

Leicester, Leicestershire and Rutland Integrated Care Partnership

Meeting Title	Leicester, Leicestershire and Rutland (LLR) Health and Wellbeing Partnership	Date	Wednesday, 17 January 2024
Meeting no.	5	Time	12:30pm – 1:30pm
Co-Chairs	David Sissling Chair, NHS LLR Integrated Care Board And Cllr Louise Richardson Chair, Leicestershire Health and Wellbeing Board	Venue / Location	Via MSTeams

REF	AGENDA ITEM	ACTION	PRESENTER	PAPER	TIMING
HWP/24/01	Welcome and Introductions	To receive	David Sissling / Cllr Louise Richardson	Verbal	12:30pm
HWP/24/02	Apologies for Absence: <ul style="list-style-type: none"> • Cllr Diane Ellison, Rutland County Council • Dawn Godfrey, Rutland County Council • Jon Wilson, Leicestershire County Council • Sarah Prema, LLR ICB 	To receive	David Sissling / Cllr Louise Richardson	Verbal	12:30pm
HWP/24/03	Notification of Any Other Business	To receive	David Sissling / Cllr Louise Richardson	Verbal	12:30pm
HWP/24/04	Declarations of Interest	To receive	David Sissling / Cllr Louise Richardson	Verbal	12:35pm
HWP/24/05	To consider written questions received in advance from the Public in relation to items on the agenda	To receive	David Sissling / Cllr Louise Richardson	verbal	12:35pm
HWP/24/06	Minutes of the meeting held on 11 September 2023	To approve	David Sissling / Cllr Louise Richardson	A	12:45pm
HWP/24/07	Matters arising and actions for the meeting held on 11 September 2023	To receive	David Sissling / Cllr Louise Richardson	B	

ITEMS FOR CONSIDERATION

HWP/24/08	WorkWell Vanguard (Pilot) Service – LLR Expression of Interest	To approve	Louise Young / Mike Sandys / Rob Howard	C	12:55pm
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ANY OTHER BUSINESS

HWP/24/09	Items of any other business and review of meeting	To receive	David Sissling / Cllr Louise Richardson	Verbal	1:20pm
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The next meeting of the LLR Health and Wellbeing Partnership meeting will be held on **Wednesday 31 January 2024 at 9:30am** (venue to be confirmed).

Dates for future meetings: Thursday 18 April 2024 at 2:00pm (venue to be confirmed).

A

**Minutes of the Leicester, Leicestershire and Rutland
Health and Wellbeing Partnership (i.e., the Integrated Care Partnership) meeting
held in public on Monday 11 September 2023
1.00pm – 2.30pm, NSPCC National Training Centre, 3 Gilmour Close,
Leicester, LE4 1EZ**

Present:

Mr David Sissling	NHS LLR Integrated Care Board Chair and Co-Chair of the meeting
Cllr Louise Richardson	Chair, Leicestershire Health and Wellbeing Board and Co-Chair of the meeting
Cllr Sarah Russell	Chair, Leicester City Health and Wellbeing Board
Cllr Diane Ellison	Chair, Rutland Health and Wellbeing Board (attended in part)
Mr Andy Williams	Chief Executive, NHS LLR ICB
Ms Sarah Prema	Chief Strategy Officer, NHS LLR ICB
Ms Rachna Vyas	Chief Operating Officer, NHS LLR ICB
Mr Mike Sandys	Director of Public Health for Leicestershire County Council and Rutland County Council
Mr Rob Howard	Director of Public Health, Leicester City Council
Mr Jon Wilson	Director of Adults and Communities, Leicestershire County Council
Mr David Williams	Group Director of Strategy and Partnerships, Leicestershire Partnership NHS Trust and Northamptonshire Healthcare NHS Foundation Trust
Dr Janet Underwood	Chair, Healthwatch Rutland
Ms Harsha Kotecha	Chair, Healthwatch Leicester and Leicestershire

In attendance:

Dr Caroline Trevithick	Chief Nursing Officer, NHS LLR ICB
Ms Jenny Goodwin	Deputy Chief Officer, Communications and Engagement, NHS LLR ICB
Ms Daljit Bains	Head of Corporate Governance, NHS LLR ICB
Ms Charlotte Gormley	Corporate Governance Officer, NHS LLR ICB (note taker)

No members of the public were in attendance.

ITEM	LEAD RESPONSIBLE
<p>HWP/23/15</p>	<p>Welcome and Introductions Mr David Sissling welcomed all to the meeting of the Leicester, Leicestershire and Rutland Health and Wellbeing Partnership. Notably, he welcomed Councillor Sarah Russell, Councillor Diane Ellison, and Mr Rob Howard to their first meeting as members.</p> <p>Mr Sissling and Councillor Richardson would Co-Chair the meeting. Co-Chairing arrangements would rotate on a yearly basis between the Chairs of the respective LLR Health and Wellbeing Boards.</p>
<p>HWP/23/16</p>	<p>Apologies for absence Apologies for absence had been received from:</p> <ul style="list-style-type: none"> • Martin Samuels, Strategic Director for Social Care and Education, Leicester City Council • Kim Sorsky, Strategic Director for Adults and Health (DASS), Rutland County Council • Jane Moore, Director of Children and Family Services, Leicestershire County Council • Dawn Godfrey, Strategic Director of Children and Families, Rutland County Council • Richard Mitchell, Chief Executive Officer, University Hospitals of Leicester NHS Trust • Angela Hillery, Chief Executive Officer, Leicestershire Partnership NHS Trust

