

Notes of the Oadby & Wigston Health & Wellbeing Board
Tuesday, 10 December 2013

Present: Cllr S Dickinson (Chair), Cllr J Boyce, Cllr S Haq, Sandra Parker (OWBC Community Safety and Tenancy Manager), Mark Smith (OWBC Young Person's Co-ordinator), Dr R Palin, Tim Sacks (COO, East Leicestershire & Rutland CCG)

1. Apologies for Absence

Cllr B Boulter, Anita Pathak-Mould, Avril Lennox, Kevin Blanks (Healthwatch), Cllr B Dave, Geoff Maltby (Sports Link), Neil Baker (Community Action Partnership)

3. Minutes of Last Meeting

In regards to Item 4a (Update on Alzheimer's Memory Advisor Services and Feedback from Forums) the following update was given by Dr R Palin;

- a) Advisor Services are active in GP services
- b) Services are proving to be good for carer signposting
- c) Current feedback from patients is positive

Cllr Boyce asked if services were meeting the expected number of referrals, Dr P stated that they are.

In regards to Item 4d (Four Ways to Warmth) the following update was given by Josie Nixon (Warm Homes Officer) via email;

- 235 audits have been carried out
- 31 clients referred to the crisis fund (for low cost energy efficient improvements, loft insulation/draft proofing) since July 2013
- 11 'First Contact' referrals have been made to partner agencies
- The average saving per household has been £100.00
- The highest individual saving is £340.00

Also covered were updates on the Local Authority Competition Bid (DECC);

- 82 'Money Matters' accounts providing clients with £149.00 off of their priority bills opened. Also referred to the Citizen's Advice Bureau
- £5.00 and £49.00 debt relief vouchers were distributed for people on pre-payment meters
- 44 Solar Photovoltaic Panels have been fitted
- 25 Central Heating improvements made (including boiler replacements, thermostats and radiators)
- Numerous low cost energy efficient measures carried out including draft stripping, double glazed doors, loft insulation and insulation to the side of stairs and ceiling (of car port)

Leicestershire has received an award from the Carbon Action Network (CAN) in recognition of the work done on the DECC pioneer fuel poverty bid.

Josie is also providing training to frontline OWBC staff this is funded by the Big Energy Saving Grant. This training covers;

- The merits of switching tariffs for electricity and gas
- Understanding fuel bills
- Help for people struggling with their bills

Cllr Boyce enquired about the referral process for those who are in fuel poverty. SP suggested that Josie deliver another Fuel Poverty Presentation at Brocks Hill for other staff/interested parties, this would answer any questions or queries.

In regards to Item 7 (Healthwatch Update) the following corrections were submitted by Kevin Blanks via email;

- Point 8: Senior Healthwatch Volunteers and VAL senior officers agreed some Healthwatch Leicestershire staff have underperformed but a new understanding of responsibilities and leadership is substantially improving the organisation's performance.
- Point 9: All Healthwatch task-and-finish groups are making satisfactory progress. Healthwatch Leicestershire will report on outputs and outcomes in due course.
- Point 10: Ivan Liburd is not the officer progressing new performance initiatives.

4. Council Priorities Update

a) Feedback on Health Champions Meeting

SD informed the board of a presentation run by East Midlands Ambulance Service (EMAS) on the use of defibrillators. This emphasised their importance in cutting the risk of fatal cardiac arrest.

The possibility of acquiring defibrillators for Oadby, Wigston and South Wigston was raised. RP stated that most GP surgeries in the borough already have defibrillators as well as the fire and police stations. MS confirmed that there is one available at Wigston Police Station. JB enquired as to who installed the Police Station's defibrillator but the answer was not know to those present. RP confirmed that there are two defibrillators available at Bushloe End's GP Surgery.

SD suggested that EMAS repeat their presentation at the Health Champions Meeting to the Health and Wellbeing Board.

RP suggested that perhaps defibrillators should be made available at GP surgeries out of hours as this is where most people in the borough would expect to find one in an emergency.

