

Lancashire Health and Wellbeing Board

Minutes of the Meeting held on Tuesday, 19th March, 2019 at 10.00 am in Committee Room 'C' - The Duke of Lancaster Room, County Hall, Preston

Present:

Chair

County Councillor Shaun Turner, Lancashire County Council

Committee Members

County Councillor Graham Gooch, Lancashire County Council
County Councillor Geoff Driver CBE, Lancashire County Council
Dr Sakthi Karunanithi, Director of Public Health, LCC
Louise Taylor, Executive Director of Adult Services and Health and Wellbeing
Sally Allen, Director of Children's Social Care, Children's Services
Dr John Caine, West Lancashire CCG
Jerry Hawker, Morecambe Bay CCG
Kirsty Hollis, East Lancashire CCG
Gary Hall, Chief Executive, Chorley Council representing CEOs of Lancashire District Councils
Jane Booth, Independent Chair, Lancashire Safeguarding Children's Board and Adult Board
Councillor Bridget Hilton, Central District Council
Councillor Amanda Robertson, East Lancashire District Council
Councillor Margaret France, Central HWBP
Tammy Bradley, Housing Providers
Ben Norman, Lancashire Fire and Rescue
Peter Tinson, Fylde and Wyre CCG
Denis Gizzi, Chorley and South Ribble CCG and Greater Preston CCG
Suzanne Lodge, North Lancashire Health & Wellbeing Partnership
David Blacklock, Healthwatch
Sam Gorton, Democratic Services, Lancashire County Council

Apologies

County Councillor Mrs Susie Charles	Lancashire County Council
Karen Partington	Chief Executive of Lancashire Teaching Hospitals Foundation Trust
Cllr Viv Willder	Fylde Coast District Council
Adrian Leather	Third Sector Representative

1. Welcome, introductions and apologies

The Chair welcomed all to the meeting.

Apologies were noted as above.

There was a new member of the Board, Suzanne Lodge who will replace Jacqui Thompson and represent North Lancashire Health and Wellbeing Partnership going forward.

Replacements were as follows:

Ben Norman for David Russel, Lancashire Fire and Rescue Service
Denis Gizzi for Dr Sumantra Mukerji, Greater Preston Clinical Commissioning Group and Dr Gora Bangi, Chorley and South Ribble Clinical Commissioning Group.
Kirsty Hollis for Dr Julie Higgins, East Lancashire Clinical Commissioning Group
Councillor Amanda Robertson for Councillor Barbara Ashworth, East Lancashire District Councils
Sally Allen for Edwina Grant OBE, Lancashire County Council
Jerry Hawker for Dr Geoff Joliffe, Morecambe Bay Clinical Commissioning Group

2. Disclosure of Pecuniary and Non-Pecuniary Interests

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

3. Minutes of the Last Meeting

Resolved: That the Board agreed the minutes of the last meeting.

4. Action Sheet and Forward Plan

- Resolved:**
- i) That the Board noted the actions from the last meeting that had been included on the forward plan, along with other items for the Board's consideration at future meetings also detailed on the plan.
 - ii) The Board were also reminded that if there were any key items for future agendas to inform Dr Sakthi Karunanithi or Sam Gorton and they would ensure they were added to the forward plan and discussed at future agenda setting meetings with the Chair.

5. Advancing Integration - Health and Social Care

Lancashire Intermediate Care Review

Dr Jo Andrews and Becky Taylor from Carnall Farrar attended the meeting to give an overview on the Lancashire intermediate care review.

The Board were given an overview on how intermediate care played an important role in the care of people and was an essential part of avoiding hospital admissions and allowing people to leave hospital as quickly as was appropriate. Care in the community was around understanding the health and care needs of a population along with proactive care and support to avoid admissions to hospital.

With regards to adults 65+ years across Lancashire, there was a lot of variation and complexity where intermediate care services were diverse, with many different services available in different areas, with different names and different inclusion or exclusion criteria. The volume of activity being delivered was variable, and there was a different distribution of types of service user by geography.

The aim of the review was to determine the optimum provision of the service to do everything possible to keep a person at home and design services to meet the needs of the population/carers, to maximise their independence and improve their outcomes and experience. It was also to reassure the taxpayer that the funding of intermediate care was responsible and appropriate.

A new care model for intermediate care across Lancashire would be developed and agreed through two clinical and professional group workshops and would inform the current understanding of current models. The workstream would develop a common definition and principles of intermediate care, define the scope and services included, the criteria, the outcomes, the pathways and interaction with other services and governance.

A demand, capacity and financial model would also be developed to underpin the new intermediate care clinical model. The model would understand current demand, capacity and costs of intermediate care by neighbourhood area and project demand based on demographic and non-demographic growth. It would use the area model developed to project demand, capacity and costs of intermediate care and assess potential future funding and provision options.

Based on the outputs of the care model design and the demand, capacity and financial modelling, the review would facilitate alignment on the future intermediate care model and governance between system leaders through a system leadership workshop.

