

Health and Wellbeing Board Annual Report 2018



Foreword

After another challenging year, it is always useful to look back and note the achievements that have been made and the improvements in performance. It is easy to lose sight of these and I welcome the opportunity to celebrate our hard work provided by this report. I would particularly highlight:-

- The publication of six Joint Strategic Needs Assessment Chapters which have helped develop local evidence-based priorities for commissioning by determining what actions the local authority, the local NHS and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing;
- The development of a new Dementia Strategy which takes a joint approach across all local authorities and Clinical Commissioning Groups (CCGs) in LLR to improve dementia diagnosis and the lives of current sufferers within the region;
- The implementation of a new approach to frailty across LLR which sets out a number of proven interventions that should take place in the community, in hospital, and on hospital discharge if someone is assessed as having certain frailty markers;
- The continued improvement in performance of Leicestershire's Delayed Transfer of Care figures.

Looking ahead, we look forward to leading integration work within Leicestershire, to reduce duplication and improve consistency in services for the people of Leicestershire. We will continue to be focused on achieving the best health and wellbeing outcomes for our local population.

Pam Posnett

Cabinet Lead Member for Health

Section A: Introduction

The purpose of this report is to look back at the past year (2018) for the Health and Wellbeing Board and to reflect on the progress that has been made. The focus throughout the report is the progress that has been made across the partnership to improve the health and wellbeing of the population of Leicestershire.

The report includes the following sections:-

- An overview of some of the achievements and outcomes of the Health and Wellbeing Board and its subgroups, including those supported by the Better Care Fund pooled budget.
- An update from Healthwatch Leicestershire on the progress that is being made to meet the needs of the people of Leicestershire and how their insights have contributed to the work of the Health and Wellbeing Board during 2018.
- A look ahead to 2019 which will involve continued focus on delivery of the Better Care Fund Plan and the refresh of the Joint Strategic Needs Assessment.

Section B: Health and Wellbeing Board Progress in 2018

1. Joint Strategic Needs Assessment (JSNA)

The local authority and clinical commissioning groups (CCGs) have equal and joint statutory responsibility to prepare a Joint Strategic Needs Assessment (JSNA) for Leicestershire, through the Health and Wellbeing Board (HWB).

The purpose of the JSNA is to improve the health and wellbeing of the local community and reduce inequalities for all ages with the aim to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities. The JSNA should be used to help to determine what actions the local authority, the local NHS and other partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing.

Process for JSNA 2018-21

A new approach was approved by the HWB for the JSNA 2018-21 in January 2018 which would see them published in subject-specific chapters throughout the three-year time period on an iterative basis, in line with CCG and local authority commissioning cycles. The outputs of JSNA are:

- Subject-specific chapters of an assessment of current and future health and social care needs.
- Infographic summary of each chapter
- A data dashboard that is updated on a quarterly basis to allow users to self-serve high level data requests

As many of the relationships required for the JSNA in Leicestershire are wide ranging, involving representation from various health partners, a JSNA Reference Group has been established. This Reference Group provides strategic leadership and supports the JSNA work across the HWB.

Achievements for 2018

The following JSNA chapters have been published at the following link:

<http://www.lsr-online.org/leicestershire-2018-2021-jsna.html>

- Demography (including deprivation)
- Economy
- Mental Health of Children
- Mental Health of Adults

- Oral Health of Children
- Oral Health of Adults

The JSNA infographics have been created to provide a one page summary of the latest data in subject specific areas. These are available for all colleagues and members of the public to view and download and will be updated on a quarterly basis. They have been published at the following link:

<http://www.lsr-online.org/leicestershire-2018-2021-jsna.html>

Engagement

An engagement plan to promote the new JSNA 2018-21 approach to the local authority and wider partners has begun. A 'lunch and learn' session was run for colleagues at East Leicestershire and Rutland CCG and the voluntary sector have been consulted through a presentation at their Health and Social Care Network and Learn Event in late October. The Equality and Diversity Challenge Group are also active members in the JSNA process.