ITEM	LEAD RESPONSIBLE	
	The meeting was confirmed as quorate.	
HWP/23/17	<p>Notifications of Any Other Business There were no items of additional business.</p>	
HWP/23/18	<p>Declarations of Interest on Agenda Items No specific declarations were noted on agenda items.</p>	
HWP/23/19	<p>To consider written questions received in advance from the Public in relation to items on the agenda There were no questions received in advance of the meeting.</p>	
HWP/23/20	<p>Minutes of the meeting held on 20 April 2023 (Paper A) The minutes of the LLR Health and Wellbeing Partnership meeting held on 20 April 2023 were accepted as an accurate record.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the minutes of the LLR Health and Wellbeing Partnership meeting held on 20 April 2023. 	
HWP/23/21	<p>Matters arising and actions for the meeting held on 20 April 2023 (Paper B) Actions had progressed well and had been appropriately addressed. Actions HWP/23/12 and HWP/23/13 were closed following confirmation that the draft LLR Integrated Care Strategy and the associated work programme would be considered for approval later in the meeting.</p> <p>It was agreed that the LLR Health and Wellbeing Partnership would pursue action HWP/22/29. An overarching statement on anti-racism would be developed and adopted by the Partnership in principle and practice, acting in opposition to racism and discriminatory action. The statement would be drafted by the Executive Officers' Group and would reference the relevant policies and statements of individual organisations within the Partnership. The draft statement would be circulated for review within 6 - 8 weeks.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • RECEIVE the action log, noting the progress made. 	Sarah Prema
HWP/23/22	<p>LLR Health and Wellbeing Partnership – ensuring positive impact (Paper C) Mr Sissling introduced the topic and invited members views as to how the shared ambitions of the Partnership could be best translated into action.</p> <p>Noting that the Partnership does not have decision making powers beyond the approval of the Integrated Care Strategy, members agreed these meetings would add value through the collective consideration of system and place-based collaborative work. A limited number of priorities for joint action should be identified. Such an approach would enable the pursual of opportunities to scale-up good practice across LLR. It would also provide an opportunity to strengthen links between partners. The Partnership would moreover add value through the collective assessment of risk and the options to address “wicked issues”.</p>	

ITEM	LEAD RESPONSIBLE
<p>Members of the Executive Officers' Group were invited to consider the level of resources needed to support implementation of priority areas. It was noted that the required resources would be dependent on the scope of the work and would be sourced from existing resources across partner organisations. Actions to implement agreed actions would be taken forward by the Executive Officers' Group. It was agreed that the membership and purpose of the Executive Officers' Group would be further developed with Ms Prema leading this action.</p> <p>It was agreed that written reports would be received at future meetings as opposed to verbal updates, and a summary report from the Partnership would be presented to the LLR Health and Wellbeing Boards and the Integrated Care Board going forward.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE that work should proceed to clarify the role, membership, and resources of the Officer Group. • APPROVE the proposed revisions to the nature of the formal meetings of the HWP. • APPROVE the proposal regarding reporting arrangements to the HWBs and the ICB Board. 	<p>Sarah Prema</p>
<p>HWP/23/23</p> <p>Highlights from recent meetings of the NHS LLR Integrated Care Board (Verbal)</p> <p>Mr Andy Williams provided a summary of progress achieved in the first quarter of the 2023/24 financial year. He noted that the Five-Year Plan had been agreed and well received. The Plan set out a series of pledges and commitments which would influence the behaviour of the ICB in a partnership context. The ICB had ended 2022/23 in a positive financial position and had successfully achieved its control total.</p> <p>In performance terms, significant improvements were evident across urgent and emergency care and waiting times in elective care continued to reduce. It was also noted that LLR was amongst the best performing ICBs in terms of access to primary care and dental services. The continuing financial challenges were outlined, with additional financial pressures caused by a range of factors including inflation, industrial action, increased demand for services, and the costs of prescribing and Continuing Healthcare.</p> <p>Mr Williams advised that workforce numbers had grown without a correlating decline in bank and agency spend. This was concerning although some of the increases were reflective of a need to respond to safety and quality pressures. Staffing on medical wards had increased in line with the national criteria for safe staffing. All organisations were aware of the need to pay careful attention to the health and wellbeing of their staff.</p> <p>Members welcomed the news that East Leicester Medical Practice had been reopened and refurbished following a flooding event earlier in the year.</p> <p>Concern was expressed with the lack of access to NHS dental care across LLR, although there was recognition that LLR was in a better position than other surrounding areas.</p> <p>Mr Sissling reflected on the Lucy Letby case and the tragic situation for the patients and families concerned.</p>	

ITEM		LEAD RESPONSIBLE
	<p>Mr. Sissling advised that the advert for the position of LLR ICB Chief Executive had gone live and a new interim Chief Finance Officer for the ICB had been appointed.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • RECEIVE the updates provided. 	
HWP/23/24	<p>Updates from the Health and Wellbeing Boards (Verbal) Local authority colleagues provided an update following respective Health and Wellbeing Board meetings.</p> <p><u>Leicestershire County Council</u> Councillor Richardson referred to a detailed update paper produced by the Council and advised that the most recent development session of the Leicestershire Health and Wellbeing Board had been run by an independent facilitator and had produced positive outcomes.</p> <p><u>Leicester City Council</u> Councillor Russell had attended her first meeting as Chair of the Leicester Health and Wellbeing Board. She advised that future meetings would alternate between themed sessions to consider specific issues in detail, and sessions covering a wider range of business. Themed sessions would include the Leicester Childrens Health and Wellbeing Survey, maternal health, and colorectal cancer in diverse communities.</p> <p>It was noted that the Leicester Childrens Health and Wellbeing Survey results had been presented at a recent development session of the LLR ICB System Executive Committee.</p> <p><u>Rutland County Council</u> In the absence of Cllr Ellison, Dr Underwood advised that the Rutland Health and Wellbeing Board had considered a number of topics including the Five Year Plan and, in particular, whether adequate consultation had been undertaken; the armed forces survey; oral health in Rutland, noting the poor access rate; and falls data in care homes. She noted that data on falls occurring at home was also required to inform action to ensure individuals could live independently and safely. Dr. Underwood also highlighted workforce pressures in Children and Young People’s services and Rutland’s plans to take part in an anticipatory pilot for dementia care.</p> <p>The Rutland Health and Wellbeing Board Annual Report had been approved and Better Care Funding agreed. It was noted that agendas for future Health and Wellbeing Board meetings would be reviewed to incorporate fewer general updates and more specific strategic items.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • RECEIVE the updates provided. <p><i>Cllr Diane Ellison joined the meeting.</i></p>	
HWP/23/25	<p>LLR Health and Wellbeing Partnership Integrated Care Strategy (Paper D) Ms Prema introduced the item, noting that members had approved a soft launch of the Strategy into the public domain in April 2023 with a view to commence engagement following local elections. Feedback received through</p>	