The final report and recommendations were to be developed by 31 March 2019.

Based on the views from the Clinical and Professional Group a set of design principles for intermediate care had been developed.

Findings were starting to emerge with regards the level of contribution from intermediate services and opportunities to shift from hospital based to community based, however, there still appeared to be a gap in home based and bed based services.

Dr Jo Andrews and Becky Taylor were thanked for their report.

Better Care Fund – Quarter 3 Report

Paul Robinson, NHS Midlands and Lancashire Commissioning Support updated the Board on the Quarter 3 Better Care Fund report and gave an update on progress.

Better Care Fund Metrics

1. Reablement – performance was better than target at 86.3% of people being at home 91 days after discharge from hospital. Use of the service saw a slight decrease for the first time.

2. Permanent admissions to residential and Nursery Care – there had been a further improvement in Quarter 3 over Quarter 2 with the number of admissions in the year to date reducing to 709.3 per 100,000 population 65+. However, this remained considerably worse than the national average rate of 585.6.
3. Non-elective admissions – there was a sharp increase in Quarter 3, 11% above plan with 2018/19 levels staying higher than 2017/18.
4. Delayed Transfers of Care – while Quarter 3 performance was worse than target and worse than Quarter 2 there was some improvement seen in December 2018 although still above target.

The Future of the Better Care Fund/Integration

The outputs and conclusions reached from a Better Care Fund hosted workshop being held on 22 March 2019 would be brought back to the Board for further discussion, guidance and to agree actions. These would be set in context of the national review of the Better Care Fund and the Better Care Fund Policy Framework and Guidance for 2019/20 once published.

The Board noted that there was some variation around data for Fylde and Wyre and Paul Robinson was clarifying this and would report back to the Board at a future meeting.

The Board agreed that the language used needed to be different as the public did not understand it and this was crucial going forward.

The focus was to get people out of hospital, however the focus should also be on helping people to stay out of hospital.

Resolved: That the Health and Wellbeing Board was recommended to:

- i) Note the performance against the Better Care Fund metrics.
- ii) Note the ongoing work to review and confirm the role of the Better Care Fund locally and nationally in the context of driving integration forward.
- iii) That Fylde and Wyre data would be clarified and reported back at a future meeting.

6. Children and Young Peoples Emotional Wellbeing and Mental Health Programme

Dave Carr, Information and Commissioning (Start Well), Lancashire County Council, Rachel Snow-Miller, All Age Mental Health and Learning Disability Services, Lancashire and South Cumbria Integrated Care System, Claire Niebieski, Blackpool Clinical Commissioning Group/Blackpool Council and Marie Dermaine, Health Equity, Welfare and Partnerships, Lancashire County Council were welcomed to the meeting to present the report.

The report provided an update which related to the Lancashire Children and Young People's Emotional Wellbeing and Mental Health Transformation Programme. The presentation (as attached) highlighted performance to date, the role of Primary Mental Health Workers and the delivery of Youth Mental Health First Aid Training in schools, the Lancashire 'Emotional Support to Schools' Service and the revised mandate for delivery of the Complimentary Offer across Lancashire and South Cumbria. An update was also received on the funding of mental health provision for children and young people.

Following the last report to the Health and Wellbeing Board in November 2018, there had been specific focus on undertaking a full review and refresh of the Lancashire Transformation Plan. In late 2018, it was endorsed that the Transformation Plan would now reflect the wider Integrated Care System geography bringing Lancashire and South Cumbria together as partners. A Lancashire and South Cumbria Transformation Plan would be delivered as of 1 April 2019.

It was reported that in Lancashire 26 secondary schools had completed the Youth Mental Health First Aid one day course with Mental Health First Aid England and 12 more courses were to be delivered by the end of March 2019. 99% of participants reported an improvement in their personal confidence, knowledge and understanding of how best to support others with a mental health issue following the course.

The Emotional Health and Wellbeing Service was a commissioned service providing support for children, young people and families with low level emotional health and wellbeing needs at levels 2, 3 and 4 of the continuum of need. Access to the service was through a referral to the Lancashire County Council Children and Family Wellbeing Service and delivered countywide by the Child Action North West Partnership.

The Complimentary Offer is support for vulnerable people who do not access mainstream services to wrap around children and young people and families to avoid escalation, recover earlier and maintain wellbeing supporting the model for NHS funded Children and Young People's Emotional Wellbeing and Mental Health Services across Lancashire and South Cumbria.

An issue for the Board was around mobilising and tackling whole system funding and on the data and targets that were presented, how that was being monitored by the programme. It was stated that the plan of tackling the whole system funding was not just the NHS but the whole system and that needed to be defined as to who was the whole system. The Complimentary Offer is huge and would be delivered in bite size chunks and target what was going to have the most impact in schools and early years settings. Work will be carried out with community neighbourhoods and this would help to develop the journey of the child through pathways. It was agreed that the Board needed to monitor through its meetings, which Clinical Commissioning Groups were not funding enough. The Board needed to work together with partners around the table.