It is important that the findings from the JSNA are used and promoted as the key evidence base in commissioning and strategic planning within the health and care system. To help with this, a HWB development session was held in late November which provided a useful opportunity for partners and members to discuss potential avenues to implement the JSNA findings. Various JSNA chapters have also been presented at strategic partnership meetings, such as the Housing Service Partnership and Children and Families Partnership, to ensure consultation with key groups and the findings from the JSNA chapters are collectively owned and approved.

Updates regarding the status of JSNA chapters are published regularly in the Health and Social Care Integration newsletter and the Leicestershire Equalities Challenge Group newsletter.

2. Pharmaceutical Needs Assessment

We have a statutory requirement to prepare a Pharmaceutical Needs Assessment (PNA) for Leicestershire and it was published in March 2018. The PNA:-

- identified the pharmaceutical services currently available and assess the need for pharmaceutical services in the future;
- Will help inform the planning and commissioning of pharmacy services by identifying which services should be commissioned for local people, within available resources, and where these services should be;
- Will help inform decision making in response to applications made to NHS England by pharmacists and dispensing doctors to provide a new pharmacy.

A PNA Reference Group was established to oversee the detailed production of the PNA documents for Leicester, Leicestershire and Rutland to ensure a consistent local approach. Membership of this group included: local authorities, NHS England, the Leicestershire Pharmaceutical Committee (LPC), Local Professional Network for Pharmacists and the Leicester, Leicestershire and Rutland Local Medical Committee, Clinical Commissioning Groups (CCGs) and Healthwatch. Although there was a common approach, separate PNAs have been produced for Leicester, Leicestershire and Rutland.

The PNA concluded that community based pharmacies were meeting the current needs of the Leicestershire population for Essential, Advanced and Enhanced services. No gaps were identified in the provision of essential services during normal working hours or outside of normal working areas across the whole Health and Wellbeing Board area. Furthermore, no gaps were identified in essential services that if provided either now or in the future would secure improvements or better access to essential services across the whole Health and Wellbeing Board area.

No gaps were identified in the provision of advanced services across the whole Health and Wellbeing Board area or in the provision of advanced services at present or in the future that would secure improvements or better access to advanced services across the whole HWB area.

3. Health and Wellbeing Board Achievements and Outcomes

Better Care Fund Refresh

Throughout the year, we received regular updates on the Better Care Fund (BCF) plan. We are in the second year of a two-year plan (April 2017 to March 2019), In line with national policy, we reviewed and refreshed our BCF targets for the second year, which was approved by the Health and Wellbeing Board in July 2018.

- The key focus, nationally, remains on improving delayed transfers of care (DTOC). The Government's mandate to the NHS for 2018/19 set an overall ambition for reducing delays to around 4,000 hospital beds occupied by patients delayed without discharge by September 2018. In Leicestershire, this translated to no more than 7.88 average bed days delayed, per day, per 100,000 population by September 2018 and then to maintain this rate for the remainder of year. In September, we achieved 6.32 average bed days, per day, per 100,000 population and had 400 fewer delays during the month compared to the same period in 2017.
- The BCF target for non-elective admissions in to hospital has been set for up to 70,569 for 2018/19. For April to October 2018, there have been 39,113 non-elective admissions, against a target of 40,764 – a variance of 1,651 admissions less than the target. We are currently on track to achieve this target.

- The target for the number of permanent admissions of older people (aged 65 and over) into residential and nursing care homes is for fewer than 890 admissions during 2018/19. The full year forecast is for 896 admissions, which means that we are close to target.
- The target for the proportion of older people who were still at home 91 days after discharge has been set at 87% for 2018/19. The current position, relating to hospital discharges between June and August 2018) is 90.3%. We are on track to achieve this target.

Dementia Strategy

As part of the consultation Process, the Board considered a report in May 2018 concerning the Leicester, Leicestershire and Rutland Living Well with Dementia Strategy 2019–2022. The Strategy took a joint approach across all local authorities and Clinical Commissioning Groups (CCGs) in LLR and set out the draft strategic priorities relating to dementia. The Strategy detailed five key aims which would underpin agencies work to improve dementia diagnosis and the lives of current sufferers within the region.

