



### **Foreword**

Having taken over the role of Chairman of the Health and Wellbeing Board from Pam Posnett in May 2019, the annual report provides an ideal opportunity for me to reflect on the work of the Board during the year. This annual report illustrates the broad spectrum of factors affecting the health and wellbeing of the Leicestershire population which the Board have considered, discussed in detail and helped develop during 2019. I would particularly highlight:-

- The ongoing approach to refreshing and debating the findings from our Joint Strategic Needs Assessment Chapters, which have informed local evidencebased priorities for commissioning, and have recommended specific actions that the local authority, the local NHS and other partners should collectively take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing;
- The frequent updates concerning the development and subsequent introduction of Primary Care Networks across Leicester, Leicestershire and Rutland as the cornerstone of the new NHS architecture;
- The introduction of a new Placed Based Health Outcomes Framework which will provide the Board with a more focused dashboard tracking the impact the partnership is making on the strategic priorities, outcomes and service delivery models within the place of Leicestershire;
- The Board's continued focus on Mental Health and Wellbeing, including how effectively services are being delivered across the County, and the impact of the Mental Health Investments mandated by government on our population's outcomes.
- Our coordinated Self-Care Campaign across the Partnership;
- The continued good work led by the Children and Families Partnership, including its recent focus on Adverse Childhood Experiences.

We look forward to continuing to take a lead role in the delivery of Health and Care Integration within Leicestershire, especially as it adapts and evolves as a result of the coronavirus pandemic. This will require us to re-consider the strategic purpose of the Board with an eye to the important contribution that we will make to the local system as we move towards recovery.

We will continue to be focused on achieving the best health and wellbeing outcomes for our local population.

Lee Breckon

Cabinet Lead Member for Health

### **Section A: Introduction**

The purpose of this report is to look back at the past year (2019) 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 the activities supported by the Better Care Fund Plan.
- 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 2019.
- A look ahead to 2020 which will involve continued focus on delivery of integrated health and care as the County recovers from the coronavirus pandemic.

## The Work of our Subgroups

## a. Integration Executive

### **Integration and the Better Care Fund**

The Better Care Fund (BCF) is a pooled budget of £62million 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 the implementation of 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 and maintain independence 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 covered the period 2019/20; a copy of the plan on a page is available <a href="here">here</a>:

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

Our progress and achievements in relation to the BCF during 2019 is set out below: -

### **Home First**

- The new Home First service, which is part of the first phase of the Community Services Redesign programme of work ongoing across Leicester, Leicestershire and Rutland (LLR), launched at the beginning of December 2019. When fully operational, the Home First service will bring together an integrated and social care offer delivered by community-based nursing, therapy and adult social care teams to:
  - Support people to remain in their homes when they are having a health or social care crisis; rather than needing to go into hospital or a care home;
  - Help people get home from hospital quickly and provide them with rehabilitation and reablement to help restore their health, wellbeing and independence.
- Hospital Discharges health and care partners across 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 partner
  agencies we have seen a significant reduction in delayed transfers of care
  (DTOC) from hospitals helping reduce pressure on hospital beds. An LLR-wide
  action plan is in place which has been based on analysing our position against
  the high impact changes framework for hospital discharge, including key
  initiatives to help maintain reduced DTOC levels.

- Integrated Discharge Team (IDT) the IDT encourages and promotes an
  integrated way of working across all organisations to ensure smoother and faster
  resolution of complex discharges and to minimise delays to discharge. There has
  been a significant improvement to multi-agency working with a discharge hub (at
  Leicester Royal Infirmary) where all professionals working on discharge can be
  co-located.
- Integrated Domiciliary Care since November 2016, home care in the county
  has been delivered through the Help to Live at Home service. The service is
  jointly commissioned by the Council and two county Clinical Commissioning
  Group. During 2019, work has been completed to review the service in readiness
  for the re-procurement of the new domiciliary care service.

### **Frailty Collaborative**

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 sector. Currently, in Leicestershire, a telecare service is provided on a pendant alarm basis. Nearly 6,000 alarms are in place in homes across the county. There are now many newer "smart" technological products available that can integrate with other devices in the home and support people to live independent lives and deliver a more preventative response, which is more effective at delaying and reducing needs.

