

HEALTH & WELLBEING BOARD

Thursday, 5 September 2024

PRESENT – Councillors, Councillor Damian Talbot (Chair), Gunn and Kapadia.

OFFICERS –

Integrated Care Board (ICB)	<i>Claire Richardson - Director of Health and Care Integration BwD</i> <i>Paul Hegarty – Associate Director for ICB</i>
East Lancs Hospital Trust (ELHT)	<i>Tony McDonald - Executive Director of Integrated Care, Partnerships and Resilience</i>
Lancashire & South Cumbria Foundation Trust (LSCFT)	<i>Amy Devine – Director of Operations</i>
Voluntary Sector	<i>Sarah Johns – Chief Officer Healthwatch BwD</i> <i>Vicky Shepherd – Chief Executive Age Uk BwD</i>
Blackburn with Darwen Council	<i>Abdul Razaq – Director of Public Health BwD</i> <i>Matthew Palmer – Public Health Registrar</i> <i>Katherine White – Deputy Director Adult Social Care BwD</i> <i>Elise Carroll – Public Health Intelligence</i> <i>Fiona Inston – Public Health Consultant BwD</i> <i>Catherine Taylor – Public Health Consultant BwD</i> <i>Joanne Siddle - Strategic Director Children & Education (DCS)</i> <i>Tina Kuczer - Clerk</i>

RESOLUTIONS

1 Welcome and Apologies

The Chair welcomed everyone to the meeting and introductions were made.

Apologies were received on behalf of:

Cllr Jackie Floyd

Andrew Harrison – Place & Programme Finance Manager

Mark Warren – Strategic Director Adults & Health BwD

Dilwara Ali – CEO BwD Healthy Living

Dr Mohammed Umer – Clinical Director BwD Primary Care Networks

Angel Allen – CEO Spring North

2 Declarations of Interest

There were no Declarations of Interest

3 Minutes of Previous Meeting - 19th June 2024

The Minutes of the Meeting held on 19th June 2024 were submitted for approval.

RESOLVED – That the Minutes of the Meeting held on 19th June 2024 be agreed as a correct record.

4 Public Questions

The Chair informed the Board that no public questions had been received.

5 Start Well and Children's Partnership Board Update

Strategic Director of Children & Education (DCS), Joanne Siddle, provided the Health and Wellbeing Board with a presentation of the Children's Partnership Board, Start Well, Safeguarding Children Partnership and SEND Update.

The presentation covered the following topics:

- What we have done and our Next Steps
- What is a Family Hub – The Expectations
- Funded Services – The Delivery Expectations
- Latest Developments and Structure
- Multi-Agency Safeguarding Arrangements
- Changes to WT 2023 for Partnership and where we are currently
- SEND – Local Picture
- What we are Doing Well
- Our 4 Key Priorities as a Local Partnership
- Preparation for Adulthood (PFA) and Next Steps

The Board were informed that Bola Owalabi, Director of the National Healthcare Inequalities Improvement Programme (NHS England) recently visited one of our Family Hubs and was impressed with the Oral Health Programme for our young children. This was part of the BwD Strategy that was integrated into the Hubs. Parents and children reported their experience of the service was a positive one. 345 children within the Hubs and Children's Centre Nurseries had received fluoride treatments on their teeth. The Little Harwood Family Hub was leading the new "Kind to Teeth" message within parent focus groups.

The Department for Education had reported that BwD were "Doing Well" and the comprehensive wraparound services available to families, particularly Mental Health support, was highlighted in their report. Parents had shared that

they had been saved from crisis situations due to the early intervention from the Hubs and professional partners.

Joanne Siddle clarified that the “Expectations for the Family Hub Service” was not listed in priority order, and that Reducing Parent Conflict was part of the whole offer, and not to be considered as Priority 1.

It was noted that following changes to WT 2023 for Partnerships, the Lead Practitioner for Section 17 (Child in Need) cases did not have to be a qualified Social Worker but could be any professional with support provided by qualified Social Workers.

The Board was reassured that the recent Joint Targeted Child Protection Inspection (JTAI) did not flag any concerns and that we did well. Further Inspections from various agencies were being planned into the programme of works. The window for the SEND inspection was now open and the Youth Justice inspection was expected in 2025.

It was acknowledged that there was a constant wheel of inspections, both focussed and routine, and that progress had been made. The service provision was stronger, attitudes to inspections had changed and had been integrated into service scrutiny.

Joanne Siddle confirmed that information fed into the Safeguarding Board was appropriate from the Voluntary Sector and that membership of the Board was not always necessary by partner agencies.

