Lancashire Health and Wellbeing Board

Minutes of the Meeting held on Wednesday, 16th July, 2014 at 2.00 pm in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston

Present:

Chair

County Councillor A Ali, Cabinet Member for Health And Wellbeing (LCC)

Committee Members

County Councillor D Whipp, Lancashire County Council

Dr S Karunanithi, Director of Public Health, Public Health Lancashire

Dr A Bowman, Greater Preston Clinical Commissioning Group (CCG)

Dr S Frampton, West Lancashire Clinical Commissioning Group (CCG)

Dr G Bangi, Chorley and South Ribble CCG

Dr P Benett, Fylde and Wyre Clinical Commissioning Group (CCG)

Dr M Ions, East Lancashire Clinical Commissioning Group (CCG)

Mrs G Stanley, Chairperson of Healthwatch

Councillor B Hilton, Central Lancashire District Councils

Councillor C Little, Fylde Coast District Councils

Councillor T Harrison, Burnley Borough Council

Ms L Norris, Lancashire District Councils (Preston City Council)

Canon M Wedgeworth, Chair Third Sector Lancashire

Professor H Tierney-Moore, Provider (Clinical State) - Chief Executive of Lancashire Care Foundation Trust

1. Appointment of Chair

Resolved: That in accordance with the Terms of Reference County Councillor Ali, as the Cabinet Member for Health and Wellbeing, is appointed as the Chair for the remainder of the 2014/15 municipal year.

2. Appointment of Deputy Chair

Resolved: That Dr A Bowman is appointed as the Deputy Chair of the Board for the remainder of the 2014/15 municipal year.

3. Membership and Terms of Reference of the Board

A report was presented in connection with the membership and Terms of Reference of the Board.

In considering the report the Board noted that after the agenda had been circulated the Lancashire Leaders Group had appointed Councillor T Harrison as the representative of East Lancashire authorities in place of Councillor J Cooper. It was also noted that Mr D

Tomlinson was no longer the reserve representative for the Lancashire Care Foundation Trust.

Resolved: That the amended membership of the Health and Wellbeing Board, as set out below, is noted and a copy of the current Terms of Reference set out in Minute Book.

Cabinet Member for Health and	County Councillor A Ali
Wellbeing	County Councillor A All
Cabinet Member for Children, Young	County Councillor M Tomlinson
People and Schools	
Cabinet Member for Adult and	County Councillor T Martin
Community Services	
Fourth County Councillor	County Councillor D Whipp
Representative	
Director of Public Health (LCC)	Dr S Karunanithi
Executive Director for Adult Services,	Mr S Gross
Health and Wellbeing (LCC)	
Interim Executive Director for Children	Ms L Taylor
and Young People (LCC)	
6 Clinical Commissioning Group	Dr A Bowman (Greater Preston)
Network Members	Dr S Frampton (West Lancashire)
	Dr G Bangi (Chorley & South Ribble)
	Dr P Benett (Fylde & Wyre)
	Dr M Ions (East Lancashire)
	Dr D Wrigley (North Lancashire)
Director of Lancashire Area Team	Mr R Jones
(National Commissioning Board)	11.000
Chairperson of Healthwatch	Mrs G Stanley
3 District Councillors (appointed by the	Cllr B Hilton (Central Lancashire)
Lancashire Leaders Group for Central,	Cllr T Harrison (East Lancashire)
East and Fylde Coast)	Cllr C Little (Fylde Coast)
1 District Chief Executive (nominated by	Ms L Norris (Preston City Council)
the Lancashire Chief Executives Group) Third Sector Representative (nominated	Canon M Wedgeworth, Chair of Third Sector
by One Lancashire)	Lancashire
Providers	Mrs K Partington, Chief Executive of
1 TOVIDOIS	Lancashire Teaching Hospitals Foundation
	Trust
	Professor H Tierney-Moore, Chief
	Executive of Lancashire Care Foundation
	Trust

4. Apologies

At the meeting apologies for absence were presented on behalf of County Councillor T Martin, County Councillor M Tomlinson, Mr S Gross, Ms L Taylor, Mr R Jones and

Councillor M Khan (observer from Blackburn with Darwen Borough Council). Apologies were also subsequently received from Dr D Wrigley.