A technology project which began in 2019, and is funded by Leicestershire's Better Care Fund is looking at how the service offer for people (and their carers) living at home with dementia can be enhanced using new style technology. The system monitors activity and daily routine in the home and gathers information to communicate this electronically. The findings will be considered later in 2020.

### **Integrated Commissioning**

Leicestershire County Council and the two county Clinical Commissioning Groups developed a new governance group and workplan for joint commissioning during 2019 covering a range of activities for priority areas such as domiciliary care, reablement, integrated personal budgets, mental health and learning disabilities. A new joint Leicestershire Strategy for Learning Disabilities is expected to be a key element of the 2020 workplan.

### **Integrated Data**

As part of the Business Intelligence Strategy for LLR, in late 2018 we 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. In April 2019 we commenced the process of building and testing a new integrated data warehouse for the integration of health and care data from the three Local Authorities, three Clinical Commissioning Groups and local NHS Trusts such as Leicestershire Partnership Trust, University Hospital Leicester and East Midlands Ambulance Service. Dashboards for measuring specific activities, and their impact across the health and care system as a whole, are now in the process of being tested.

As part of the Business Intelligence Strategy, the workstream on Population Health Management (PHM) has developed rapidly in 2019, developing the overall approach to PHM across the partnership and designing new tools.

The Health and Wellbeing Board received a presentation about the LLR PHM approach and a demonstration of the emerging tool for Primary Care Networks called the Primary Care Intelligence Packet (PIP) at their development session in December 2019.

### b. Unified Prevention Board

The Unified Prevention Board (UPB) oversee the development and delivery of prevention activities underpinning the health and wellbeing strategy for Leicestershire and ensures the prevention objectives of the Better Care Together Programme (BCT) are jointly delivered across Leicestershire.

The Unified Prevention model has focused on the asset-based offer in localities around tier-zero (universal) and tier one (primary) prevention. This includes a Social Prescribing Offer which includes First Contact Plus and Local Area Coordination.

During 2019, we have focused on a joined up communications campaign across partners in Leicestershire; Healthy Workforce equals Healthy Leicestershire; and lessons learned from key integration programmes.

### Joined Up Communications

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 prevention. Some of the main themes in the plan include the self-care campaign, reducing loneliness and social isolation, volunteering activity and BCT activity.

Of particular focus during 2019 was the development of the mental health communications campaign. A mental health communications toolkit has been

designed to help effectively communicate key messages around mental health to internal and external stakeholders. Evidence suggests there are five steps we can all take to improve our mental health, enabling people to feel happier, more positive and to get the most from life. Examples of how the joined up communications plan have worked, was partner organisations having increased social media use to coincide with World Mental Health Day on 10th October.

### Healthy Workforce = Health Leicestershire

The UPB has prioritised the delivery of a workplace health programme. The Wellbeing at Work campaign was launched in July 2018. Funding was received from local authorities and public health, with central coordination from Leicester-Shire and Rutland Sport (LRS). The campaign was developed to support local workplaces to improve health and wellbeing of staff and to help reduce absenteeism and presentism, improve productivity and achieve better health outcomes for the Leicestershire workforce.

Workplaces are asked to complete the Workplace Health Needs Assessment (WHNA), that gives an understanding of the priorities for health within each workplace. To date, the top priorities/issues included physical activity levels, smoking, alcohol, nutrition, stress and sleep. As the work continues, the programme is aiming to address these priorities with employers to achieve better outcomes for the Leicestershire workforce.

The workplace health initiative was rolled out in September following an initial pilot phase. This has included attending the Leicester Business Festival, a workplace hockey competition and a social media campaign featuring case studies ran during the autumn 2019.

### Lessons Learned from Key Integration Programmes

The UPB has been considering lessons learned from key integration programmes including ensuring a good join up between the existing social prescribing system and social prescribing link workers within the newly formed Primary Care Networks. As well as developing links between the prevention offer and the work of the Violence Reduction Network.

### Social Prescribing and Primary Care Networks

The Public Health Local Area Coordination team created a communities of practice for the new Primary Care Network Social Prescribing Link Workers to receive support and training for their new roles and included how these will link to the social

prescribing offer. This will aim to ensure that there is a connection to potential delivery plans and the community offer through Districts and wider partners.