ITEM	LEAD RESPONSIBLE
<p>the engagement process had been incorporated into the Strategy. Members were asked to approve the Strategy for publication.</p> <p>The following amendments identified by members would be made:</p> <ul style="list-style-type: none"> • The Mental Health Sub-group for the County Health and Wellbeing Board would be added to the relevant diagram. • The listed principles would be amended to remove duplication. • Mr Sissling’s signature had been included on the document twice and this would be rectified. <p>Members approved the Integrated Care Strategy with the above changes, on the basis that this would be a live document subject to periodic review.</p> <p>Mr Sissling extended thanks to Ms Prema and colleagues for their contributions. He noted the importance of the Strategy in shaping the agenda and work of the Integrated Care System moving forward. It was agreed that the Strategy would be reviewed periodically.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the LLR Health and Wellbeing Partnership Integrated Care Strategy. 	
<p>HWP/23/26</p> <p>Work Programme and priorities for the Health and Wellbeing Partnership (Paper E)</p> <p>Ms Prema introduced the item, setting out relevant matters of strategic context and inviting members to confirm priorities for collective action and to approve an associated work programme. She noted that the Partnership had established a set of principles which had been developed into the LLR Health and Wellbeing Partnership Integrated Care Strategy. It was proposed that the Partnership receive twice yearly updates on progress against the Strategy.</p> <p>It was proposed that the current format with formal meeting followed by a development session remain in place. It was further proposed that the focus would be on agreed priority areas which should be aligned the six objectives set out in the strategy. Suggestions for further attention and discussion were made and included self-advocacy and health literacy.</p> <p>Regarding the structure of the development sessions, it was proposed that the Executive group would take responsibility for developing material for discussion. In doing so they would be mindful of the need to recognise the positive and ongoing work being led by the three Health and Wellbeing Boards.</p> <p>Members were supportive of the proposals and specifically the adoption of the six priority areas and the presentation of twice-yearly progress updates from the Executive Officers’ Group.</p> <p>It was agreed that the Partnership would not commission additional work unless related to a specific issue addressed at a development session. Furthermore, each development session would consider two issues, harnessing what the Partnership could distinctively bring and its collective ability to address significant issues. Formal meetings would continue to provide members of the public with an opportunity to raise questions and concerns.</p>	

ITEM	LEAD RESPONSIBLE	
	<p>It was determined that the development session scheduled for December 2023 would focus firstly on Anchor Institutions, including their role in promoting LLR as a place to work, and secondly on access to mental health services for children and young people. The Executive Officers' Group would design the session and determine the appropriate attendance. Additionally, the Executive Officers' Group would draw up a long list of topics for consideration as part of the forward planner.</p> <p>It was RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the proposed priorities for the partnership and an associated work programme. 	<p>Sarah Prema / Executive Officers' Group</p>
<p>HWP/23/27</p>	<p>Any Other Business and Review of the Meeting There were no other items of business.</p>	
<p>Date and Time of next meeting:</p>	<p>The next meeting of the LLR Health and Wellbeing Partnership will be held on Thursday 21 December 2023 at 1:00pm, venue to be confirmed.</p> <p>The meeting closed at 2:36pm.</p>	

DRAFT

B

**Leicester, Leicestershire and Rutland Health and Wellbeing Partnership
 Action Log**

Minute No.	Meeting Date	Item	Responsible Officer	Action Required	To be completed by	Progress as at January 2024	Status
HWP/22/29	15 December 2022	A discussion on equality, diversity and inclusion	Cllr Sam Harvey Sarah Prema	To coordinate the development of an overarching statement on anti-racism.	April 2023 December 2023	Verbal update to be provided at the meeting.	Amber
HWP/23/22	11 September 2023	LLR HWP – ensuring positive impact	Sarah Prema	The membership and purpose of the Executive Officers' Group would be further developed.	December 2023	This was considered by the Executive Officers' Group. Verbal update to be provided at the meeting.	Amber
HWP/23/26	11 September 2023	Work Programme and priorities for the Health and Wellbeing Partnership	Sarah Prema / Executive Officers' Group	Topics for December's development session to cover Anchor Institutions, including their role in promoting LLR as a place to work, and access to mental health services for children and young people. A long list of topics to be drafted for the forward planner.	December 2023 End January 2024	The joint development session in December was stood down, and will now be taking place on 31 January. The agenda covers the topics agreed.	Amber