The Strategy had been developed alongside the Dementia Programme Board which included representatives of district councils, UHL and the Police and its delivery is to be governed by the Dementia Programme Board, a sub group of the Sustainability and Transformation Partnership.

Following consideration by the Board, The Leicestershire County Council Cabinet approved the Strategy with the other authorities and CCGs due to give consideration ahead of full sign off in early 2019.

Carillion Radio

In September The Board received a presentation on the development of a community radio station, created by the voluntary sector, to promote health and social care issues in Leicestershire. The station had acquired a licence to broadcast across the West of Leicestershire but it was hoped its listenership would extend across the County through internet radio or website access.

The Board welcomed the development of the station and recognised the importance of medical practices utilising their contact time with patients effectively to share messages of how health and wellbeing could be enhanced. It encouraged partners to provide content in order for adverts to be produced and aired

Links between Leicestershire Safer Communities Strategy Board and the Health and Wellbeing Board

In September the Board considered a report which detailed ongoing work to strengthen links between Leicestershire Safer Communities Strategy Board and the Health and Wellbeing Board.

The Board agreed upon the five priority areas for joint focus: drug misuse, alcohol misuse, mental health, domestic abuse and sexual violence (including child sexual exploitation) and noted that future development would be aided with the help of a new data compendium which listed key health and crime indicators to enable partners to access appropriate data/information as and when required.

We look forward to receiving further updates on the joint work of the two Boards during 2019.

4. Self-Care Communications Campaign

In November 2017, we launched the 'Self-Care' communications campaign across the county, working with partner organisations.

One of our key priorities is 'Supporting people to avoid ill health, particularly those most at risk, by facilitating solutions, shifting to prevention, early identification and intervention'. Our Joint Health and Wellbeing Strategy for 2017-2022 outlines a vision to "improve health outcomes for the local population, manage future demand on services and create a strong and sustainable health and care system by making the best use of the available resources"

Self-care covers many areas, but overall it is about an individual looking after themselves in a healthy way. It can include getting people to live healthier lives by quitting smoking, drinking sensibly or exercising more. The term is also used to cover taking medications, treating minor ailments and knowing when and how best to seek help.

The focus of the self-care campaign has included:

- Healthy living – Encouraging activity through walking, promoting healthy eating and raising awareness of how to stay safe and well.
- Long term conditions – diabetes. In 2017, Leicestershire performed significantly worse than the England average for recorded diabetes.
- Self-care options – signposting to local healthcare services and awareness of county wide opportunities to engage in a healthier lifestyle.

Our campaigns to date have focused on lifestyle improvement including getting active, healthier eating and reducing the risk of diabetes.

Campaigns run seasonally, enabling messages to factor in weather conditions and seasonal celebrations and also support and integrate the work of existing campaigns that address key areas of self-care such as reducing social isolation and falls prevention.

5. The work of our subgroups

a. Integration Executive

Integration and the Better Care Fund

The Better Care Fund (BCF) is a pooled budget of £56million between the Clinical Commissioning Groups (CCGs) and the County Council targeted at improving the integration of health and care. The Health and Wellbeing Board has responsibility for approving the BCF for submission to NHS England and plans arising from this.

Our BCF plan supports the joining up of health and care services so that people can manage their own health and wellbeing independently in their communities for as long as possible. This involves providers and commissioners of health, care and housing services to ensure integrated services are planned and delivered effectively in partnership. Our current BCF plan covers the period 2017 to 2019 and is available at the following link

<http://www.healthandcareleicestershire.co.uk/download/Leicestershire-BCF-Plan-2017-19.pdf>

The Integration Executive is the subgroup of the Health and Wellbeing Board with responsibility for overseeing delivery of the BCF Plan on behalf of the Health and Wellbeing Board.

