

## **Lancashire Health and Wellbeing Board**

**Minutes of the Meeting held on Tuesday, 28th January, 2020 at 2.00 pm in  
Committee Room 'C' - The Duke of Lancaster Room, County Hall, Preston**

### **Present:**

#### **Chair**

County Councillor Shaun Turner, Lancashire County Council

#### **Committee Members**

Denis Gizzi, Chorley and South Ribble CCG and Greater Preston CCG  
County Councillor Graham Gooch, Lancashire County Council  
County Councillor Phillippa Williamson, Lancashire County Council  
Dr Sakthi Karunanithi, Public Health, Lancashire County Council  
Louise Taylor, Adult Services and Health and Wellbeing, Lancashire County Council  
Sharon Hubber, Children's Services, Lancashire County Council  
Dr John Caine, West Lancashire CCG  
Gary Hall, Lancashire Chief Executive Group  
Stephen Ashley, LCSAP, LASB  
Councillor Bridget Hilton, Central District Council  
Cllr Viv Willder, Fylde Coast District Council  
Councillor Margaret France, Central Health and Wellbeing Partnership  
David Russel, Lancashire Fire and Rescue Service  
Phil Evans, Lancashire Care Trust  
Clare Platt, Heath, Equity, Welfare and Partnerships, Lancashire County Council  
Sam Gorton, Democratic Services, Lancashire County Council

#### **Apologies**

County Councillor Geoff Driver CBE	Lancashire County Council
Stephen Young	Growth, Environment, Transport and Community Services, Lancashire County Council
Dr Geoff Jolliffe	Morecambe Bay CCG
Dr Julie Higgins	East Lancashire CCG
Suzanne Lodge	North Lancashire Health & Wellbeing Partnership
Karen Partington	Lancashire Teaching Hospitals Foundation Trust
Councillor Steve Hughes	Rosendale Borough Council
Greg Mitten	West Lancashire Health and Wellbeing Partnership
Tammy Bradley	Housing Providers
David Blacklock	Healthwatch

#### **1. Welcome, introductions and apologies**

The Chair welcomed all to the meeting.

Apologies were noted as above.

Membership changes for future meetings were as follows:

- Dr Adam Janjua replacing Peter Tinson, Fylde and Wyre Clinical Commissioning Group.
- Phil Evans replacing Joanne Moore, Lancashire Care Trust.

Replacements for the meeting were as follows:

- Denis Gizzi for Dr Gora Bangi, Chorley and South Ribble Clinical Commissioning Group and Dr Sumantra Mukerji, Greater Preston Clinical Commissioning Group.
- Sharon Hubber for Edwina Grant OBE, Lancashire County Council.

Dominic Harrison, Director of Public Health, Blackburn with Darwen Council was also in attendance at the meeting.

## **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 held on 19 November 2019**

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

## **4. Action Sheet and Forward Plan**

**Resolved:** That the Board noted the actions from the last meeting and the forward plan and that these would be discussed further at Item 5 on the agenda.

## **5. Review of Lancashire Health and Wellbeing Board**

Clare Platt, Head of Service, Health, Equity, Welfare and Partnerships, Lancashire County Council, gave a verbal update on the feedback from the recent questionnaire completed by members of the Board on the future direction of the Board.

Feedback confirmed that the role of the Board was to provide strategic leadership, co-ordination and accountability, with a work programme that partners would engage with. It also needed to ensure that the right issues came to the Board and the focus needed to be on what difference the Board was making.

Discussion ensued as to whether members felt that workshops for some of the meetings was a way forward, where 'thorny' issues that required collaborative/multi-agency responses, and also to engage with the other Lancashire Health and Wellbeing Boards to address issues of common interest such as the Integrated Care System Strategy and Delivery Plan. These workshops would also be an opportunity to build trust and explore opportunities. Board members were in agreement to hold workshops as and when necessary to discuss relevant issues.

Feedback also addressed the possibility of establishing an Executive group that would sign off the less contentious issues and progress/performance reports. It was suggested that the whole Board would receive the reports, offering the opportunity to submit any comments, to be discussed at the Executive and the report signed off.