### Police and Crime Commissioner – Violence Reduction Network

The UPB considered the scope of the Violence Reduction Network (VRN) and the emerging model of knife crime reduction. From this there will be regular updates to the Board on how this programme of work was being delivered through People Zones. Initial discussions have been regarding how the prevention services within the scope of the UPB, can work with the VRN.

## c. Children and Families Partnership

In September 2018 the Partnership launched the Leicestershire Children and <u>Families Partnership Plan 2018 – 2021</u> 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.

Leads, nominated from across agencies, for each of the Plan's five priorities have continued to work with partners and other key stakeholders to progress agreed actions. Progress reports were provided to the Health and Wellbeing Board in May and November 2019 highlighting key achievements, which include:

### Priority 1 - Ensure the best start in life

- The launch of a "Graduated Approach" to assist children at risk of delay being identified early and referred to appropriate services for support. The approach includes an Advice Line, support visits from Area SENCOs, half-termly drop-ins for providers to talk through concerns with a range of professionals and an online toolkit for schools and preschools;
- The launch of a <u>webpage</u> and leaflet targeted at parents to promote awareness and understanding of 1001 Critical Days key messages. The leaflet will be available at all primary schools and will be distributed to expectant and new parents through key health contacts
- The launch of a School Readiness <u>online toolkit</u> for early years professionals.

### Priority 2 - Keep children safe and free from harm

 The appointment of a Strategic Lead for Child Criminal Exploitation (CCE) for Leicester, Leicestershire and Rutland (LLR), who will work

- with operational leads across LLR to develop a joint strategy and delivery plan in response to CCE.
- The launch of LLR CCE Standards
- The implementation of a daily partnership risk assessment process at CCE hub
- The launch of a communication campaign to raise awareness of CCE

### Priority 3 - Support children and families to be resilient

 The majority of secondary schools and colleges are now working with the Enterprise Adviser Programme to support the delivery of effective careers guidance

## <u>Priority 4 - Ensure vulnerable families receive personalised, integrated care and support.</u>

- The launch of the "Promise to children in care and care leavers", (which included input from young people from within the care system) that outlines a series of measures agreed by partners to support young people in, or who have left, the care system.
- The establishment of a Joint Solutions Panel to review joint funding arrangements.
- The launch of a new Inclusion Pathway that includes early years, primary and secondary advice surgeries (Inclusion Forums) across the county.
- The approval of a multi-agency Housing Protocol for 16 and 17 year olds at risk of homelessness

### Priority 5 - Enable children to have good physical and mental health

- The development of a face to face & online Make Every Contact Count PLUS training module on maternal obesity for practitioners operating across different agencies
- The development of resources for practitioners to use with service users to discuss healthy weight before/ during & post pregnancy
- The successful completion of the first year of the active travel to and from school 'Choose How You Move' programme
- The roll-out of the Sport England funded Active Families project to all seven district councils following successful pilot phase at two authorities.
- The multi-agency events to raise awareness of Adverse Childhood Experiences (ACEs) and to agree how a trauma informed approach could be progressed across Leicestershire.

 The securing of funding from the Violence Reduction Network to deliver workforce development activity in relation to ACEs

A Youth Campaign Group (YCG) has been developed with a focus on delivering campaigns aligned with the Partnership Plan and key issues identified by young people through the annual Make Your Mark National Youth Ballot, with a focus in 2019 on knife crime.

Members of the YCG attended Partnership meetings in July 2019 and January 2020 to discuss their concerns about knife crime and to update the Children and Families Partnership Board on related campaign activity.

The YCG have also met with partners including the Lord Lieutenant of Leicestershire, the Office of the Police and Crime Commissioner, Leicester City Football Club in the Community and Public Health to share their views on knife crime.

Activity planned for 2020 includes:

- The development of a joint CCG/LCC neo-natal pathway to offer contact with Children and Family Wellbeing Service and referral to portage home-based teaching service if appropriate.
- The start of a pilot of a "2 to School" programme by LCC Children and Family Wellbeing Service and early years providers in Oadby which will include the delivery of workshops and interactive displays providing advice and information for parent/carers to support their child to be school ready.
- Delivery of workforce training and awareness raising activity on ACEs across the partnership

### Adverse Childhood Experiences (ACEs)

The Partnership has had a particular focus on ACEs over the last year. ACEs refers to some of the most intensive and frequently occurring sources of stress that children may suffer early in life, including verbal, physical and sexual abuse, physical and psychological neglect, parental death, divorce, substance misuse, mental health, attempted suicide and incarceration. The Health and Wellbeing Board received a specific update on the Partnership's work in relation to ACEs at our meeting in November.

