alison Christie (Programme Manager, Health and Wellbeing Board), Cheryl Hall (Democratic Services Officer) (Democratic Services), Hayley Jackson (NHS England (Leicestershire and Lincolnshire Area)), Jo Kavanagh (Interim Assistant Director, Early Help), David Laws (Adult Care Strategic Financial Adviser) (Finance and Public Protection), Andrew Morgan (Chief Executive, Lincolnshire Community Health Services NHS Trust), David Stacey (Programme Manager, Public Health) and Chris Weston (Consultant in Public Health (Wider Determinants)) (Consultant in Public Health (Wider Determinants)).

11 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors R L Foulkes, C R Oxby, N H Pepper and C N Worth and Dr S Baird.

It was noted that Jo Kavanagh (Interim Assistant Director of Children's Services) and Hayley Jackson (NHS England) were attending the meeting on behalf of Debbie Barnes (Executive Director of Children's Services) and Jim Heys (NHS England), respectively.

12 DECLARATIONS OF MEMBERS' INTERESTS

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

13 MINUTES OF THE MEETING OF THE LINCOLNSHIRE HEALTH AND WELLBEING BOARD MEETING HELD ON 20 JUNE 2017

A Member of the Board referred to page 11 of the agenda pack, where it was stated that:

'A suggestion was made to cross reference the cost of alcohol and/or drug misuse with the cost of domestic abuse as it was thought that in many cases one could lead on to the other. It was acknowledged that there were some overlaps and something which the Board could give further consideration to'.

It was confirmed that this would be considered by the Board at a date yet to be confirmed.

RESOLVED

That the minutes of the meeting held on 20 June 2017 be confirmed and signed by the Chairman as a correct record.

14 ACTION UPDATES FROM THE PREVIOUS MEETING

RESOLVED

That the completed actions as detailed be noted.

15 CHAIRMAN'S ANNOUNCEMENTS

In addition to the Chairman's Announcements, as printed on page 19 of the agenda pack, the Chairman made the following announcement: -

Hospital Mortality

Figures published by the Office for National Statistics on 21 September 2017 had shown for the period of April 2016 to March 2017, there had been approximately 8.9 million discharges from hospitals in England, from which 294,000 deaths had been recorded either while in hospital or within 30 days of discharge across the 135 hospital trusts.

United Lincolnshire Hospitals NHS Trust (ULHT) had been identified in the report as one of the ten hospital trusts with a 'higher than expected' number of deaths. Figures for ULHT had shown that during 2016-2017, there had been over 400 more deaths recorded following time in hospital than the expected number.

The summary Hospital-level Mortality Indicator (SHMI) had compared the actual number of deaths following time in hospital with the expected number of deaths. The indicator had been developed in response to the Public Inquiry in to the Mid Staffordshire NHS Foundation Trust. The SHMI was not a measure of care – higher or lower than expected number of deaths should not immediately be interpreted as

indicating poor or good performance. Instead it should be viewed as a 'smoke alarm', which required further investigation.

The full report was available from: <http://digital.nhs.uk/pubs/shmiapr16mar17>

16 DISCUSSION ITEMS

16a Transport Service Group - 'Connected Lincolnshire' Initiative

Consideration was given to a report by Verity Druce (Senior Transport Assistant, Lincolnshire County Council), which provided information on the Total Transport Project and opportunities to link with the health sector.

The report summarised the Transport Services Group's vision for the county's passenger transport solutions, aiming to create an efficient and effective integrated multi-model passenger transport network and service by 2021. The two lead projects, as detailed in the report, included:

- New integrated vehicle based passenger transport network and service – focusing on the county's two lead commissioners of passenger transport, the Council and the NHS, this one-year project would aim to propose a new passenger transport network and service, for implementation over the following 2-3 years;
- New integrated cycling and walking passenger transport network and service – focusing on these more sustainable modes of 'transport' and aiming to propose a new network and service for the county.

Members were provided with an opportunity to ask questions, where the following points were noted: -

- It was suggested that the Transport Services Group engaged with district councils, as certain district councils funded local car schemes which could be linked to the Total Transport Project;
- A discussion took place regarding the withdrawal of subsidised bus routes, where it was suggested that consideration should be given to alternative ways of providing such services as reintroducing those routes would not be an option. An example was cited which could see dedicated school buses being used as a public transport service, provided school pupils were not disadvantaged;
- Improvements should be made to cycling routes to encourage people to cycle within Lincolnshire;
- It was highlighted that patients were increasingly required to travel further to access services/appointments and as a result, the impact on travel requirements were discussed; reference was made to the non-emergency patient transport service, where some patients had experienced problems, since the new contractor began operating the service in July 2017.

RESOLVED

That support be given to the vision and the associated approach, work streams and projects of the Transport Services Group.