C

Name of meeting:	Leicester, Leicestershire and Rutland Health and Wellbeing Partnership – extraordinary meeting		
Date:	17 January 2024	Paper:	C
Report title:	WorkWell Vanguard (Pilot) Service – LLR Expression of Interest		
Presented by:	Louise Young Deputy Chief Officer, Leicester Leicestershire, and Rutland Integrated Care Board (LLR ICB) Mike Sandys, Director of Public Health - Leicestershire County Council Rutland County Council Rob Howard, Director of Public Health, Leicester City Council		
Report author:	Louise Young Deputy Chief Officer, LLR ICB		
Executive Sponsor:	Caroline Trevithick, Chief Executive Officer, LLR ICB Alice McGee, Chief People Officer, LR ICB		
To approve <input checked="" type="checkbox"/>	For assurance <input type="checkbox"/>	To receive and note <input type="checkbox"/>	For information <input type="checkbox"/>
<i>Recommendation or particular course of action.</i>	<i>To assure / reassure the Board that controls and assurances are in place.</i>	<i>Receive and note implications, may require discussion without formally approving anything.</i>	<i>For note, for intelligence of the Board without in-depth discussion.</i>
Recommendations:			
<p>The LLR Health and Wellbeing Partnership is asked to:</p> <ul style="list-style-type: none"> • RECEIVE the proposal, noting governance for this initiative is via the Integrated Care Partnership. • SUPPORT the expression of interest, noting the final and full submission will be shared prior to 22 January 2024. • APPROVE the proposed LLR WorkWell Service model, noting a full delivery plan will be developed, on confirmation of successful vanguard status. • SUPPORT the proposal for a joint SRO arrangement between Health and Local Authority, ensuring integrated governance, leadership, and delivery of this partnership programme throughout its funding period. 			
Purpose and summary of the report:			
<p>WorkWell is an initiative developed by the Department for Work & Pensions (DWP) and the Department of Health & Social Care (DHSC), to drive forward the mission set out in last year's Levelling-Up White Paper, to improve employment opportunities everywhere.</p> <p>This initiative links primarily to the ICS people agenda supporting routes into employment, as well as the wider societal occupational health agenda. Department of Work and Pensions cite good work is an important driver of health and wealth for families and communities, benefitting wider society through increased productivity, and laying the groundwork for levelling up local communities.</p> <p>The focus of WorkWell is to support people with a disability and people with long term health conditions to start, stay and, succeed in work. An individual's disability or health condition should not define whether they remain in the workplace, yet long-term sickness is the most common reason for economic inactivity in the UK.</p> <p>Through WorkWell, the key aim to tackle rising ill-health related economic inactivity. Up to 59,000 disabled people and people with health conditions across England will have the opportunity to access:</p>			

- a. An early-intervention work and health assessment service, with low-intensity holistic support for their health-related barriers to employment (such as employer liaison and work and health coaching); and
- b. A single, joined-up view and gateway into the services that are available locally to tackle their specific needs. This could include healthcare professionals, community sector services, health promotion programmes, more intensive employment support, and much more.

The report sets out the proposed approach for LLR ICS to bid for the WorkWell initiative.

Appendices:	<ul style="list-style-type: none"> • Appendix 1 - LLR WorkWell Leadership Team Membership • Appendix 2 - WorkWell Service Model / User Journey • Appendix 3 – LLR map of existing local ‘work’ initiatives at District and upper tier level
Report history (date and committee / group the content has been discussed / reviewed prior to presenting to this meeting):	N/A

The report is helping to deliver the following strategic objective(s) – please tick all that apply:

1. Improve outcomes	Improve outcomes in population health and healthcare.	<input checked="" type="checkbox"/>
2. Health inequalities	Tackle inequalities in outcomes, experience and access.	<input checked="" type="checkbox"/>
3. Value for money	Enhance productivity and value for money.	<input checked="" type="checkbox"/>
4. Social and economic development	Help the NHS support broader social and economic development.	<input checked="" type="checkbox"/>
5. NHS Constitution	Deliver NHS Constitutional and legal requirements.	<input type="checkbox"/>

Conflicts of interest screening		Summary of conflicts <i>(detail to be discussed with the Corporate Governance Team)</i>
<input checked="" type="checkbox"/>	No conflict identified.	
<input type="checkbox"/>	Conflict noted, conflicted party can participate in discussion and decision	
<input type="checkbox"/>	Conflict noted, conflicted party can participate in discussion but not in decision	
<input type="checkbox"/>	Conflict noted, conflicted party can remain in meeting but not participate in discussion or decision.	
<input type="checkbox"/>	Conflict noted, conflicted party to be excluded from the meeting.	

Implications:	
a) Does the report provide assurance against a corporate risk(s) e.g. risk aligned to the Board Assurance Framework, risk register etc? <i>If so, state which risk and also detail if any new risks are identified.</i>	
b) Does the report highlight any resource and financial implications? If so, provide which page / paragraph this can be found within the report.	
c) Does the report highlight quality and patient safety implications? If so, provide which page / paragraph this is outlined in within the report.	
d) Does the report demonstrate patient and public involvement? If so, provide which page / paragraph this is outlined in within the report.	
e) Has due regard been given to the Public Sector Equality Duty? If so, how and what the outcome was, provide which page / paragraph this is outlined in within the report.	

WorkWell Vanguard (Pilot) Service – LLR Expression of Interest

19 January 2024

Introduction

1. Context

WorkWell is an initiative developed by the Department for Work & Pensions (DWP) and the Department of Health & Social Care (DHSC), to drive forward the mission set out in last year's Levelling-Up White Paper, to improve employment opportunities everywhere.

It's born out of a recognition that reversing the trend in economic inactivity cannot be achieved by programmes acting in siloes - it requires an integrated whole-systems approach to addressing health-related barriers to work at a local level. A joined-up approach to work and health services is required to systematically improve access to the kind of support we know helps people to start, stay and succeed in work.