The report detailed the work undertaken by the Partnership over the past year which included;

 a multi-agency event around "First Steps to a Trauma Informed Approach to Address Adverse Childhood Experiences" held on 21 May 2019. The event included key note presentations from Ann Berry, Public Health

- Nottinghamshire, Dr Warren Larkin, Clinical Psychologist and Matt Buttery, CEO of Triple P and workshops delivered by partners.
- learning from a Lottery funded programme in Blackpool (Better Start) which focuses on promoting good early child development that uses a trauma informed approach to address ACEs to learn the lessons from this programme.
- a strategic leader's workshop, facilitated by Dr Warren Larkin, held on 19
   September 2019. The focus of the workshop was to begin the development of a shared vision and to agree how a trauma informed approach could be progressed across Leicestershire.

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The Partnership has agreed to adopt the Trauma Aware System Change (TASC) Model as a framework to develop a trauma aware whole system approach for Leicestershire. Task groups have now been set up for each TASC strand (Community, Workforce, Commissioning, Prevention, Increased Access to Intervention) to progress activity and identified leads will be responsible for reporting back to the Children and Families Partnership Board. The Violence Reduction Network has agreed to focus some of their multi-agency workforce development budget on Adverse Childhood Experiences and Trauma-Informed Practice to deliver:

- one-day multi-agency training sessions on 'An introduction to ACE science and trauma informed practice';
- workshop including train-the-trainers to be included as part of the on-going multi-agency safeguarding training package;
- screenings of the "Resilience" film with the potential for accompanying workshops/ panel discussions to widen reach; and
- a social media/promotional campaign linking the workforce up with relevant resources and the latest evidence.

Using a partnership approach has also assisted in securing external funding for activity including:

- £798,000 from the Department for Education to deliver a Holiday Activities and Food programme over the summer of 2019. Barnardo's led and coordinated the local programme, which made funding available to organisations to deliver inclusive and accessible holiday activities targeting children eligible for free school meals.
- £480,000 over two years from the Home Office Youth Endowment Fund to tackle youth offending through the delivery of an early intervention programme targeting with 10 to 14 year olds at risk of being drawn into crime and violence. Barnardo's, working closely with the Loughborough Inclusion

Partnership and other partners, will co-ordinate the delivery of the programme to schools in the Loughborough area.

# Section B: Health and Wellbeing Board Progress, Achievements and Outcomes in 2019

### a. Mental Health

Following a Board development session held in late 2018, (where the Board considered the updated chapter of the JSNA, analysing the mental health and wellbeing of Leicestershire's population) Mental Health and Wellbeing was positioned as one of the top priorities for the Health and Wellbeing Board's workplan in 2019, and for the Children and Families Partnership.

The subsequent publication of the NHS Long Term Plan in January 2019 placed additional requirements on the NHS, and announced additional funding in support of this agenda, per the "Mental Health Investment Standard" for commissioners. This aims to ensure certain levels of funding are achieved to improve investment in Mental Health services overall, achieve greater levels of parity of esteem, and improved outcomes.

In March 2019 the HWB Board received a presentation from John Edwards, Associate Director for Transformation at Leicestershire Partnership NHS Trust (LPT) on the five-year transformation programme to re-design LPT's mental health services to address the increasing demand and capacity issues experienced by the service and improve the quality, efficiency and overall experience of mental health services. We took the opportunity to comment on the proposed approach and stressed the importance of patient engagement throughout the transformation exercise.

A comprehensive analysis of Mental Health services and priorities across the partnership was undertaken and a further Board development session held in January 2020. The session considered the current position across the services in terms of performance and outcomes, the vision and model of service being designed for the future, including the requirements of national policy, and the investments in place and those planned in the medium term to deliver improvements in care and treatment. The analysis and discussion led to multiagency actions proposed under four key themes (improving access to services, addressing gaps in services, with a particular focus on the housing offer, mental health and wellbeing in neighbourhoods, and early intervention for known triggers based on the ACEs approach. Progress against these areas will be monitored closely by the Board during 2020.