16b Physical Activity - 'Whole System Approach'

Consideration was given to a report from Jo Metcalfe (Interim Health Client Manager), which provided an overview of Sport England's objectives and the role of *Active Lincolnshire* in supporting these objectives locally.

The report stated that *Active Lincolnshire*, in partnership with Sport England, Lincolnshire County Council, District Councils, and other key stakeholders aimed to support Lincolnshire to become the most active county across the country. It was reported that this aim could not be achieved in isolation and evidence had shown that a 'whole-system' approach was required to create a sustainable shift in activity levels. *Active Lincolnshire* was also exploring the opportunity to create a 'physical activity alliance', comprising key stakeholders to drive forward the whole-system approach to physical activity.

The report also stated that 22.2% of Lincolnshire's adult population undertook fewer than thirty minutes of physical activity each week, according to a survey undertaken by Sport England. A query was raised in relation to Sport England's survey, in particular the question of whether activity by people cultivating an allotment had been included. A member of the Board believed that the levels of low physical activity could be higher than those indicated by Sport England and the scale of the problem needed to be identified.

The link between the levels of funding and activity was discussed, and it was concluded that cultural influences were of more impact than funding levels.

The following comments were made on the item:

- It was suggested that *Active Lincolnshire* liaise with the Lincolnshire District Councils' Network.
- It was confirmed that *Active Lincolnshire* engaged with the chief executives of the Lincolnshire District Councils.

RESOLVED

- (1) That the Health and Wellbeing Board support the key priorities of *Active Lincolnshire*, subject to any duplication with other priorities being avoided.
- (2) That *Active Lincolnshire* be advised to collaborate with District Councils' Network and Lincolnshire Public Health to create a 'whole-system' shift in physical activity across the county.
- (3) That the strategic fit of creating a 'physical activity alliance' to drive forward the agenda be understood.

16c Housing, Health and Care Delivery Group Update

The Chairman of the Housing, Health and Care Delivery Group, Councillor Mrs W Bowkett, advised that the first meeting of the Group had been held on 5 September 2017, with twelve representatives present at the meeting.

The Terms of Reference for the Group had been agreed at the meeting. The Group also considered items on the Disabled Facilities Grant and the Joint Strategic Needs Assessment (JSNA). The Group agreed to hold a workshop on the JSNA.

The next meeting of the Group was scheduled to be held in Sleaford on 21 November 2017.

RESOLVED

That the verbal update be noted.

16d Lincolnshire Pharmaceutical Needs Assessment (PNA) 2018

Consideration was given to a report by Chris Weston (Public Health Consultant), which identified present and future needs for pharmaceutical needs.

The Board was advised that completion of a Pharmaceutical Needs Assessment (PNA) was a statutory duty for Health and Wellbeing Boards and should be undertaken at least every three years. Data contained within the assessment would be used by NHS England to plan pharmaceutical services in the county to best meet local health needs.

The production of the 2018 PNA for Lincolnshire had commenced, and a draft PNA was being prepared for consultation between 11 December 2017 and 11 February 2018. It was expected that the final PNA would be published by 1 April 2018.

The development of the draft PNA had shown that more people used pharmacies than anticipated. It was suggested that the wider range of services provided by pharmacies should be encouraged.

In response to a question it was highlighted that a copy of the Project Plan could be found at Appendix B of the report, which detailed the communication plan and timelines for the PNA. A reminder would be issued following the Christmas period to prompt completion of the public questionnaire.

The Board was assured that the Equality Impact Assessment for the PNA was pertinent to Lincolnshire.

RESOLVED

- (1) That the process to produce a revised Pharmaceutical Needs Assessment (PNA) by 1 April 2018 be noted.

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(2) That the Terms of Reference for the Lincolnshire PNA Steering Group be received.

(3) That the project plan timelines from the Lincolnshire PNA Steering Group on the production of the 2018 Lincolnshire PNA be received.

16e Sustainability and Transformation Plan (STP) Update

A report from John Turner (Chief Officer, South Lincolnshire Clinical Commissioning Group) was considered, which provided information on the progress since the last report to the Health and Wellbeing Board in June 2017. Andrew Morgan (Chair of the Lincolnshire System Executive Team) presented the report to the Board.

The Board was reminded that the Lincolnshire health system had developed and approved the Sustainability and Transformation Plan in October 2016. Its aim was to meet the challenges set out in the NHS Five Year Forward View – better health; transformed quality of care delivery; and sustainable finances. Development of the plan had fostered a collaborative approach to plan around the health needs of the Lincolnshire population, rather than an organisational approach. Lincolnshire had been working on seven key priorities since April 2017, which included: -

- Mental Health;
- Neighbourhood Teams;
- Implementation of GP Forward View;
- Acute Care Reconfiguration;
- Urgent and Emergency Care Transformation;
- Operational Efficiencies; and
- Planned Care.