5. Disclosure of Pecuniary and Non-Pecuniary Interests

There were no disclosures of interest in relation to items appearing on the agenda.

6. Minutes of the Last Meeting.

The Chair informed the meeting that Councillor Little had attended a training programme in relation to health improvement as part of the Championing Health and Wellbeing in Your Community Programme and had achieved a Level 2 Award in Understanding Health Improvement. The Chair congratulated Councillor Little on behalf of the Board and presented her with a certificate.

Resolved: That the Minutes of the meeting held on the 29th April 2014 are confirmed as an accurate record and signed by the Chair.

7. Health and Wellbeing Strategy progress report.

The Board received an update from the Joint Officer Group (JOG) on the Health and Wellbeing Strategy. Key actions for the three programmes of work within the Strategy (Starting Well, Living Well and Ageing Well) were presented for discussion.

Starting Well

It was reported that though the Lancashire Safeguarding Children Board and Lancashire Children and Young Peoples Trust significant progress had been made in relation to delivering improved outcomes for children and young people. It was noted that the framework and priorities for this delivery were contained within the Children and Young Peoples Plan which had recently been refreshed and agreed by all sectors working with children and young people.

In view of the above it was agreed that the Board should endorse the Children and Young Peoples Plan and adopt it as the Starting Well element of the Health and Wellbeing Strategy. It was also agreed that the Board would support activity to strengthen links and alignment between locality Health and Wellbeing Partnerships and the children and young people partnerships as they develop.

Living Well

It was reported that factors such as income, employment and the living/work environment all contributed to people's health and wellbeing and that addressing inequalities in these areas would minimise health inequalities in a sustainable way.

A range of organisations, including District Councils, registered social landlords and social care services work together to provide affordable, suitable, safe and secure housing. A

programme of work is being developed to engage more effectively with registered social landlords since they often own housing stock in more deprived areas, providing an opportunity to contribute resources, assets, access and intelligence for the benefit of tenants, the wider local community and other partners. It was also suggested that housing authorities consider the use of selective licensing schemes as another way of improving housing standards, particularly in the private rented sector.

Ageing Well

It was reported that as the proportion of the Lancashire population aged 65 and older continued to increase the challenge for health and social care services was to support people to enjoy healthy and fulfilling lives. When discussing the proposed breakthrough actions it was recognised that some of the proposals were more aspirational than others and it was agreed that any aspirations should also be achievable.

The Six Shifts

It was reported that as part of the development of the Strategy a Joint Strategic Needs Assessment approach would be adopted in relation to each of the identified six shifts. The Board was informed that Mr Jones from NHS England had agreed to be the project sponsor and Lead Officers had now been identified for five out of the six shifts. With regard to the remaining Lead Officer position it was suggested that the CCGs be asked to nominate a representative for the role.

It was noted that a consultation and shaping event which would be hosted by the Board was planned for the September and further details regarding arrangements would be circulated in due course.

Equality Analysis

It was noted that the Health and Wellbeing Strategy had been the subject of an Equality Impact Analysis.

In response to a query it was reported that whilst it would be for local Health and Wellbeing Partnerships to implement many of the initiatives within the Strategy the Board would retain overall responsibility for it.

Resolved:

- 1. That the updated narrative and the Outcomes Framework Dashboard, as set out in the report presented, are approved.
- 2. That in relation to the Starting Well programme within the Health and Wellbeing Strategy the Board:
 - a) Endorse the Children and Young People's Plan and adopt the Plan as the Starting Well strand within the Strategy with the Childrens and Young Peoples Trust to be accountable to the Board for delivery of the Plan.