## b. Development of Primary Care Networks

Throughout 2019 we were joined by Tim Sacks, Chief Operating Officer at East Leicestershire CCG, to discuss the introduction of Primary Care Networks (PCNs) across Leicester, Leicestershire and Rutland.

The paper considered in July 2019 detailed the emerging role and responsibilities of a PCN, with the expectation that there would be 25 PCNs across Leicester, Leicestershire and Rutland, and that the new structure would enable practices to provide a more coordinated and enhanced service offer to their patients, using a significant uplift in national funding to develop their local workforce and infrastructure.

At the meeting we discussed how PCNs would be funded in order to provide additional roles such as clinical pharmacists, social prescribing link workers and physiotherapists, how their performance would be monitored and the arrangements in place to encourage effective communication between CCGs, PCNs and partner agencies.

The follow up presentation and discussion in November highlighted the need for further communication engagement with patients to help them understand the benefits of the new arrangements and to set out what they could expect to see happen in terms of local changes to their practice(s) and the way in which the new roles would be introduced and operate.

In particular PCNs are expected to segment their populations, using population health management approaches and tools, provide improved care planning, coordination and proactive support to people with LTCs, frailty or multi-morbidity, targeting and applying a range of medical and non-medical interventions in support of their care.

Specifications setting out national requirements for the PCNs from April 2020 onwards were still being developed at the time of the November report. These have since been consulted upon nationally leading to adjustments (in areas such as medicines management and the levels of support intended for care home residents).

The Integration Executive received a further update on the implications of the emerging specifications and the organisational development programme for PCNs in early 2020, and the Leicestershire Integration Delivery Group is currently leading operational level multiagency work in response to the PCN specifications for the Leicestershire "place". A further report is planned to the HWB Board later in 2020.

### c. Violence Reduction Network

In November 2019, we welcomed Grace Strong, Strategic Director of the Violence Reduction Network (VRN) who provided us with an update on the work of the Network since its establishment in September 2019.

We learnt that the Network was funded via a Home Office grant which specified that it needed to work with all relevant agencies operating locally to provide strategic coordination of the local response to serious violence.

The VRN was also expected to adopt a 'public health' approach in developing the local response to reducing violence and take advice from Public Health England in doing so.

We noted that the Office of the Police and Crime Commissioner and Leicestershire Police had worked closely with the Public Health Departments for Leicester and Leicestershire to develop the approach and the VRN's work could be developed further by establishing links to Integrated Neighbourhood Teams.

The VRN had been tasked with developing a detailed understanding of the prevalence of youth violence across LLR by gathering and analysing a range of data. The impact of the Network's work would also be continually monitored. It was suggested that this could in part be undertaken via the Board's Placed Based Dashboard.

The VRN was being funded via a Home Office Serious Violence grant which was to be allocated by the 31st March 2020. It has since been confirmed that funding has been secured for a further year.

## d. Director of Public Health Annual Report

In November 2019 we were presented with the Annual Report of the Director of Public Health.

The purpose of a Director of Public Health's Annual Report is to improve the health and wellbeing of the people of Leicestershire. This is undertaken by reporting publicly and independently on trends and gaps in the health and wellbeing of the population and by making recommendations for improvement to a wide range of organisations. The 2019 report focused on physical activity within the County.

The report identified seven key components to a successful physical system:

- i. Active Environment
- ii. Active Travel
- iii. Active early years and schools

- iv. Active people and families
- v. Active workplace and workforces
- vi. Active communities
- vii. Physical activity as medicine

The report recommended that policy makers and public sector organisations should adopt the seven components set out above as the basis of thinking about their approach to improving physical activity levels.

We welcomed the report which illustrated the joint working arrangements between Public Health and external partners to encourage Leicestershire residents to increase their physical activity levels. In addition, the Council and LeicesterShire and Rutland Sport were developing a joint approach to encourage employers to increase physical activity levels amongst their workforce.

We recognised that a joined-up approach amongst providers was essential for a whole system approach to be implemented. This would include district councils which could influence the way in which housing developments were designed to encourage physical activity and tailor local authority owned gyms to accommodate a variety of needs.

Linked to this was a report we considered in September concerning Active Design in new County Housing Developments. The report detailed how Leicestershire County Council was using Health Impact Assessment (HIA) and a Health in All Policies (HiAP) approach to influence the design of major developments, policies and programmes across the County, ensuring that new housing developments facilitated increases in physical activity by good design and promoting active travel as the default option for moving both within and to and from new developments.