The links between work and health are complicated yet evident, where work raises living standards and pulls people out of poverty, a prolonged absence from work can lead to a deterioration in health and wellbeing. Both impacted by financial constraints and the absence of support, positive psychological and social support. DWP cite good work is an important driver of health and wealth for families and communities, benefitting wider society through increased productivity, and laying the groundwork for levelling up local communities.

WorkWell vanguards are aimed at supporting disabled people and people with long term health conditions to start, stay and, succeed in work. An individual's disability or health condition should not define whether they remain in the workplace, yet long-term sickness is the most common reason for economic inactivity in the UK (DWP).

Through WorkWell, the aim is to tackle rising ill-health related economic inactivity. 59,000 disabled people and people with health conditions across England will have the opportunity to access:

- a. An early-intervention work and health assessment service, with low-intensity holistic support for their health-related barriers to employment (such as employer liaison and work and health coaching); and
- b. A single, joined-up view and gateway into the services that are available locally to tackle their specific needs. This could include healthcare professionals, community sector services, health promotion programmes, more intensive employment support, and much more.

DWP and DHSC have recognised that collaboration is vital to achieve these goals and that Local Authorities, Jobcentre networks and Integrated Care Systems know their local populations and services best. They will draw on new and existing support in local areas, joining up health services, local organisations, and job centres.

WorkWell provides an opportunity for local systems to support almost 60,000 disabled people and people with health conditions to start, stay and succeed in work, through 15 WorkWell vanguards. WorkWell Services will be locally led in response to population need, building on existing assets and resources.

ICBs, local authorities, and local jobcentre networks are expected to play a central role in vanguards coming together to co-produce WorkWell Services. local partners will convene partnerships across a wider group of organisations to design and deliver the pilot WorkWell Service.

Vanguards will be offered the opportunity to test new government work and health interventions through small scale pilots, for example, new ways of providing people receiving a fit note with timely access to work and health support.

2. Opportunity for LLR

ICBs are invited to apply to become a vanguard Pilot Site to deliver a WorkWell service locally, offering the service to a minimum of 1000 Participants over two years. This is in partnership with all identified stakeholders.

This offers the LLR health and care partnership a fantastic opportunity to support the levelling up agenda for local communities and further address health and social care inequalities.

Through provision of an accessible integrated health and care work well service, we intend to create a sustainable model to support local communities to thrive, and individuals to stay or re-enter work.

The principles of Anchor Networks and Frameworks will help shape the development of the WorkWell service. This aligns well to the delivery of ICS strategic ambition to support the economic and social recovery of local populations, achieved through an integrated health and job support tailored to need.

Nationally coverage within the press have identified this initiative and describes it as *“Job Centres and bosses will refer people to therapy or running and gardening clubs to keep them well enough to work in an attempt to tackle long term sickness in the benefit system. work coaches, physiotherapy and mental health treatment will be offered to people in danger of falling out of the workforce, as well as debt advice, therapeutic recreation, and workplace adjustments.”* (December 20, 2023, thetimes.co.uk, No 74292)

3. Proposed LLR Vanguard Pilot Expression of Interest

3a Geography

A Work well leadership team, established 15 December 2023, has led the development of the pilot model and expression of interest on behalf of LLR Integrated Care Partnership (see Appendix 1). Appendix 2 sets out a proposed service model and user journey.

Based on analysis of local data from the Joint Strategic Needs Assessments (JSNAs) and other sources covering the ICS, the geography proposed for the pilot is the ICS footprint, focused on high prevalence of economic inactivity within each of the three upper Tier Place geographies:

- *Leicester City:* According to the 2021 census, the population of Leicester City is 368,600, an increase of 11% since the last census. It is the most densely populated local authority area in the East Midlands. Around 13,000 people in the city ages between 16-64 are currently claiming unemployment benefit, which equates to around 5.2% of the population (compared with a 3.8% rate at an England level). The level of people who are economically inactive is much higher at an estimated 29% of the 16-64 population, equating to around 61,400 people.
- *Leicestershire County:* In 2021, 16.5% of the county population considered themselves to have a condition that limited their day-to-day activities, a slight rise compared to 2011 when the figure was 16.2%. Leicestershire’s highest employment sector is manufacturing, followed by professional, scientific and technical. Significantly worse levels of 13.3 Depression recorded % prevalence in Leicestershire (aged 18+) in 2019/20 (England value 11.6)

In Leicestershire, there are 51,101 people who have 5 or more Long Term Condition (LTC) . The pandemic has hit many businesses across Leicestershire and claimants for Job Seekers Allowance or Universal Credit have significantly risen (with 13,865 claimants in July 2021). Leicestershire performs less well for adults with mental health conditions in employment or living independently.

- *Rutland*: According to Census, Rutland has an above average proportion of people aged 16 and over economically inactive (43.4%), due largely to the ageing population which impacts significantly on economic development. Between 2010 – 2019, Rutland’s economy contracted by 8%, while England’s grew 20%.

Rurality is one of our biggest challenges regarding access to employment. 6 of 22 lower super output areas are in the 10% most deprived nationally focused on ‘barriers to housing and services’. It also has one of the largest armed forces communities in the country which ha an impact on employment opportunities for spouses of serving personnel.

3b Identification of Participants and Referrals

Individuals will be identified and referred to the pilot sites through areas of high prevalence for economic activity, and GP issued Fit Note Data. Analysis of GP-issued Fit Note data (April – June 2023 - NHS Digital) offers a reasonable benchmark broadly of the targeted cohort numbers struggling to stay in, and/or potentially about to leave work, where a work well intervention is deemed beneficial to outcomes.