- b) Agree to support activity to strengthen links and alignment between local Health and Wellbeing Partnership structures and those partnerships developed to support the children and young people's agenda.
- c) Commit to the development and agreement of a formal arrangement that defines the relationship and working between key strategic partnerships in Lancashire such as the Board, Community Safety, Children's Safeguarding Board, Adult Safeguarding Board and the Children and Young People's Trust.
- 3. That with regard to the Living Well programme within the Health and Wellbeing Strategy the Board agree:
 - a) To the development of a work programme with registered social landlords in order to address health inequalities.
 - b) That all partner organisations be recommended to maximise the opportunities for workstart and apprenticeships in order to improve the chances of individuals gaining high quality sustainable work in the longer term.
 - c) To the development of a multiagency coordinated work programme to address premature mortality and improve the uptake of services and health outcomes in Lancashire.
 - d) That housing authorities (District Councils) be requested to consider opportunities for the use of selective licensing arrangements to improve the quality of privately rented housing; working with the local health and wellbeing partnership as appropriate.
- 4. That in relation to the Ageing Well programme within the Health and Wellbeing Strategy the Board agree:
 - a) That partners routinely come together at both a population, neighbourhood and GP practice level and use a range of risk assessment tools (both in relation to health conditions and well-being indicators) to identify those people at current and future risk of adverse impacts on their health and well-being.
 - b) That for all areas of Lancashire older people should have robust access to people who can connect/navigate/support them to `the information and advice, community networks, and voluntary, community and faith sector assets which provide the support they need. Although time limited and designed to support rather than create dependence, the support would follow up and check the differences made to enhanced quality of life.
 - c) To do as much as possible to remove the barriers to everyday living that people with dementia and their carers face in order that Lancashire can be declared a Dementia Friendly County.

- d) To work towards Lancashire being a place where social isolation/loneliness will no longer exist.
- 5. That the update in relation to the identification of five Lead Officers for the six shifts, together with governance structure and timeline set out in the report, are noted and that CCGs be asked to nominate a representative for the remaining Lead Officer position.
- 6. That the Equality Impact Analysis of the draft Health and Wellbeing Strategy is noted.

8. Healthwatch Lancashire - Annual Report 2013/14

Mrs Stanley, Chair of Healthwatch Lancashire, presented the Annual Report for 2013/14 and informed the meeting of a number of developments which would be taken forward during the coming year, including:

- The appointment of a new Chief Executive and an increase in the membership of the Healthwatch Lancashire Board from 9 to 11 members.
- Improved marketing of Healthwatch Lancashire through investment in IT and the
 creation of a web based presence which would enable the organisation to reach a
 more significant percentage of the population. A series of community meetings were
 also planned as a way of contacting those people who may not have access to IT.
- It was planned to recruit and train at least 100 volunteers by the end of 2014/15
- The establishment of three project groups based around Old Age, Mental Health, Physical Disability which would engage with partner organisations such as the CCGs and Acute Trusts.

With regard to the proposed approach to marketing it was suggested that action should also be taken to publicise the organisation through the local press and Mrs Stanley confirmed that whilst links with the press had been established further work was needed in relation to generating interest in potential news items.

On behalf of the Board the Chair thanked Mrs Stanley for the report and congratulated all those who had been involved in establishing Healthwatch Lancashire during its first year of operation.

Resolved: That the Healthwatch Lancashire Annual Report for 2013/14 is noted.

9. Update on the Health and Wellbeing Partnerships

The Deputy Chair informed the meeting that there was general agreement that the Health and Wellbeing Board needed to empower and provide clear directions to local Health and Wellbeing Partnerships in relation to the implementation of aspects of the Health and Wellbeing Strategy. As mentioned earlier in the meeting while the Partnerships would take

a leadership role locally in accordance with the Strategy the Board would maintain its statutory responsibility and strategic overview regarding health and wellbeing outcomes across Lancashire. In the future the Board would adopt a similar approach to the one used in relation to the Better Care Fund and would look to feedback from the Health and Wellbeing Partnerships before signing the local plans.

It was recognised that in Lancashire the relationships involved in connection with the Health and Wellbeing Strategy were complex and so it was suggested that the Local Government Association be requested to conduct a peer review in order to gain knowledge/experience and identify examples of best practice from elsewhere.