Resolved: That the Health and Wellbeing Board noted the report.

7. Lancashire Special Educational Needs and Disabilities (SEND) Partnership

Sian Rees, Special Educational Needs and Disabilities Team, Lancashire County Council reported on the progress following the inspection by Ofsted and Care Quality Commission in November 2017 to judge how effectively the special educational needs and disability reforms had been implemented, as set out in the Children and Families Act 2014. The inspection identified two fundamental failings and twelve areas of significant concern.

The partners in Lancashire were required to produce a Written Statement of Action, setting out the immediate priorities for action; the progress on implementing these actions had been closely monitored by the Department for Education and NHS England.

Since the last report to the Board meeting in January 2019, work had continued to progress outstanding and ongoing actions, of which many were now completed. A Special Educational Needs and Disabilities Partnership Improvement Plan would replace the action plan from January 2019 – December 2020.

The draft plan was being considered across the partnership between 29 January and 22 February 2019, following which a revised plan would be presented to the Special Educational Needs and Disabilities Partnership Board for their consideration and approval at their next meeting on 1 April 2019. Work to implement the draft plan had already been taking place, to ensure continued momentum.

A revisit was expected by October 2019 and preparation for that had already commenced and the purpose of the visit was to assess the plan against the 12 areas of significant concern and where there were still risks.

Resolved: That the Health and Wellbeing Board:

- i) Received the update on progress as presented to the Department for Education and NHS England on 18 December 2018.
- ii) Received and considered the current position on the implementation of the Written Statement of Action.
- iii) Received the Special Educational Needs and Disabilities Improvement Plan at their next meeting noting that this would continue to drive forward improvement over the next two years.

8. Future Children Safeguarding Board Arrangements; and Update on Activity to Address Key Issues Raised by Current Safeguarding Boards

Sally Allen, Children's Social Care, Education and Children's Services, Lancashire County Council presented the report which was also being presented to the three Lancashire Councils and where necessary, the Executive bodies of the Clinical Commissioning Groups and the Police which set out the recommended option for the replacement of the Local Safeguarding Children's Board to comply with the new area children's safeguarding arrangements.

It was noted that this was really positive and had definite advantages to having a single framework – single approach to safeguarding children and young people.

Partners were currently recruiting a new chair and County Councillor Shaun Turner, thanked Jane Booth for her contributions to the Health and Wellbeing Board and also to the Safeguarding Boards.

Resolved: That the Health and Wellbeing recommended to endorse the approach being taken in option one as set out in the report.

9. West Lancashire Integrated Community Partnership

Dr John Caine, West Lancashire Clinical Commissioning Group updated the Board on the emerging proposals and priorities for integrating health and social care across West Lancashire via the establishment of an Integrated Community Partnership. The report recommended endorsement of the overall approach and the establishment of the West Lancashire Integrated Care Partnership.

West Lancashire was the area within the district council boundaries defined by West Lancashire Borough Council. In terms of the relatively distinct communities that made up the West Lancashire area there were three neighbourhoods namely:

- Northern Parishes (including Tarleton, Hesketh Bank, Banks and Rufford)
- Ormskirk
- Skelmersdale

The approach to health and care integration in West Lancashire was building on the established clinical strategy for West Lancashire contained in Building for the Future. In advance of publication of that document, significant public engagement and consultation was undertaken to establish people's views and experiences of community health services. Key headlines from the engagement was included in the report attached to the agenda.

An option for further alignment of budgets could be pooled budgets and accompanying section 75 arrangements for identified public health budgets. This was something that was consistent with local priorities. The West Lancashire Integrated Community Partnership had indicated that it would welcome an early opportunity to explore this with the county council.

Resolved: That the Health and Wellbeing Board was recommended to:

- i) Endorse the West Lancashire Integrated Community Partnership's overall approach to health and care integration in West Lancashire on the basis that it would also take into account and ensure delivery of the emerging priorities of the Lancashire and South Cumbria Integrated Care System.
- ii) Agree any further requirements, aspirations or expectations which it wished to be communicated on behalf of the Health and Wellbeing Board to the West Lancashire Integrated Community Partnership regarding the integration of health and social care.

10. Lancashire County Council Consultation Update

Dr Sakthi Karunanithi, Public Health, Lancashire County Council informed the Board that the Council was currently undertaking a range of public and stakeholder budget consultations, which had potential implications for a number of services commissioned by the Council's Public Health and Wellbeing Team.

Consultations were still live and the Board were invited to submit their consultations if they had not already done so.

Resolved: That the members of the Health and Wellbeing Board are to note the report and participate in the consultations.

11. Urgent Business

There were no items of urgent business received.

12. Date of Next Meeting

The next scheduled meeting of the Board would be held at 10am on 21 May 2019 in Committee Room 'C' – Duke of Lancaster Room at County Hall, Preston.

L Sales
Director of Corporate Services

County Hall
Preston