The Board was advised that although previously criticised for being ambitious; our Transitions, Learning Difficulties and Autism Strategies would be looked at from all angles prior to the expected SEND Inspection. It was acknowledged that many parents expressed concern for their children following life after school, but that services were in place to support them into adulthood.

The Board was informed that a Child Poverty Task Force had been set up following the recent change in administration and was considered a major focus for the new Labour Government. It was noted that the Work and Pensions Secretary, Liz Kendal, and the Education Secretary, Bridget Phillipson, were the joint leads of the ministerial taskforce to begin work on the Child Poverty Strategy.

Cllr Julie Gunn confirmed that best practice information had already been shared with the taskforce.

ACTION: Further information to be provided to Cllr Amin Kapadia regarding Counselling Services on offer within the Family Hubs - JS

RESOLVED – That the Board

- a) Noted the progress of the Family Hubs
- b) Noted how the Family Hubs are playing a crucial role in delivering the Start Well Agenda for Blackburn with Darwen Families

6 Pharmaceutical Needs Assessment (PNA) Development

Consultant in Public Health, Cath Taylor, provided an update to the Board of the pan-Lancashire work to review and update the current Pharmaceutical Needs Assessment (PNA) and the required period of public consultation. The paper followed an Executive Member Briefing update of 25th June 2024. It proposed that the PNA would be undertaken across a pan-Lancashire footprint, working alongside colleagues from Blackpool, Lancashire County Council (LCC), Pharmacy Services and the Integrated Care Board (ICB).

The Board was advised that development would be led by a steering group, with a working group who would update much of the document.

The Board was reminded that it was a statutory requirement for the Health and Wellbeing Board to publish a PNA by 1 October 2025 and to keep it up to date by publishing notifications of pharmacy changes and supplementary statements (where significant changes in community pharmacy provision had occurred). A paper to the Health and Wellbeing Board in November 2021 outlined the process for dealing with changes such as notifications and consolidations. Since the 2022 PNA, 7 x pharmacies had closed (2 being distance selling pharmacies), 2 x pharmacies had reduced their opening hours and 1 x pharmacy had relocated. 39 pharmacies were currently operating in the borough.

Several metrics were used when assessing if there were sufficient pharmacies in Blackburn with Darwen, including a drive-time assessment. In the 2018 and 2022 PNAs a 20-minute catchment drive-time was used. The Board was asked to approve reduction of the metric to 10-minutes. The Board were reassured that reducing the drive-time would still result in populated areas of the borough being within a 10-minute catchment of a community pharmacy, but that it would be more sensitive to pick up any potential gaps in provision should, for example, pharmacies close in future.

It was acknowledged that pharmacies and community provision remain under-utilised, with pressure still being felt unnecessarily at GP and A&E level. There was an opportunity to raise awareness of pharmacy services during the Autumn and Winter Aging Well/Winter Advertising campaigns.

The Board was advised that Dentists and Opticians also fell under the community provision banner and that of 15 x Integrated Care Boards (ICBs) who provided additional support targeting Heart Attack Risk in the public, 6 x would be taking on additional Optometry activity as part of "Making Every Contact Count".

The Board agreed that low car ownership had an impact on service accessibility and assurance was required that the figures stated were considered reasonable. The Board was advised that service provision did not fall within the PNA remit – but was governed by the ICBs and that not all pharmacies provided the same services.

It was proposed that a further report would be brought to the Health and Wellbeing Board in September 2025 to sign off the Pharmaceutical Needs Assessment 2025

RESOLVED – That the Board

- a) Supported development of the Pharmaceutical Needs Assessment, including engagement of all relevant statutory partners with the process and the required statutory consultation on the draft PNA in Summer 2025.
- b) Agreed the recommendation to reduce the catchment, used as part of the assessment of sufficient community pharmacy provision, to a 10-minute drive time.
- c) Would receive a further report in September 2025 to sign off the Pharmaceutical Needs Assessment 2025.

7 LSC ICB Prevention and Health Inequalities Plan 24/25

The Associate Director of the ICB, Paul Hegarty, provided the board with a summary report of the plans set out in the ICB Operational Plan 24/25 for Prevention and Health Inequalities.

The Board were reminded that tackling health inequalities was one of the core duties of the ICB. The ICB had a comprehensive approach to reduce health inequalities through improving access, experience, and outcomes, with particular focus on making the greatest improvement, fastest, for people who faced the greatest barriers to good health. The ICB had also developed a much clearer focus on prevention programmes, this included the agreement and implementation of the new LSC Tobacco-free strategy.