Resolved:

- That the Local Government Association be requested to conduct a peer review in relation to the proposed course of action to implement the Lancashire Health and Wellbeing Strategy.
- 2. That feedback from local Health and Wellbeing Partnerships be taken into account when finalising local plans before submission to the Board for approval.

10. Update on Clinical Commissioning Groups 5 year strategic plans

The Deputy Chair informed the meeting that the Clinical Commissioning Groups (CCGs) had developed initial 5 year strategic plans which had been presented for consideration at an event hosted by the Board. Feedback had been provided to individual CCGs on the plans which would continue to be developed and be subject to further consultation.

In response to a query regarding CCG Governing Bodies the Deputy Chair confirmed that meetings were open to the public and the agenda/minutes were available via the Internet.

Resolved:

- 1. That the update on the development of CCG five year strategic plans is noted.
- 2. That details regarding future arrangements for meetings of individual CCG Governing Bodies are circulated to the members of the Board for information.

11. Proposed Protocol between Lancashire Safeguarding Children Board and Lancashire Health and Wellbeing Board

A report was presented regarding a proposed protocol between the Health and Wellbeing Board and the Lancashire Safeguarding Children Board which would provide a framework for the relationship between the two Boards and support the delivery of their respective strategic responsibilities.

Resolved: That implementation of the protocol with the Lancashire Safeguarding Children Board, as set out in the report presented, is approved.

12. The Lancashire Fairness Commission

The Chair presented a report in connection with the decision of the County Council to establish a Fairness Commission to provide an independent perspective on equality in Lancashire and make recommendations to increase equality to the authority and its partners.

It was noted that the Cabinet had agreed to establish a Fairness Commission as set out in the report and the Chair informed the meeting of the 21 representatives who had subsequently been appointed by partner organisations to serve on the Commission. A copy of the membership of the Commission is set out in the Minute Book.

It was acknowledged that future recommendations from the Fairness Commission would have implications for the Board in tackling health inequalities.

Resolved: That the report is noted and the Board actively support the work of the Lancashire Fairness Commission in the future.

13. The Tobacco Control Strategy for Lancashire 2014-2016

A detailed report was presented in connection with the Tobacco Control Strategy for Lancashire 2014/16 and one of its key priority areas – tackling smoking during pregnancy.

It was noted that one of the core aims of the Strategy was to help tobacco users quit and the Tobacco Free Lancashire partnership would continue to support the commissioning and development of specialist stop smoking services to assist adults and young people achieve this. However, it was recognised that this support was only a small element of a comprehensive programme aimed at encouraging people to be tobacco free which included government taxation, use of plain packaging and legislation prohibiting smoking in specified places.

The health implications of the growth in the use of Electronic cigarettes (E-cigarettes) was discussed and it was noted that the Strategy did include initiatives regarding the devices. It was also reported that there was currently no national consensus regarding use of E-cigarettes though the Medicines and Healthcare Products Regulatory Agency was to introduce regulations in 2016 regarding use of some E-cigarette products to support attempts to stop smoking.

Resolved: That the Board approve the Tobacco Control Strategy for Lancashire 2014/16 and the associated Tackling Smoking in Pregnancy Action Plan as set out in the report presented and implement them within commissioning plans where appropriate.

14. Acute Trusts update.

The Chair informed the meeting that Acute Trusts in Lancashire had been asked to provide details of their savings plans for the next 12 months which would then be referred to the County Councils Health Scrutiny Committee to examine in detail. In response to a

query the Chair confirmed that District Councils would be informed when the Scrutiny Committee was due to scrutinise hospitals in their area.

Resolved:

- 1. That the report is noted.
- 2. That a report on the findings of the Health Scrutiny Committee is presented to a future meeting of the Board.

15. Urgent Business

There were no items of urgent business for discussion at the meeting.

16. Date of Next Meeting

It was noted that the next scheduled meeting of the Board would be held at 2.00pm on the 16th October 2014 in Cabinet Room 'C'- The Duke of Lancaster Room at County Hall, Preston.

I Young County Secretary and Solicitor

County Hall Preston