## e. Joint Strategic Needs Assessments

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

The purpose of the JSNA is to improve the health and wellbeing of the local community and reduce inequalities for all ages. It is viewed as a continuous process of strategic assessment and planning with the aim to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities.

Each chapter reviews the population health needs of the people in Leicestershire in relation to the subject matter and sets out he unmet needs and recommendations

arising from the needs assessment so that these can be taken forward by commissioners.

### Process for JSNA 2018-21

In January 2018, a new approach was approved by the HWB Board for the development of the JSNA 2018-21. The JSNAs are 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. The new approach would therefore see the JSNA published in subject-specific chapters throughout the three-year time period on an iterative basis, in line with CCG and local authority commissioning cycles.

### **Achievements for 2019**

The following new JSNA chapters have been published at the following link: <a href="http://www.lsr-online.org/leicestershire-2018-2021-jsna.html">http://www.lsr-online.org/leicestershire-2018-2021-jsna.html</a>

- Best Start in Life (0-5s)
- Alcohol Misuse in Adults
- Substance Misuse in Adults
- Air Quality and Health
- Obesity: Physical Activity, Healthy Weight and Nutrition
- Multimorbidity and Frailty
- Sexual Health
- Loneliness
- Tobacco Control

### **Engagement**

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, the findings of several chapters were presented to the HWB Board during 2019. 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 ensuring findings from the JSNA chapters are collectively owned and approved.

Updates regarding the status of JSNA chapters are published regularly in the Health and Care Integration newsletter (<a href="here">here</a>) and the Leicestershire Equalities Challenge Group newsletter.

## f. Leicestershire and Rutland Locality Profiles

In May 2019 the Board considered a report which provide a summary of health-related data at a locality level using data from local health profiles.

The data summarised health indicators for the 10 localities in Leicestershire. By comparing the data, we were able to consider how people's health in each integrated locality team across Leicestershire and Rutland compared to the rest of England. A copy of the report can be found here

It was clear that Leicestershire and Rutland had performed well in many indicators, (which included children's weight, emergency hospital admissions and mortality and causes of death) with Leicestershire and Rutland having eight indicators that performed better than the England average across all locality areas. However, there was not an even spread across all areas and there was room to improve the overall health of the population.

Noticeably, was the performance of Oadby and Wigston, which was significantly worse compared to the national average for emergency hospital admissions for myocardial infarctions, knee replacement and A&E attendances for 0-4 year olds.

### Oadby and Wigston Health Summit

In February 2019, a health summit was held to discuss the health inequalities in Oadby and Wigston and following this a number of semi-structured interviews and focus groups were facilitated with key local individuals, healthcare professionals and local residents in order to develop a more detailed understanding of the wider issues and potential solutions.

Individuals from a range of organisations attended the health summit and were invited to discuss four key questions before providing verbal feedback to the wider group. Following the summit, further analysis was undertaken to identify participants and further qualitative research was planned. The qualitative data from all sources was then analysed using thematic analysis in order to identify themes within the discussions.

The thematic analysis identified nine main themes

- three communities,
- services,
- collaborative working,
- education and employment,
- engagement,
- individual beliefs and behaviours
- local environment,
- population demographics
- mental health.

## g. Better Care Fund Refresh

Throughout the year, we have received regular updates on the implementation of the Better Care Fund (BCF) Plan.

The outputs of an exercise to refresh the Plan in line with the annual planning arrangements for the CCGs and local authority were reported to the Board on 14<sup>th</sup> March 2019, which included the draft BCF expenditure plan for 2019/20.

We received a further update at our meeting in July, before approving the final version for submission to NHS England on the 26<sup>th</sup> September in line with the national timetable.

- A key focus remains on improving delayed transfers of care (DTOC). The Government's mandate to the NHS for 2019/20 set an overall ambition for reducing delays to below 4,000 hospital beds occupied by patients delayed without discharge per day across England. In Leicestershire, this translated to no more than 7.88 average bed days delayed, per day, per 100,000 population. Leicestershire are currently averaging 6.96 average bed days delayed, per day, per 100,000 and are on track to achieve this target.
- The BCF target for non-elective admissions in to hospital has been set for up to 72,313 for 2019/20. For April 2019 to January 2020, there have been 59,392 non-elective admissions, against a target of 60,044 a variance of 652 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 850 admissions during 2019/20. The final position for 2019/20 was a total of 885 admissions.
- The target for the proportion of older people who were still at home 91 days after discharge has been set at 88% for 2019/20. The final position for 2019/20 88%, matching the BCF target.