Our progress and achievements in relation to the BCF during 2018 is set out below: -

- **Home First:**
 - **Hospital Discharges** – health and care partners across Leicester, Leicestershire and Rutland (LLR) are working hard to deliver improvements to transfer patients out of hospital and reduce delayed transfer of care. In Leicestershire, through focused efforts across partners agencies we have seen a significant reduction in delayed transfers of care (DTC) from hospitals – helping reduce pressure on hospital beds. An LLR-wide action plan is in place which has been based on analysing LLR’s position against the high impact changes framework for hospital discharge, including key initiatives to help maintain reduced DTC levels. This includes the Integrated Discharge Team (see below), ‘Red to Green’ daily assessment system and reducing the complexity of current discharge pathways, plus to provision of 14 beds to assess onward care needs outside of a hospital setting.
 - **Integrated Discharge Team (IDT)** - the IDT encourage and promote an integrated way of working across all organisations to ensure smoother and faster resolution of delays to discharge. There has been a significant improvement to multi-agency working with a discharge hub where all professionals working on discharge can be co-located.
 - **Integrated Rehabilitation and Reablement.** Partners have developed a blueprint for integrated intermediate care services. Work to design and implement the integrated health and care reablement offer including referral

and access points, skill mix, triage and service delivery was undertaken during 2018, with the service commencing during October, ahead of winter pressures.

- **Reablement** – our reablement approach offers considerable benefits by supporting people to regain skills rather than be cared for in traditional sense. By providing an intensive period of coordinated enabling support focusing on outcomes, positive results are achieved. The vast majority of new contacts resulting in reablement in 2018 were following a hospital discharge. The HART service provides intensive support for up to four to six weeks to help service users optimise their independence to continue living in their own home. During 2017/18, 29% resulted in no further services, 51% low level support and just 20% required ongoing support. The proportion of people living at home 91 days following discharge from hospital via HART was 86% in 2017/18.
- **Integrated Domiciliary Care – Help to Live at Home** – since November 2016 home care in the county has been delivered through the Help to Live at Home service. The service is commissioned jointly by the Council and two county Clinical Commissioning Groups with lead providers appointed to lead the delivery of home care services.
- **Integrated Locality Teams (ILTs)** – improving the health and wellbeing of our diverse population in LLR is centred on our ILTs. Our model of care has been evolving over recent years and has four key components:
 - Keep more people well and out of hospital
 - More care closer to home
 - Care in a crisis
 - High quality specialist care

Twelve ILTs have been established across LLR to provide more coordinated and comprehensive support in the community. These teams are comprised of GPs, community nurses, social care staff and partners from a number of organisations including the voluntary sector. Currently the early implementer sites across LLR are setting up improved methods of multidisciplinary working, so that care is planned, coordinated and delivered more effectively for patients, families, carers and the professionals supporting them. For Leicestershire, our early implementer site is in Hinckley and Bosworth.

- **Frailty** – a new approach to frailty across LLR has been implemented which sets out a number of proven interventions that should take place in the community, in hospital, and on hospital discharge if someone is assessed as having certain frailty markers. The LLR area has adopted the Rockwood scale for assessing frailty consistently across the health and care system and all practitioners will be using the same set of prompts to check how someone's care could be managed most effectively at every opportunity/in every setting of care.
- **Assistive Technology** – new technology is transforming the care technology sector. Currently a telecare service is provided based on a pendant alarm. Nearly 6,000 alarms are in place in homes across the county. There are now many

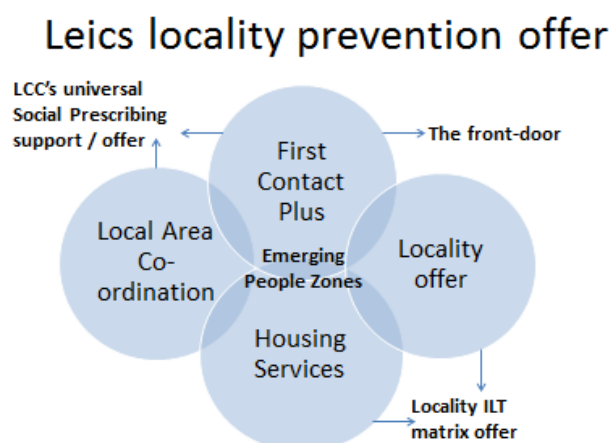
newer products available that can support people to live independent lives and deliver a more preventative response, which is more effective at delaying and reducing needs. Our BCF assistive technology project is looking at how the service offer in Leicestershire can be enhanced by maximising opportunities offered by new technology. We have completed an initial market appraisal exercise, are looking at experience elsewhere and aiming to establish a standardised approach across the county to assistive technology. Testing some of the newer technology will take place in 2019.