The report described the plan as;

- Opportunity 1 – Improved care for the most disadvantaged
- Opportunity 2 – Optimised prevention in our models of care
- Opportunity 3 – Developed capability across the system

The report Appendices set out in detail the plans across the ICB workstreams that had contributed to tackling Health Inequalities. The focus was to ensure that work to address Health Inequalities was embedded throughout the ICB. The Board was further advised that the report demonstrated close links between colleagues across Prevention, Lancashire County Council and the ICB. The NHS England Framework had been created by Bola Owalabi, Director of the National Healthcare Inequalities Improvement Programme (NHS England) Team. The National Health Inequalities Dashboard identified Blackburn with Darwen as one of the 20% most disadvantaged Boroughs, with Blackpool and Burnley the only areas with higher deprivation quotients. The Board was informed that an updated National Report on Deprivation was due in late 2025. Work was ongoing as the data sets, indicators and metrics had changed since the last report of 2019.

The Board was further informed that active conversations were ongoing with the new Labour Government regarding Life Expectancy, with an ambition to increase life expectancy by 5-years, living healthier and more actively – not just longer.

It was agreed that GPs continued to find patients difficult to engage with and uptake of seasonal vaccinations for flu/covid etc was very low in the Borough, with particularly low uptake from the South Asian and Black demographic groups. It was acknowledged that trust needed to be built and some hand holding was required. Further work on targeted funding for particular demographics was needed. The current administration appeared to be more

inclined to undertake greater regulation as behaviour change alone did not appear to be working.

The Board acknowledged that digital exclusion, literacy and activity levels, low expectations and low aspiration levels had a huge impact on local life expectancy and were root causes of further exclusion for the vulnerable members of our communities.

ACTION: The Board asked that following receipt of the LSC ICB Prevention and Health Inequalities Plan, a BwD Borough Inequalities report be created, to better understand the local issues and to be shared in time for the December 2024 Health and Wellbeing Board – PH

RESOLVED – That the Board

a) Noted the contents of the report and agreed to receive regular updates

8 ICB & ICP update

The Director of Health and Care Integration BwD, Claire Richardson, provided the Board with a report on the delivery programme of the Place Based Partnership for Blackburn with Darwen.

The report highlighted;

The Place Partnership Delivery Plan 2024-25

The Place Based Partnership Board (PBPB) agreed the delivery plan for 2024-25 in July 2024, outlining the work programme that the Partnership would drive forward in relation to health and care integration. There remained a clear link between the delivery priorities and the priorities of the Health and Wellbeing Board of Start Well, Live Well, Age Well and Die Well.

It was agreed to have a triumvirate leadership model approach including clinical, executive and programme leads for each of the key work programmes. The PBPB would receive regular highlight reports that would alert, assure and advise on progress and key issues and the Health and Wellbeing Board would continue to receive delivery updates.

Community (physical and mental) health services transfer update

The transfer of NHS adult community physical health services in Blackburn with Darwen from Lancashire and South Cumbria Foundation Trust (LSCFT) to East Lancashire Hospital Trust (ELHT) and the transfer of children and young people's mental health services (ELCAS - East Lancashire Child and Adolescent Services) from ELHT to LSCFT went live on 1 July 2024.

Lancashire and South Cumbria Better Care Fund (BCF) Review Update

The HWBB had endorsed the scope for the Lancashire and South Cumbria BCF review and this had commenced across the ICB footprint with the aim of maximising joint funding opportunities across the ICB and Local Authorities. A time limited working group commenced in May 2024 to support the project with consulting and representatives from each of the four places. The group had a remit to codesign a reporting and approvals schedule. The group was meeting regularly to progress the review and the HWBB would continue to receive updates.

Urgent and Emergency Care (UEC) Recovery Plan

A full UEC plan for recovery and transformation had been developed and was first submitted to the ICB Board on 14 June 2024. Further revisions had since been submitted with a final version due on 7 August 2024. The recovery plan for Blackburn with Darwen and East Lancashire had a clear focus on delivering interventions to ensure people can remain safe and well in their own home, avoiding hospital attendances and admissions as much as possible. The delivery actions outlined within the UEC plan were captured within the Place-based Partnership delivery plan, to avoid duplication of effort and activity.

Lancashire and South Cumbria ICB Joint Forward Plan

The ICB were mandated to refresh the Joint Forward Plan (JFP) by the end of July 2024 to include:

- (a) information on progress of implementation during 2023/24;
- (b) reflect any change in direction for the new 'year 5' of the plan; and
- (c) update the plan to include the reference to several developing system initiatives.