## h. Communications Campaign

Partners across the HWB Board collaborate to deliver an integrated communications programme targeted to the health and wellbeing outcomes in our <u>Joint Health and Wellbeing Strategy 2017-2022</u> and the wider work in progress across Leicester, Leicestershire and Rutland to transform health and care

The communications lead from Leicestershire County Council who supports the Health and Wellbeing Board, works closely with the Unified Prevention Board, district council health leads and all communications colleagues across the partnership in order to develop and deliver the approach and materials for these activities and campaigns, including supporting the local coordination of national campaigns such as Stoptober, Winter Wellness and flu vaccination programmes.

The first of the five outcomes set out within Leicestershire's Joint Health and Wellbeing Strategy is: The people of Leicestershire are enabled to take control of their own health and wellbeing.

The Board's communication programme for 2019 focused on self-care in support of this outcome. Self-care covers many areas, but overall it is about an individual looking after themselves in a healthy way. It can include encouraging people to live healthier lives by quitting smoking, drinking sensibly or exercising more, or being more mindful of their mental health and wellbeing. The term is also used to cover a person's ability to understand and manage their care, including their ongoing conditions and medications, treating minor ailments and knowing when and how best to seek help across different settings of care, including how to access urgent care appropriately in the community.

The focus of the Health and Wellbeing Board's self-care campaigns in 2019 included:

Reducing loneliness and social isolation – in December 2018 we launched '<u>Within Your Gift To Give'</u> a campaign aimed at reducing loneliness and social isolation, encouraging people to make and maintain connections with people in their communities through suggested activities and signposting to services. The campaign reached over 22,000 people on social media and 429 page views on This was followed by a 2019 winter campaign in 2019, and also saw the launch of '<u>Tackling Loneliness</u> in <u>Leicestershire</u>' a toolkit aimed at communities

Mental Health and Wellbeing - In August 2019 (due to the priority the Board was placing overall on mental health during 2019/20), we launched 'Five Ways to Wellbeing' a multiagency campaign aimed at improving understanding of how to look after our own mental health and wellbeing, how to look out for signs and symptoms of mental health issues in others and how to show support. The campaign had a reach of over 398,300 on social media and 333 engagements.

The Reading Well programme led by Adults and Communities Services at LCC launched a new collection aimed at the emotional wellbeing of primary school aged children

<u>Start A Conversation</u> – we continued to push out messages and develop materials raising awareness of our suicide prevention campaign which supports people to be

aware of the warning signs for suicide and to feel confident in starting a conversation.

Signposting to self-care options – signposting to local healthcare services and awareness of county wide opportunities to engage in a healthier lifestyle.

Falls prevention - publicising the steady steps falls prevention groups, promoting falls prevention via leaflets and a <u>video</u> highlighting strength and balance exercises that are easy to do at home.

In support of Leicestershire's Health and Care integration programme a regular stakeholder bulletin is produced and distributed electronically which features a wide range of developments – examples from 2019 can be found at this <u>link</u>

## i. Health and Wellbeing Board Development

We held a Development Session for Board members in December 2019 to jointly consider Leicestershire's place-based priorities for 2020/21. We particularly focused on:

- Leicestershire's existing <u>Joint Health and Wellbeing Strategy</u> (JHWBS) and its priority outcomes
- The impact of national policy and other national and local strategic developments in health and care since the current JHWBS was produced in 2017
- The approach to population health management currently being developed in LLR and how this can be applied to place based working/priorities at place.

There were two initial presentations to support the Board in considering these issues; the first was a reminder and overview of the current priority outcomes in the Leicestershire JHWBS, and the second was an introduction to the emerging approach to population health management (PHM) in Leicester, Leicestershire and Rutland. The latter also provided an update on existing and new sources of data and insights for the Leicestershire population, in particular for place and neighbourhood working.

Recommendations from the development session were considered by us at the Board meeting in January 2020 and subsequently a detailed action plan has been produced.