Managing performance at A&E remained a key element.

Reference had been made in the report to South West Lincolnshire Clinical Commissioning Group, United Lincolnshire Hospitals NHS Trust and Lincolnshire Community Health Services NHS Trust working together to explore an interim urgent care service at Grantham Hospital. It was clarified that interim services would be developed in readiness for the winter period. This plan for interim provision was a separate issue to any plans for longer term urgent care and A&E service at Grantham Hospital.

Engagement was continuing with a wide range of stakeholders on issues within the STP. Formal consultation, usually no fewer than thirteen weeks in length, would be taking place on significant service reconfigurations. An issue was raised with regard to engagement with district councils and parish councils and it was agreed that this would be considered further. The STP Programme Team would be prepared to meet with any organisation or group, should they wish to receive a briefing on the STP.

The Board noted that the progress with the development of the STP and looked forward to further reports at each meeting.

RESOLVED

That the progress made with the Sustainability and Transformation Partnership in the last three months be noted.

16f Better Care Fund (BCF)

Consideration was given to a report by Glen Garrod (Executive Director of Adult Care and Community Wellbeing), which provided an update on the Lincolnshire's Better Care Fund (BCF) plans. This incorporated an update on the presentation of the BCF Narrative Plan and the related planning templates. Updates were also provided on the Lincolnshire Graduation bid; the improved BCF funding made available for 2017/18; and performance.

The Executive Director of Adult Care and Community Wellbeing advised the Board that David Laws (Adult Care Strategic Financial Adviser) would shortly be retiring from Lincolnshire County Council. The Executive Director took the opportunity to express his gratitude towards David for his hard work in recent years on the BCF, both locally and nationally. The Chairman of the Board also took the opportunity to thank David for his work on the Board, particularly on the BCF.

The Board was advised that the Lincolnshire BCF Narrative Plan and related planning template had been submitted to NHS England on 11 September 2017. The key milestones beyond the submission date were detailed on page 58 of the agenda pack.

The key financial elements of the plan were also detailed on page 58 of the agenda pack and detailed information on the key performance elements of the BCF Plan were detailed at Appendix A to report, the Lincolnshire BCF Narrative Plan 2017-2019.

The Board was advised that Lincolnshire's bid for Graduation had been submitted in May 2017 and was currently on a shortlist awaiting a final decision. The benefits of being a 'graduation pilot' were still being determined at a national level, though proposed benefits could include a reduction in bureaucracy and the need to report to (and be reviewed by) central government.

RESOLVED

- (1) That the Better Care Fund Update be noted.
- (2) That the Lincolnshire Better Care Fund Narrative Plan 2017-2019, as detailed at Appendix A, be approved.

17 DECISION/AUTHORISATION ITEMS17a Development of the Joint Health and Wellbeing Strategy for Lincolnshire

Consideration was given to a report by David Stacey (Programme Manager, Strategy and Performance), which invited the Board to discuss and agree the priorities for further development into the next Joint Health and Wellbeing Strategy for Lincolnshire.

The Board was reminded that it was a statutory duty under the Health and Social Care Act 2012 for the Local Authority and each of its partner clinical commissioning groups to produce a Joint Health and Wellbeing Strategy (JHWS) for meeting the needs identified in the Joint Strategic Needs Assessment (JSNA).

Currently the JHWS produced by the Health and Wellbeing Board for Lincolnshire was due to end in 2018 and in March 2017, the Board had agreed an approach to developing the next JHWS for Lincolnshire.

The approach had included a series of stages of engagement with the aim of the Board:

- Identifying what the Board felt the priorities for the next JHWS should be (utilising a previously agreed prioritisation framework);
- Understanding the views of people who live and work in Lincolnshire;
- Enabling the Health Scrutiny Committee for Lincolnshire to have an opportunity to feed their views into the process;
- Ensuring that groups representing the views of people with protected characteristics (as defined by the Equality Act 2010) had their voice heard as part of developing the next JHWS for Lincolnshire.

In order to achieve the above, an engagement plan for identifying the possible priorities for the next JHWS was developed and was detailed on page 113 of the agenda pack.

The engagement on the prioritisation of the JSNA to inform the development of the next JHWS for Lincolnshire had been extensive in seeking and obtaining the views of over 400 people directly representing over 100 organisations and groups across the county as well as individual members of the public. A full analysis report on the outcome of the engagement was detailed at Appendix A to the report.

The Board was advised that there was a high degree of commonality across the different engagement stages and in summary, the overall emerging priorities which had been identified from the engagement, were as follows: -

- Mental Health – both Adults and Children/Young People;
- Housing;
- Carers;
- Physical Activity;

- Dementia; and
- Obesity.