FIT NOTES ISSUED BY GP PRACTICES ACROSS LLR 44,916:	NUMBER OF SICKNESS EPISODES (LLR) 20,079
Leicester City - 18,622	1 st episode - 10,005 (49.8%)
Leicestershire - 15,065	2 nd episode - 4,038 (20.1%)
Rutland - 11,229	3 rd episode - 2,126 (10.6%)
	4 th episode - 1,234 (6.1%)
	5 th or more episodes - 2,676 (13.3%)

3c Principles Underpinning the LLR WorkWell Service Offer

- The WorkWell Support service builds on existing initiatives and services already in place and mapped through DWP shared initiatives/local Intelligence, adding capacity to existing services (see Appendix 3).
- A Referral hub (Digital) will refer into 1 and/or 2 pathways of support, predicated on:
 - building ‘back to employment’ into health pathways, and
 - building ‘back to health’ into employment pathways
- ‘Proportionate universalism’, is adopted rather than just deprivation for example, with a focus on health conditions/disability (MSK/Mental health, LD for example) to ensure it accounts for local community groups within each ‘place’ that may otherwise be overlooked: e.g.
 - Rurality often creates challenges for Rutland through lack of easy access to services and, with a high prevalence of armed forces personnel, and lower

than average working age population, all create additional barriers to economic activity and employment.

- Leicestershire has groups of manual trades/distributive industries (i.e. around J24 of the M1 for instance) or the former coal mining communities of North West Leicestershire, for instance, together with issues around sparsity/rurality to consider; and
- Leicester city is an area of significant economic deprivation, with three quarters of the population living in one of the top 40% most deprived areas nationally. Around 13,000 people in the city ages between 16-64 are currently claiming unemployment benefit, which equates to around 5.2% of the population.

- **Fit note data** will act as an indicative benchmark of numbers.
- User Journey is predicated on a 4-step model and reflects national user journey set out in the prospectus:
- Training for Job Centre personnel from health coach

4. WorkWell Funding for Vanguard

The national WorkWell grant funding will be calculated based on the number of participants a vanguard chooses to support through the work Well programme at a unit cost of £800.

Additional funding of £320,000 in 2024/24 and £220,000 in 2025/26 will be available for additional leadership and management costs. Successful Vanguards will be required to profile participant volumes and leadership funding across the delivery period of the grant with clear outcome and success measurements.

If successful the Vanguard will be required to build a delivery and implementation plan between April 2024 – September 2024. During this design period Vanguards will be able to claim up to 10% of their total grant funding during this prior.

It is expected that the programme will commence delivery in October 2024 and the programme, along with funding will continue until March 2026. Funding will be split into 2 parts:

- 60% will be fixed and available regardless of actual participant volumes.
- Remaining 40% based on number of actual starts on the programme, with the 40% only being available if a vanguard meets its profiled volume for the quarter.

ICCs are expected to submit their grant application forms by **Monday 22nd January 2024**. The funding to Vanguard Partnerships will be awarded to ICBs and it is for the ICB in partnership with lead LAs and the local Jobcentre network to determine the most appropriate geography and funding allocations for the WorkWell service in their ICC area.

5. Delivery and Approach

Through a working group made up of health and social care leaders, a proposed model for a vanguard expression of interest has been created. Appendix 2 sets out the model proposed for the LLR ICC Vanguard, recognising more design and delivery plans need to be developed if successful. The Vanguard requires support from all members of the ICC, in addition to written support from each organisation participating in the WorkWell Programme. This shows a commitment to the programme and prioritisation within the ICC of 2 year plans across all partners and stakeholders.

The proposed model takes into the consideration schemes that are already in place across LLR, service models that consider health and social needs and ensuring that the access to any of the services are clear, easy to access and linked to the outcomes of improving the chances of people to be in work and succeed.

If successful in the expression of interest stage, the LLR Health and Well Being Partnership will be the sponsor for the programme however, assurances and performance assessment against success criteria will be through the ICB governance as this is where the grant funding is routed. It is proposed that the programme has an SRO from health and social care to ensure the programme continues to have all parts of the system represented and delivers against the agreed outcomes.

6. Recommendations

The ICP is asked to:

RECEIVE the proposal, noting governance for this initiative is via the ICP.

SUPPORT the expression of interest, noting the final and full submission will be shared prior to 22 January 2024.

APPROVE the proposed LLR WorkWell Service model, noting a full delivery plan will be developed, on confirmation of successful vanguard status.

SUPPORT the proposal for a joint SRO arrangement between Health and Local Authorities, ensuring integrated governance, leadership, and delivery of this partnership programme throughout its funding period.