## j. Working in Partnership with Healthwatch

The role of Healthwatch is to collect, share and champion the lived experience of service users and members of the public.

The Healthwatch Advisory Board Chair and the Manager attend meetings of the Board and the Overview and Scrutiny Committees to provide insight on the experiences of service users and to ensure the public voice continues to be heard at this key point of influence in Health and Social Care services.

During the previous year, the Healthwatch Chair and Manager have continued to meet with senior staff within the Health and Care services to understand the priority areas and to raise areas of focus and concern highlighted in our ongoing priority work.

The recent reports looking into the patient experience of discharge from hospital and patient experience of medicine management in hospital have highlighted recommendations to both NHS providers and have led to focused improvement plans in local services.

Working with the Board, as well as its involvement in other key boards within the health and care system, Healthwatch has been supported to challenge in a meaningful way the policies and strategies presented through 2019.

Healthwatch looks forward to working with the members of the Board and support officers in the future as we focus on ensuring effective public engagement during the challenges ahead.

## **Section C: Looking forward to 2020**

## a. Delivering our Vision and Strategy

Our current 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."

The current Joint Health and Wellbeing Strategy will need to be reviewed and adapted in order to recognise the Board's role within the local system as it recovers from the coronavirus pandemic. The revised Strategy will also have to recognise other significant developments since its adoption in 2017 such as the new NHS Plan and major societal challenges with increasing prominence and policy attention, such as climate change, digitisation, the future model and funding for social care and violence reduction.

To deliver our collective agenda for 2020 we will have a greater focus on providing leadership and championing opportunities to improve health and wellbeing outcomes for everyone in Leicestershire.

### b. JSNA refresh

A further three chapters are proposed to be ready for publication by the end of the 2020 calendar year:

- Children and Young People's Physical Health
- Children and Young People with Special Educational Needs and Disabilities (SEND)
- Dementia

Recognising the important role that the JSNA plays in illustrating the health and wellbeing of the population of Leicestershire, we will look proactively at the recommendations of each chapter. This will help us to build up a picture of the further actions we need to take to improve health and wellbeing and will help to inform our future commissioning intentions.

## c. Health and Care Integration and the Better Care Fund

We are expecting to receive national BCF policy framework and operating guidance for 2020/21 shortly. Work to review the BCF plan for 2020/21, to align with commissioning intentions across CCGs and the council, commenced in October 2019, and a refreshed expenditure plan has been finalised locally, and shared with members of the HWB Board via email in April 2020. The Plan may be altered in order to include, any necessary adjustments needed once the national policy framework 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. In particular to fully implement the new models of care for home first and integrated neighbourhood teams, further re-design of community services, develop and implement a strategy for Learning Disabilities, a new offer for Assistive Technology, and implementing the new health and care data integration tool.

The NHS Long Term Plan, the development of Integrated Care Systems across the NHS and a pending Green Paper on Adult Social Care will mean significant policy developments in 2020/21.

The BCF policy framework will be fully refreshed nationally in light of this and a new approach is expected to be implemented from April 2021 onwards.

During 2020, we will focus on preparing for these changes to ensure that our future plans will achieve the requirements.

Leicestershire has been given the opportunity to participate directly in the national review of the BCF policy framework and provided feedback to the research team at the end of March 2020.

### d. Pharmaceutical Needs Assessment

The Health and Wellbeing Board has a statutory responsibility to prepare a Pharmaceutical Needs Assessment (PNA) for Leicestershire and publish it by March 2021. The PNA:-

- Identified the pharmaceutical services currently available and assessed the need for pharmaceutical services in the future;
- Will be used to 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 located;
- Will be used to help inform decision making in response to applications made to NHS England by pharmacists and dispensing doctors to provide an additional pharmacy provision.

A PNA Reference Group has been established to oversee the detailed production of the PNA documents for Leicester, Leicestershire and Rutland and to ensure a consistent, local approach. Membership of this group includes NHS England, the Leicestershire Pharmaceutical Committee, Local Professional Network for Pharmacists and the Leicester, Leicestershire and Rutland Local Medical Committee.

It is intended that Leicestershire's pre consultation draft will be presented to the Health and Wellbeing Board for approval to consult at a meeting later in 2020. Following a period of consultation, it is intended the final draft PNA will be submitted to the Board for approval in March 2021, enabling publication towards the end of March 2021.