- **Dementia Support** – there are predicted to be over 9,000 people in the county living with dementia. Health and care partners fund and provide a range of information, advice and services to support people affected by dementia. Joint commissioning a single community and hospital in-reach dementia support services provides a joined-up service for the area, replacing three separate services. These support easier transition between hospital and community settings and coordinated care and integrate services around the person in order to improve outcomes.
- **Integrated Data** – through the LLR Digital Roadmap we are developing a summary care record that will ultimately be linked, viewed and edited by both the NHS and Council staff, helping all professionals involved in patient care to have access to the most up to date information. In 2018 we also received approval from NHS Digital to join and link health and care data to assist in the planning, transformation, design and evaluation of health and care services, and will put in place an integrated data tool for this purpose in 2019

b. Unified Prevention Board

The Unified Prevention Board (UPB) oversees the development and delivery of prevention activities underpinning the health and wellbeing strategy for Leicestershire and ensures the prevention objectives of the Sustainability and Transformation Partnership (STP) are jointly delivered across Leicestershire.

During the last 12 months, the Board has focused on developing the asset-based offer in localities around tier zero (universal) and tier one (primary) for prevention. This has included a Social Prescribing offer which includes First Contact Plus and Local Area Coordination.



This diagram shows the prevention model and how the component parts work together.

One of the key programmes of work for the UPB is developing the wrap-around prevention offer to support Integrated Locality Teams (ILTs). ILTs are a multi-disciplinary approach to delivering health care to patients who are in one of three

cohorts (frail, five or more long-term conditions and high cost needs).

The UPB will help support patients by ensuring that prevention services are available and aligned to their care needs so that they are able to stay in their own homes and prevent further acute care.

The UPB prioritised the delivery of a workplace health programme, led by Leicestershire and Rutland Sport. The campaign aimed to target 100 businesses and so far there have been just over 1,000 responses from 24 organisations with an average response rate of 40%. This has enabled us to gather some in-depth insight to health and wellbeing issues. The top priorities/issues included; poor sleep management, low physical activity levels, and poor fruit and vegetable consumption. As the work continues into 2019, the programme will aim to address these priorities with organisations to achieve better outcomes for the Leicestershire workforce.

Joined up communications across partners has been a priority for the UPB since 2017, with partners joining together to integrate campaigns with a focus on a prevention. To date this has covered a range of different campaigns including:

- Carillon Wellbeing Radio
- Winter wellbeing
- Flu and infection prevention
- Prevention of falls
- Quit Ready
- Suicide prevention campaign 'Start a Conversation'

Of particular focus was the development of the self-care campaign whose ongoing messages have so far focused on three key areas, health living, self-care options and long-term conditions.

Key areas of our prevention work include:

- **First Contact Plus** - an online and telephone-based support service which helps adults in Leicestershire find information about a range of services all in one place. The initiative allows residents who require help with one or a number of issues to access a catalogue of information, advice, help and support. First Contact as the front-door to the Leicestershire social prescribing offer, will also provide an integral part of the wrap-around prevention offer to ILT's (mentioned above), which will be tested in the Hinckley and Bosworth pilot. The concept will be for the First Contact model to provide support directly to multi-disciplinary teams and the patient cohorts requiring prevention services. This pathway will be tested during the pilot phase with a review of the requirements necessary to support wider roll-out and any future investment needed to implement this.
- **Local Area Coordination** – as well as First Contact Plus, Local Area Coordinators help link people in their community helping to engage with support provided by charities, district councils and volunteers and volunteering opportunities. Local Area Co-ordination has a focus on helping isolated, excluded and vulnerable people and communities to stay strong and in control. Local Area Co-ordination uses a strength based and person-centred approach to work

alongside people utilising the method of making every contact. The Local Area Coordination service covers a total population size of 333,000 throughout Leicestershire.