In reviewing the way forward for the Health and Wellbeing Board, it was agreed it needed to review best practice, confirm its relationship with the Integrated Care System governance and discuss the current multi-agency issues. It also needed to minimise duplication and be clear on the items relevant for discussion.

**Resolved:** That following the feedback from discussion, Clare Platt to progress development of workshops and the Executive group.

## **6. Integrated Care System, including Population Health Priorities**

Andrew Bennett, Executive Director for Commissioning, Integrated Care System, Lancashire and South Cumbria and Dr Sakthi Karunanithi, Director of Public Health, Lancashire County Council and Gary Raphael, Executive Director of Finance and Investment, Lancashire and South Cumbria Integrated Care System gave an overview of the draft Integrated Care System Strategy.

The draft Strategy identified the Population Health Plan priorities, aimed at improving the health and wellbeing outcomes of the communities within Lancashire. A system wide approach to develop the Implementation Plan was under way, managed through the Population Health Steering Group of the Integrated Care System.

There were three main elements of the strategy:

- i) Improving the health and wellbeing of local communities.
- ii) Delivering better, joined-up care, closer to home.
- iii) Delivering safe and sustainable high quality services.

Population health was the first domain of the plan and the data was scrutinised in detail to provide the health and wellbeing outcomes across Lancashire and South Cumbria. Following this, came five key priorities which would help to improve the health of the population and to reduce health inequalities. These were:

- i) Giving the best start in life.
- ii) Healthy behaviours.
- iii) Zero suicides.
- iv) Neighbourhood development.
- v) Work and health.

It was noted that the financial element of delivering the strategy was still the biggest issue and something the system needed to work on collectively, and that a prevention approach was needed.

The next steps in March/April 2020 were to implement the plan to deliver the strategy.

**Resolved:** That the Health and Wellbeing Board:

- (i) Received, discussed and endorsed the draft Integrated Care System Strategy.
- (ii) Confirmed commitment to the Population Health Plan priorities identified in the draft strategy.
- (iii) Engaged with and supported the development of the Integrated Care System Population Health Implementation Plan.
- (iv) Endorsed the alignment of the existing population health and prevention activity across the Integrated Care System work streams and Integrated Care Partnership/Multi-speciality Community Provider plans.

## **7. Advancing Integration by Delivering the Intermediate Care Strategy**

Louise Taylor, Executive Director of Adult Services and Health and Wellbeing provided the Board with an update on the progress of work following the review of Intermediate Care in 2019.

The Better Care Fund (BCF) required the NHS and local government to create a single pooled budget and plan to incentivise closer working around people, placing their wellbeing as the focus of health and social care services, with a strong emphasis on community based services.

To date, the Better Care fund in Lancashire had been used to commission services at the interface between health and social care, including a significant amount of funding linked to short term 'intermediate care' provision.

Following the Intermediate Care review, it was clear that there were further opportunities to:

- Improve quality and level of provision for individuals and their carers/families closer to home;
- Manage demand in both health and social care, and;
- Maximise the impact of funding across health and social care.

The Intermediate Care Programme was the first test of working in an integrated manner across health and social care, implementing a single set of recommendations across both sectors with accountability, financial reform and risk management being managed through the Advancing Integration Board (formerly Better Care Fund Steering Group).

Members of the Board were asked to consider that as part of the system, how receptive were they being to taking risk. The biggest challenge was resourcing and encouraging people to work differently.

Gary Raphael and Louise Taylor agreed to speak further on progressing joint working outside the meeting and feedback to the Senior Leadership Executive and at the next Health and Wellbeing Board.

The Programme Initiation Document had been drafted, which articulated the transformation plan, resource requirements and benefits for the system. The next steps within this programme were to:

- Create a detailed Intermediate Care Strategy, with aligned commissioning standards and contribution standards.
- Consider options for high level implementation and resource phasing.
- Develop an Integrated Care System-wide financial and risk management strategy for Intermediate Care provision

**Resolved:** That the Health and Wellbeing Board:

- (i) Noted the progress of the Intermediate Care Programme to date.
- (ii) Agreed to act as the accountable body for this programme.
- (iii) Agreed to hold the Integrated Care System to account for implementing via the Integrated Care Partnerships.
- (iv) Agreed to work with other Health and Wellbeing Boards (Blackburn with Darwen, Blackpool and Cumbria) to undertake that assurance role akin to a committee in common approach.
- (v) Agreed to a review of the Advancing Integration Board membership that will function as a Programme Board.
- (vi) To provide the check and challenge to the programme at key intervals linked to decision gateways.
- (vii) Recognised and lent support for the need for this programme to be properly resourced at Integrated Care Partnership and Integrated Care System levels.
- (viii) Endorsed the link with Population Health Management and Continuing Health Care programmes of work.
- (ix) Requested that this be brought back to the next meeting by Louise Taylor, further to discussion with the Senior Leadership Executive.