JB suggested that a defibrillator could be situated at Age Concern. The Health and Wellbeing Board would look in to the costs and feasibility of this. SP suggested that more detailed information be brought back to next meeting for further discussion

b) Health Practitioner's Directory

MS provided an update on the Health Practitioner's Directory project & provided the board with 'version two' of the printed directory. The planned format of the electronic directory is not viable due to a lack of specific IT requirements; MS suggested that the electronic version become an adapted and searchable spreadsheet.

RP spoke of an electronic version of a similar directory already in use by GP services, which is also searchable, MS to email RP to establish a link with Mark Finlay; who monitors the GP services electronic directory.

JB suggested someone not familiar with organisational jargon review the directory to ensure it's presented in plain English.

SD provided MS with some leaflets from organisations she wishes to see included in the directory. JB stated that Voluntary Action South Leicestershire are not to be included, as they do not cover our borough; Community Action Partnership take up this mantle instead.

SH suggested that contact details for social services and occupational health also be made available through the directory. JB added a desire to see each GP surgery in the borough to be featured in the directory.

SD clarified that this is a resource for professionals and not a handout for members of the public. In this respect including details of GP surgeries etc. would be redundant. JB suggested that the directory should contain this information anyway in case it is ever given out as a handout.

RP suggested that if this directory is just for health professionals then a print version is not required. If the directory is to be used as a handout however then it should be all encompassing but on a balance; the page count should be kept down, details for each Chemist in the borough should be included as well as out of hours care sites and contacts. He then warned of how this will potentially duplicate the role of the NHS 111 number as it already offers these functions.

JB pointed out how the NHS 111 number is countywide and the directory would focus on the Oadby and Wigston locality. SD expressed how the directory should highlight local service availability.

MS informed the board that the directory has been designed to be easily updated and comprehended.

JB raised a question as to whether the NHS Direct website exists. RP informed it does but will be switched off soon and that the NHS Direct phone line may also be discontinued soon. And that members of the public should be referred to NHS Choices or patient.co.uk.

SD suggested including dentists and other emergency contacts in the directory. JB expanded this to include some city based GPs. RP warned of the dangers of going too wide with the directory by including surrounding areas.

c) Health and Social Care

SP spoke of the Integration Transformation Fund: £3.8bn pooled fund. Clinical Commissioning Groups and County Council agreed the priorities of this fund and the Health and Wellbeing Boards have signed off on it. The funding will be available from 2015/16 and a process for the interim 2014/15 is being developed.

The Integration Transformation Fund will be used to improve outcomes for patients across seven key areas including preventing/reducing hospital admissions.

SD asked about Disabled Facilities Grants (DFG). SP stated that a new locality service model is coming in to effect and John Stemp was attending a meeting relating to it on the same date of this Health and Wellbeing Board meeting.

JB stated that Occupational Therapy work in one area and that DFG work here has no structured link between both. Rutland included both groups on their budget meetings. SP mentioned that Anita Pathak-Mould is addressing the above issue and is wanting to bring it in house.

SH enquired to whether the CCG has planned to reduce pressure on A&E and aid in GPs informing the public? RP stated that work is going on with University Hospitals Leicester (UHL) and that the level of GP to A&E referrals for the borough is average for the UK. Pressure is reduced on A&E due to urgent care centres lowering referrals. Both the CCG and UHL are using winter fund money to improve care in homes and for the elderly.

SH pointed out that the number of referrals are going up and putting pressure on A&E. Campaigns are on-going but not enough. SH then mentioned that the Oadby '8 till 8' centre is to be debated at the Oadby Resident's Forum.

d) Health in Pregnancy and Infancy (Infant Mortality)

Infant Mortality Roadshow to improve knowledge on the subject in Spring 2014. Locations of roadshows to be confirmed.

The Health and Wellbeing Board should continue to push good practice and work to reduce teen pregnancy. SD is in support of this especially in light of underweight children in South Wigston and the level of use its Food Bank sees. RP pointed out that health visitors, crèches and infant schools are good at picking up on underweight infants and will refer to food banks where required. SD also enquired about the Supporting Leicestershire Families connection; SP spoke of the needs analysis day that recently took place and intends to research this further for the next meeting.