- **Integrated Housing Support – Lightbulb** - Leicestershire’s Lightbulb Service has both community based and hospital-based components. The hospital housing enablement team, which is funded by the BCF plan, was created to work inside Leicester’s acute hospitals and the Bradgate Mental Health Unit. Since April 2016, the service has helped in excess of 1,200 patients and, over time, demand for the service has risen. The team offers 22 interventions to support patients in local hospitals, many of which relate not only to housing but also to other community support offers. The Lightbulb service has won three accolades for innovation and partnership working. In the community-based service there is also access to a full housing needs assessment with Lightbulb’s housing support coordinators carrying out “housing MOTs” and acting as case managers to arrange solutions to the full range of housing support including aids and adaptations, tenancy and welfare advice, hoarding, house clearing and cleaning, furniture packs, affordable warmth, home safety and falls prevention.
- **Falls Prevention** – it is estimated that each year in Leicestershire falls cost the NHS approximately £23million with one in three people aged over 65 falling every year. The aim of the LLR falls programme is to improve the treatment pathway for those identified as being at risk of suffering a fall or who have experienced a fall. The programme provides the tools to ensure the appropriate course of action is taken to help each individual maintain their independence and avoid falls related admission to hospital. Tools include specialist therapy triage and assessment for all referrals into consultant falls clinics and specialist therapy and falls prevention training for care home staff. The work also includes the development of the local falls management exercise programme ‘Steady Steps’ and extending access to an electronic Falls Risk Assessment Tool smart phone application
- **Prevention at Scale**- evidence shows that up to 30% of GP appointments are taken up by patients seeking non-medical interventions. Leicestershire’s prevention at scale project is working with a number of GP surgeries to develop better insights into the reasons for these types of attendances, how the local prevention offer can be improved and how best to support patients and GPs with easy access to the most suitable support for their non-medical needs, via GP or self-referral into First Contact Plus, or via other agencies and the community itself. Releasing more GP capacity for those activities that only GPs can deliver is the aim of this work.

c. Children and Families Partnership

In September 2018 the Partnership launched the Leicestershire Children and Families Partnership Plan 2018 – 2021 which is a strategic document setting out the shared vision for children, young people and their families and the priority outcomes that need to be improved.

The Partnership has adopted the five supporting outcomes of the Joint Health and Wellbeing Strategy relating to children and young people as the priority areas for the Plan:

- i. Ensure the best start in life– by developing an integrated early years pathway which ensures needs are assessed to enable appropriate interventions are offered and the development of a communication strategy to promote the 1001 critical days;
- ii. Keep children safe and free from harm – by developing and embedding an integrated model of services to prevent harm to children and young people and make children safe by raising awareness of universal safety messages;
- iii. Support children and families to be resilient - by developing an integrated approach to family resilience and self-sufficiency, provide joined up information and guidance to enable families to be self-sufficient and navigate services and support families to progress towards work;
- iv. Ensure vulnerable families receive personalised, integrated care and support – by providing integrated, outcome-based, high quality, cost-effective provision and developing a post-16 multi-agency delivery model;
- v. Enable children to have good physical and mental health - by developing a whole system approach based on ‘Making obesity everyone’s business’ and developing a partnership approach to emotional and mental wellbeing;

Priority leads are continuing to work with partners and other key stakeholders to deliver the action plans agreed against each priority. A progress report was provided to the Health and Wellbeing Board in November 2018 with key achievements to date including:

- The production and launch of resources for professionals and parent/carers, promoting school readiness in September 2018;
- The development and piloting of a multi-agency pathway for the review and analysis of domestic abuse incidents affecting children;
- The merging of Leicestershire’s Family Information and Adult Social directories into a new Leicestershire Information & Support Directory (LISD) which is now live;
- The launch of the Multidisciplinary Intensive Support Team Leicestershire (MISTLE) which is now offering intensive therapeutic support to young people in residential care to support a return to a family based placement;
- Leicestershire Partnership Trust (LPT) staff are now addressing Maternal Obesity as part of their Making Every Contact Count (MECC) conversations and a maternal obesity module is being developed for LPTs online MECC training.

The Partnership has continued to meet bi-monthly to discuss a wide range of items including the launch of Police People Zone initiative, CAMHs Transformation Plan and the new Children’s Innovation Partnership between the Children and families

Department and Barnardo's. A work programme for Partnership meetings is being developed for 2019 and includes the development of a Youth Advisory Group that will support the on-going development and monitoring of the Partnership Plan.