## **8. Director of Public Health Report 2019/20 - Investing in our Health and Wellbeing**

Dr Sakthi Karunanithi, Director of Public Health, Lancashire County Council presented the 2019/20 report entitled 'Investing in our Health and Wellbeing to the Board, which followed on from the last report in 2016. The report refocuses on three main issues:

Health outcomes for Lancashire's residents living in many areas of the county were not improving in line with national trends. Health inequalities are widening and if we fail to focus on prevention and wellbeing, expectancy and healthy life expectancy would get worse. Crucially this would have an impact on the productivity of the local economy, employers and workforce.

To address those challenges, the report recommended addressing four key public health priority areas:

- (i) Investing in our own health and wellbeing.

- (ii) Investing in giving children the best start in life.
- (iii) Investing in our communities.
- (iv) Investing in our working age population.

The Board were shown a short video clip, which can be accessed via the link: <https://youtu.be/HdxSTDSA28o>.

There were 14 specific recommendations/future challenges for key decision makers and policy makers to act on.

Ruksana Sardar-Akram, Consultant in Public Health (Interim), Lancashire County Council presented the Board with a summary on a strategic approach and action to tackle infant mortality in Lancashire.

Following on from the report that was circulated with the agenda, Ruksana updated the Board on the aims and background to the report.

It was noted that:

- Infant mortality was an indicator of the overall health of a population.
- The overall child mortality rate (age 0-17) in Lancashire remained significantly worse than the England rate.
- Infant mortality also remained worse than the England rate.
- Reducing infant mortality was an important part of the Population Health Plan and a key priority area for the Children, Young People and Families Partnership Board (broader approach to Early Years Strategy).
- Infant mortality had been highlighted as a key issue in the Director of Public Health report and was also a major part of the Integrated Care System work.
- It is a key priority issue for Lancashire.

The Board were informed of the plans to address infant mortality and how progress would be measured.

Collectively the focus should be on children and the Board needed to ensure that they are considered when making financial plans in the future. It was incumbent on the Board to improve the lives of the children.

**Resolved:** That the Health and Wellbeing Board:

- (i) Supported the key messages and dissemination of the Director of Public Health annual report within partner organisations.
- (ii) Agreed to ensure that our collaborative prevention and population health investments were optimised for improving the health and wellbeing of communities across Lancashire.
- (iii) Endorsed the action plan to reduce infant mortality across Lancashire.

## **9. Lancashire Special Educational Needs and Disabilities Improvement Programme - Progress Report**

Partners in Lancashire were required to produce a Written Statement of Action, setting out the immediate priorities for action. Progress on the implementation of these actions has been monitored by the Department for Education (DfE) and NHS England. The Written Statement of Action has been updated and any ongoing actions included in the Special Educational Needs and Disabilities Partnership Improvement Plan for the period April 2019 to December 2020.

This item was for information only, any issues arising from it, should be directed to Sian Rees, [sian.rees@lancashire.gov.uk](mailto:sian.rees@lancashire.gov.uk).

**Resolved:** That the Health and Wellbeing Board:

- (i) Noted the continued delay in the re-visit from Ofsted.
- (ii) Considered the report on progress to date in delivering the actions in the Special Educational Needs and Disabilities Improvement Plan and the Accelerated Plans.

## **10. Urgent Business**

There were no items of urgent business received.

## **11. Date of Next Meeting**

The next scheduled meeting of the Board would be held on Tuesday, 17 March 2020 at 2pm in the Duke of Lancaster Room – Committee Room 'C' at County Hall, Preston.

L Sales  
Director of Corporate Services

County Hall  
Preston