SH mentioned that levels of teenage pregnancy are rising and that South Wigston has the highest rate in the borough.

5. Books on Prescription Launch

SD informed the Board that Books on Prescription was officially launched on 28 October 2013. The launch went well and effectiveness monitoring was in place and looking good. Leaflets relating to Books on Prescription can be found in all pharmacies etc. and the books can be found in all of the borough's libraries with the exception of South Wigston due to funding.

JB asked about the benefit of the Books on Prescription scheme. RP replied it allows GPs to recommend books to patients covering areas such as smoking and weight loss. SD confirmed the County Health and Wellbeing Board is monitoring the return of the books to their respective libraries.

RP asked how patients access the books that are part of the scheme. SD confirmed they are available from the library and that posters are already up in libraries advertising the scheme.

6. Updates

a) East Leicestershire & Rutland Clinical Commissioning Group

An update was given on the current state of affairs for the Oadby Walk-In Centre. The contract for the Oadby Walk-In Centre ends in Spring 2015 with GPs expected to pick the service up. Patients consultation will take place.

TS stated that many factors have been taken into account whilst the service is reassessed. There is a great need in Oadby and Wigston to have an urgent care centre. The patient consultation will begin in 2014.

SD asked if patients know the difference between urgent care centres and walk-in centres. TS pointed out that both are very similar in practice and should be known in all cases as urgent care centres. Once the consultations are complete and decisions made a campaign will be launched to advertise what is available, where it is and when it's available.

JB pointed out that many Oadby residents are registered with GPs based in the city as they find access to, and quality of, GPs in Oadby as poor. JB asked that if they were to all register with an Oadby GP would the planned model be able to handle it? TS stated that this is not relevant to urgent care centres. TS also pointed out that Oadby and Wigston is on target for patients seeing health professionals when required but not always your GP at the exact time you want.

JB asked if the urgent care is required in Oadby due to deprivation levels. TS pointed out that Oadby and Wigston as a borough is the most deprived in Leicestershire and does require an urgent care centre but not necessarily in Oadby. The actual location will be whatever is best suited for the service and what building is available to put it in. SD pointed out that transport links to the Leicester Royal Infirmary are better in Wigston and South Wigston than in Oadby.

TS stated that 34,000 people have accessed the current walk-in centre but only 900 of them are registered there as patients. The majority of cases dealt with by the walk-in are routine care practices that are available at all GPs but were required out of hours etc.

TS reiterated that the walk-in centre is only in Oadby as it had a building available that met the criteria and that's not guaranteed elsewhere. RP added that South Wigston has the highest need for an urgent care centre but there was no available space for it.

TS highlighted that the walk-in isn't shutting but developing. "Save Our Surgery" is the wrong route to be taking.

JB asked if NHS England needs to consult before closing a walk-in. TS confirmed that this would only apply to registered patients at the centre. He then clarified that it's not for him to speculate on as the decision is not his teams or his own to make. JB asked if NHS England would look at moving the registered patients to other surgeries? TS stated that the capacity of neighbouring surgeries would be taken into consideration. RP pointed out that Wigston Central has no capacity for an additional 1000 patients. TS stated that funding is available for an urgent care service, seven days a week, in the Oadby and Wigston area and that if the Oadby site is closed the service will remain in the borough.

b) Lead Locality GP: Dr Richard Palin

No update given due to time constraints.

c) Community Action Partnership: Neil Baker

No update given (see apologies).

d) Healthwatch: Kevin Blanks (via email)

SP presented Kevin's email covering the following;

- Healthwatch's Task and Finish groups are making satisfactory progress.
- Voluntary Action Leicestershire want to set up a volunteers bank. JB pointed out that 7% of all volunteers are in Oadby and Wigston and that 21% are in the city.
- Healthwatch covers a geographically large area and the depth of the issues they tackle are immense. Healthwatch need to have realistic expectations

SH asked about Patient Panel reviews for hospitals; this is something that the CCG manage. JB mentioned that the UHL and other partnerships have a database of interested individuals who could assist the County Health and Wellbeing Board.

7. Any Other Business

None presented.