6. Health and Wellbeing Board Development

We held a Development Session for the Board in November 2018 which focused on the JSNA and commissioning intentions for 2019/20. Attendees received a detailed presentation on the needs analysis relating to Mental Health, one of the first sections of the Leicestershire JSNA to be updated in the new style of rolling chapter updates. Following the presentation members discussed in detail themes such as

- Parity of Esteem and the Mental Health (MH) Investment Standard;
- Prevention and Self – Care
- Improving Access to, and the Outcomes from, Psychological Therapies (IAPT)
- Measuring the Impact and Effectiveness of Mental Health Interventions

The second part of the session provided participants with an overview of commissioning intentions by partner for the forthcoming financial year.

Following the presentations participants were asked to consider key themes, risks and issues from the materials presented and any actions needed to strengthen commissioning priorities.

7. Working in Partnership with Healthwatch

From April of 2018, Healthwatch Leicestershire has been jointly commissioned with Healthwatch Leicester and is now provided through the organisation Engaging Communities Staffordshire.

Our role to share and champion the experience of service users and members of the public has never been as important, given the financial challenges face by all statutory services locally and nationally.

Building on the work undertaken by the previous provider of Healthwatch Leicestershire, we have enjoyed an open and inclusive representation on the Health and Wellbeing Board in Leicestershire County Council.

Attended by the Healthwatch Advisory Board Chair and the Manager, we are keen to ensure the public voice continues to be heard at this key point of influence in Health and Social Care services.

During our initial set up stage we held informative meetings between the Chair of the Health and Wellbeing Board and our own Chair. This allowed a greater understanding of how we were able to align our organisations work priorities and

since then we have worked with the Democratic Support Staff to ensure our patient insight and reports is brought to the Board at the most opportune time.

Our recent report on GP services was well received by all members of the Health and Wellbeing Board and was able to identify several future steps taking our work further with the different organisations on the Board.

Working with the Health and Wellbeing Board, as well as our involvement in other key boards within the Council, we feel we have been supported to challenge in a meaningful way the policies and strategies presented through 2018-19.

We look forward to working with the members of the board and support officers in the future as we focus on our priorities of:

- Public Health – Effectiveness of Winter Messages
- Health – Real life impact of cancellations of appointments
- Social Care – Impact and Causes of Delays to Discharge

Section C: Looking forward to 2019

1. Delivering our Vision and Strategy

Our vision is “to improve health outcomes for the local population, manage future demand on services and create a strong and sustainable health and care system by making the best use of the available resources.” To deliver this during 2019 we will be focussing on goals that have the most potential to reduce health inequalities; that require collaborative working across the partnership and which will have the greatest impact on Leicestershire people. We will also seek to make the best use of resources, aiming to invest in early intervention to avoid higher costs in the future.

2. JSNA refresh

A further four chapters are proposed to be ready for publication by the end of March 2019:

- Alcohol Misuse
- Substance Misuse
- Best Start in Life (0-4 years)
- Housing

A further five chapters are proposed to be ready for publication by the end of the 2019 calendar year:

- Frail Older People/Multi-morbidity

- Air Quality
- Obesity
- Physical Activity
- End of Life

3. Better Care Fund

During January 2019, we are expecting to receive national BCF policy framework and operating guidance for 2019/20. Work to review the BCF plan, to align with commissioning intentions across CCGs and the council, commenced in September 2018 and will be reviewed once the national documentation has been published.

We will continue to closely monitor our performance against the four BCF outcome metrics, to assure ourselves that the actions being taken, continue to have the desired effect, and to use the BCF funding to support further service redesign activities and finalise the approach for the new models of reablement and ILT, the LLR falls pathway and the emerging assistive technology offer.

The new NHS plan and the development of Integrated Care Systems across the NHS will mean significant policy developments. The BCF policy framework will be fully refreshed nationally in light of this and a new approach is expected to be implemented from April 2020 onwards. During 2019, we will focus on preparing for these changes to ensure that our future plans will achieve the requirements.