The Board was provided with an opportunity to ask questions, where the following points were noted: -

- A Member of the Board suggested that the two emerging priorities on *physical activity* and *obesity* could be merged into one. In response, the Board was advised of the differences between the two emerging priorities;
- It was suggested that as part of the emerging priority on *housing* that youth housing was also included;
- It was emphasised that the emerging priority on *Mental Health – both Adults and Children/Young People* was one of importance and should be taken forward as a priority.

RESOLVED

- (1) That the evaluation report detailing the engagement on the next Joint Health and Wellbeing Strategy for Lincolnshire be received.
- (2) That the following priorities be approved for further development as part of the Joint Health and Wellbeing Strategy for Lincolnshire, subject to the inclusion of the comments of the members of the Board set out above: -
 - Mental Health – both Adults and Children/Young People;
 - Housing;
 - Carers;
 - Physical Activity;
 - Dementia; and
 - Obesity.
- (3) That the members of the Health and Wellbeing Board who would lead on the further development and drafting of the Joint Health and Wellbeing Strategy for Lincolnshire be allocated at a later date.

17b Health and Wellbeing Grant Fund - Allocation of Remaining Funds

A report by Tony McGinty (Interim Director of Public Health) was considered, which sought approval from the Board to agree recommendations from the Health and Wellbeing Grant Fund Sub Group to allocate the remaining uncommitted money in the Health and Wellbeing Grant Fund to the four Clinical Commissioning Groups (CCGs).

The Board was reminded that the Health and Wellbeing Grant Fund had been established in 2008 as a time limited fund to pilot projects and initiatives to help improve health and wellbeing in Lincolnshire. The Health and Social Care Act 2012 had led to the transfer of the Public Health service to the local authority, which had resulted in the fund continuing longer than anticipated. Despite allocating the bulk of

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the funds in 2015, a number of projects had failed to start or had completed without using all the funds allocated to them. As a result, there remained a balance of £369,016.50 within the fund.

The recommendation from the Health and Wellbeing Fund Sub Group was for all remaining unallocated funds to be transferred to the four CCGs to support the development of neighbourhood working, with a particular focus on building resilience in the infrastructure of the Voluntary and Community Sector to enable high quality multi-agency cooperation.

The Board was advised that the funding would not be used to buy new services but to help signpost individuals to current service provision. It was suggested that the Board received an update on the progress made with the usage of the funding in six months.

RESOLVED

- (1) That the recommendation from the Health and Wellbeing Fund Sub Group to allocate all remaining uncommitted money in the Health and Wellbeing Grant Fund to the four Clinical Commissioning Groups be approved.
- (2) That the proposal for the four Clinical Commissioning Groups to use the funds to develop neighbourhood working with a specific focus on building resilience in the Voluntary and Community Sector be approved.
- (3) That approval be given for the monitoring of the projects to be carried out through existing reporting mechanisms for the development of neighbourhood working.
- (4) That an update on the projects be provided to the Health and Wellbeing Board in six months.

18 INFORMATION ITEMS**18a Joint Health and Wellbeing Strategy (JHWS) 2013-2018 - Annual Dashboard Reports**

An information report was presented by Tony McGinty (Interim Director of Public Health), which provided information on the Joint Health and Wellbeing Scorecard and Theme dashboards.

In response to a question, the Board was advised that in terms of increasing physical activity, the overall level of funding had limited effect, as changes in cultural habits were more influential in increasing the levels of physical activity. However, there was a relationship between the level of smoking cessation services available and actual reductions in smoking. More targeted activity would be required to reach the persistent smokers in Lincolnshire.

RESOLVED

That the report be for information be received.

18b An Action Log of Previous Decisions

A report as received which noted the decisions taken since June 2017.

It was requested that an item on *ACTion Lincs*, be added to the Forward Plan for a future meeting of the Health and Wellbeing Board. It was highlighted that *ACTion Lincs* was a county-wide partnership, which had been set up to provide life-changing support and tackle some of the most complex homelessness cases in Lincolnshire.

RESOLVED

- (1) That the report for information be received.
- (2) That an item on *ACTion Lincs* be added to the Forward Plan for a future meeting.

18c Lincolnshire Health and Wellbeing Board Forward Plan

An updated version of Health and Wellbeing Board Forward Plan was tabled at the meeting, which provided the Board with an opportunity to discuss items for future meetings which would, subsequently, be included on the Forward Plan.

It was requested that an item on the *Role of District Councils in Health and Wellbeing* be added to the Forward Plan for consideration at a future meeting.

RESOLVED

- (1) That the report for information be received.
- (2) That an item on the *Role of District Councils in Health and Wellbeing* be added to the Forward Plan.

The meeting closed at 4.05 pm.

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