The Health and Wellbeing Board had a statutory remit to review the ICB Joint Forward Plan and consider whether it felt the plan adequately reflected and responded to the needs of people in Blackburn with Darwen.

Integrated Care Partnership Update

An ICP development session was held on 5 June 2024, facilitated by the NHS Confederation and provided space for members to reflect on the purpose and role of the ICP and to consider how they wanted to see the ICP develop and begin to identify priorities for collaboration.

The Board were advised there was a financial deficit of £175 million, efficiency savings were challenging and currently they were not able to reduce the deficit.

Urgent Care remained a key area of concern, corridor care needed to be reduced and non-urgent attendance at A&E needed to be challenged further. There was a need for clinical reconfiguration of services, with accelerated delivery programmes within specialist centres to be looked at to reduce waste and duplication, increase savings and improve outcomes for patients. The Board agreed that more could be done to maximise every available funding stream but acknowledged difficult choices were being made on a weekly basis.

RESOLVED – That the Board

- a) Noted the update provided in the report on the development of the Blackburn with Darwen Place Based Partnership and the collaborative delivery that was underway to integrate health and care for the residents of the Borough
- b) Noted the update regarding the Lancashire and South Cumbria Integrated Care Board and Integrated Care Partnership

9 JSNA Update

Elise Carroll, Public Health Intelligence BwD, shared the Joint Strategic Needs Assessment (JSNA) Update and presentation to the Board.

The Board were reminded that JSNAs were produced by all Health and Wellbeing Boards and provided an assessment of the current and future health and care needs of the local population, to support strategy development, service planning, commissioning and service delivery.

It was a statutory responsibility of both the local authority and the Integrated Care Board (ICB) to prepare their JSNA through the Health and Wellbeing Boards.

The Board were advised that In Blackburn with Darwen the JSNA was led by the Public Health Team of Blackburn with Darwen Borough Council. Content and development of the JSNA was guided by the JSNA Partnership Group, on behalf of the Health and Wellbeing Board. The JSNA Partnership Group membership was formed to reflect those organisations represented on the Health and Wellbeing Board as well as representatives from the Council, including Adults & Health and Chief Executives department. The JSNA aimed to describe the health needs of the population, by area and/or population group to help support a healthier population and reduce health inequalities.

The report updated the Health and Wellbeing Board on work on the JSNA in 2023/24 and the programme of work planned for 2024/25

Progress within the 2023/24 JSNA included;

- The Partnership Group met 3 x times
- A Development session was held for Health and Wellbeing Board Members in May 2023
- The following Chapters were completed:
 - Mental Health, Mental Wellbeing, Self-harm and Suicide
 - Sexual Health
 - Unpaid Carers
 - SEND
 - Diabetes

(Chapters on Substance Misuse and Alcohol were being finalised at the time of the HWBB meeting)

- A short video to explain the purpose and uses for the JSNA was developed and shared with partners which was now available via the JSNA webpage

The 2024/25 objectives for the JSNA included:

- The JSNA Partnership Group to continue to meet
- Overview sections to be updated
- Chapters to be developed included:
 - ‘Falls and Deconditioning’
 - ‘Learning Disability and Autism’
 - ‘Infant Mortality’
 - ‘Bowel Screening’
 - ‘Housing and Health’
- A Short review of Dementia data was to be completed
- Options for the development of an improved JSNA website to be scoped out

It was confirmed that Die-Well currently sat with Age-Well as there was less statistical data available, but from an All-Age perspective, it was an issue not solely related to Age.

The Age Well partnership had requested data on Multiple Long-Term Conditions, Frailty and Deconditioning to inform the BwD Falls Plan.

ACTION: The Board requested that the video explaining the purpose and uses for the JSNA be shared to the Board - EC

RESOLVED – That the Board

a) Noted the contents of the JSNA Update

10 Any Other Business

There was no other business.

11 Proposed Items for Next Meeting

The proposed items for the next meeting (December 2024) to include:

For Decision;

- The Mental Health and Suicide Prevention Strategy

For Information;

- ICS Dementia Strategy
- Healthwatch Update
- Better Care Fund Update
- SEND Self Evaluation Framework (SEF)

Standing Items;

- ICB and Place Based Partnership Update
- Age Well Update – 6-month Update

12 Date and Time of Next Meeting

The next meeting was scheduled to take place on Thursday 5th December 2024
(18:00-20:00)

Signed.....
Chair of the meeting at which the Minutes were signed
Date.....