APPENDIX 1 MEMBERSHIP OF WORK-WELL LEADERSHIP TEAM

NAME/TITLE	ORGANISATION
Louise Young Deputy Chief Officer - People & Workforce (Work-Well Lead & Interim SRO)	LLR ICB
Amit Sammi Head of Strategy & Planning	LLR ICB
Kate Galoppi Director of Adult Social Care & Commissioning	Leicester City Council
Bev White Lead Commissioner – Social Care & Education	Leicester City Council
Indy Lahel Assistant Director Strategic Commissioning - Adults and Communities	Leicestershire County Council
Rob Howard – Represented by their teams. DPH	Leicester City Council
Mike Sandys – Represented by their teams. DPH	Leicestershire & Rutland County Councils
Jenna Parton Public Health Portfolio Principal	Leicestershire County Council
Mel Maiden Public Health	Leicestershire County Council
Victoria Rice Business Intelligence Team	Leicestershire County Council
Sarah Rudkin Economic Growth Team	Leicestershire County Council
Mitch Harper – Strategic Lead, Rutland (PH)	
Jo Ives Economic Regeneration Team	Leicester City Council
Laura French Consultant in Public Health - Engagement, Partnerships, Inequities & Communities (EPIC) Team	Leicester City Council
Jin Bans Programme Manager Wider Determinants of Health Public Health	Leicester City Council
Vlad Iorga Associate Director for Total OH-MH-WB	UHL
Dr Charlie Goss Clinical Director - OH	UHL
Chris Edwards Disability Employment Adviser Leader	DWP - Leicester & Leicestershire
Brendon Downie Strategic Partnership Manager	DWP – North & East Midlands
Steve Pinchbeck JCP Leicester City Partnership Manager	DWP
Sean Meehan Health & Wellbeing Programme Lead	DHSC – OHID (Midlands)
EOI through LLR Alliance	VCSE Alliance
Alison Morgan, Adult Service and Health	Rutland County Council

WORKWELL IN LEICESTER, LEICESTERSHIRE AND RUTLAND SERVICE USER JOURNEY

Appendix 2

Person in work with health condition or disability: struggling with health barriers OR on Long term sick leave and at risk of falling out.

Person out of work with health condition or disability: likely with low-level needs and/or recently out of work/unemployed for 6 months

REFERRAL AGENCIES

GP/Primary Care/
Social Prescribers

Local Authority/
Social Workers

Community/
Voluntary Sector

Local Health
Services

Local
Employers

Job Centre
Plus

Self-
referral

DIGITAL REFERRAL HUB

WorkWell Support and Triage Service

Initial assessment with work and health coach of barriers to employment, experienced through physical health, mental health, and social situation. Return to Work Plan/Thrive in Work Plan agreed. May include one or both pathways:

Multi-disciplinary in-house support

- Initial assessment will determine priority and how many sessions are likely to be needed (average 5-6 sessions/45 minutes per session) and may include referral to a trained OH Nurse and when needed to an OH Physician, to review the person from a bio-psycho-social perspective.
- Employer liaison/advocacy
- Work and health coaching
- Advice on workplace adjustments
- Regular low-intensity follow-up on Return-to-Work Plan/Thrive in Work Plan with Work and Health Coach
- Personalised work and health support with follow-up as required, including ongoing support from appropriate members of the MDT, in the form of low intensity appointments to monitor progress and recommend further actions and activities.

Participants draw on both components and move between the WorkWell service and other services.

Signposting and referral

- GP/healthcare professional – for further medical treatment, e.g. LLR Community MSK clinics, Mental Health services
- Other Primary Care Services, e.g., Social Prescribing link workers/Local Area Coordinators (LACs)
- Community/Voluntary services, e.g.
 - Mental Health Employment Support Service/IPS/SMI (LPT)
 - Vita Health – Talking Therapies
 - Voluntary sector ie, VITA,
- Council services – i.e.
 - Leicester City Council's in-house Supported Employment Team
 - Healthy Workplaces, Leicestershire, Active Together
 - District council services (e.g., Coalville pilot)
- Health promotion programmes, e.g. LiveWell Leicester
- Debt advice/financial health support
- Job Centre Plus services
- Educational training
- Ongoing referral to more intensive support, e.g., Universal Support, Access to Work, Individual Placement & Support in Primary Care (IPSPC), Restart.

Support ends when participant achieves goals set in individualised Return to Work Plan/Thrive in Work Plan. outcomes may include return to work, remain in work, reduced health barriers to working or looking for work.

(APPENDIX 3)	Description	From/comments
	<p>Who do we work with?</p> <ul style="list-style-type: none"> • People who would like support to find and stay in work. • Have a Learning Disability* and/or Autism. • Are over 18. • Live in Leicester. <p>The offer for Individuals</p> <p>Our Job coaches, help you to find and maintain a job by working with you in some of the following areas:</p> <ul style="list-style-type: none"> • Explore your skills and things you are good at. • Work with you to find a paid job that matches those skills. • Offer support to apply for a job, including CV building. • Practice interview skills and support within interview if needed. • Meet with you and the employer to find out what support you may need in work. • Look at getting extra support or adaptations, as needed, so that you can do your job. • talk with you about any benefits you receive and why you can be ‘better off’ in work. • Work with you to settle into a job. • Work with Employers to become disability confident. <p>The offer for Employers</p> <p>The Supported employment team can help find motivated and skilled staff to suit your company. Working with adults over 18 with a range of skills and abilities. We focus on supporting adults with autism, learning difficulties or both into paid employment. Support is available to help your business become more diverse and disability confident along with a £1,000 employer grant.</p> <p>Supported Employment (leicesteremploymenthub.co.uk)</p>	<p>Jo Ives (City) – 12/12/23</p>
	<p>Autism</p> <p>Autism East Midlands (AEM)(link is external)</p> <p>Signpost</p> <p>Support for autistic people and their families via adult services and child services to find work</p> <ul style="list-style-type: none"> • Employability support • Intensive support • In work support (DWP Access to Work scheme) <p>Business Enterprise and Community Group(link is external)</p> <p>Signpost</p> <p>Meaningful engagement and employment for those on the autistic spectrum</p>	<p>Steve Pinchbeck (DWP) – 16/12/23</p>

(APPENDIX 3)	Description	From/comments
	<p>CT Skills(link is external) Signpost Short course: Understanding Autism</p> <p>Sense College(link is external) Sense Hub(link is external) Signpost An independent specialist college for aged 16-25 with complex disabilities to learn skills needed to live independently and reach educational goals via Employment Support and/or Job Club</p> <p><u>Learning difficulties with nuerodiversity</u> Forever Savvy(link is external) Signpost Vocational training for learning disabilities</p> <ul style="list-style-type: none"> • Cafe Savvy • Creative Savvy • Horse Savvy • Work Savvy <p>Go Learn with Leicestershire Adult Learning Service(link is external)Leicestershire Signpost Adults With Learning Difficulties and Disabilities ...</p> <ul style="list-style-type: none"> • Communication • Creative Skills and Leisure • Health, Personal Safety and Wellbeing • Independent Living Skills • Sensory Learning • Skills for Employment and Volunteering <p>See enrol for a course(link is external) NHS Leicestershire Partnership NHS Trust(link is external) Service Finder(link is external) Leicestershire Signpost Learning Disability Services Voluntary Action Leicester (VAL)(link is external)</p>	

(APPENDIX 3)	Description	From/comments
	<p>For Leicester and Leicestershire Signpost Values sessions Leisurely activities Supported Employment (leicesteremploymenthub.co.uk) Support for Adults in Leicester looking to find and stay in paid employment. Leicester City Signpost only</p> <p>Ansaar Support for Adults with Learning Disabilities Leicester Activity and Learning Sessions Leicester City Signpost only Affinity Trust Various activities, working with people with Learning Disabilities and Mental Health needs. National – with local presence Signposting</p>	
	<p>Alzheimer's Society(link is external) Signpost Early onset dementia can start at age 30 but usually around age 50 Dementia Support Service CT Skills(link is external) Signpost Principles of Dementia Care Leicester City Council(link is external) Signpost Dementia care and support Sapcote Memory Support Hub(link is external) Signpost To improve lives of people living with dementia and their families</p>	

(APPENDIX 3)	Description	From/comments
	<p>Restart (delivered by Jobs 22)</p> <p>The Restart Scheme is a mandatory programme aimed at supporting claimants in the Intensive Work Search regime to overcome barriers to work and to find sustainable employment. It is available in England and Wales for claimants who have been receiving Universal Credit for 9 months or more.</p> <p>Restart provides regular and tailored one-to-one support and allows work coaches, claimants and providers to work together to develop the claimant's employability skills and move them closer to and into work.</p> <p>Support provided by the Restart Scheme</p> <p>Support lasts for 12 months, or until the claimant finds sustainable work (whichever is sooner) and is tailored to the needs of each individual which means that every participant receives unique support. All participants will benefit from:</p> <ul style="list-style-type: none"> • a skills assessment • an individually tailored SMART action plan • fortnightly sessions with a caseworker • access to a wide range of support • training • employment opportunities <p>Additional activities will depend on local and individual needs but may include:</p> <ul style="list-style-type: none"> • addressing any concerns or barriers preventing the claimant from moving into work • work search skills and career advice • identifying suitable job sectors and vacancies • support with job applications and interview skills • personalised training • developing sector specific skills and qualifications <p>Restart Scheme providers have support in place to help participants to address health issues or complex barriers that may affect their ability to actively look for work. Providers are contracted to engage with the claimant, as a minimum, once every fortnight, with a face-to-face meeting no less frequently than every 4 weeks.</p> <p>Work and Eligibility</p> <p>To be eligible for Restart, a claimant must:</p> <ul style="list-style-type: none"> • have been receiving Universal Credit for 9 months or more • currently be in the Intensive Work Search regime • have spent the last 6 months in any, or a combination of the following regimes: <ul style="list-style-type: none"> ○ Intensive Work Search ○ Light Touch (out of work) 	

(APPENDIX 3)	Description	From/comments
	<ul style="list-style-type: none"> ○ No Work Related Requirements ○ Work Focused Interview ○ Work Preparation ● be 18 years old or over in England ● be 16 years old or over in Wales ● not currently be participating in any other DWP contracted provision ● not be receiving employed earnings or be on a zero hours contract (some claimants with self-employed earnings are eligible for referral) ● not be gainfully self-employed. <p>A claimant must not be referred when they are currently disengaged from another provision and if they are still considered to be on that provision. Individuals who have been claiming Universal Credit for less than 9 months can be considered for a discretionary selection by their work coach</p> <p>If the claimant has received employed earnings in the current or previous assessment period and there is:</p> <ul style="list-style-type: none"> ● a likelihood of those earnings continuing - the claimant is not eligible for Restart ● no likelihood of these earnings continuing - a referral to Restart may be appropriate as long as the claimant meets the remaining eligibility and suitability requirements <p>If the claimant has self-employed earnings but is not gainfully self-employed, they can be referred to Restart if they meet the remaining eligibility and suitability criteria. If a claimant reports that they are on a zero-hour contract and the contract has not ended, referral to Restart is not appropriate. This applies even if earnings are currently zero in the most recent assessment period.</p> <p><u>Work & Health Programme and Pioneer (Delivered by Shaw Trust)</u></p> <p>The Work and Health Programme including Pioneer provides voluntary contracted employment support, in England and Wales, for disabled people and disadvantaged groups. It offers tailored support to help eligible claimants find sustained work. Pioneer became part of Universal Support From 13 September 2023.</p> <p>Eligibility</p> <p>To be eligible to join Work and Health Programme or Pioneer, claimants must meet the following criteria:</p> <ul style="list-style-type: none"> ● in England they must be aged 18 or over, up to State Pension age ● in Wales people who leave school on the last Friday in June, and are aged 16 or over by the end of that school year's summer holidays, up to State pension age ● have the right to work in the UK ● have the right to live in the UK and is resident in England or Wales ● not already be participating on other contracted provision ● not have completed Work and Health Programme previously ● not doing any paid work, including zero-hour contracts ● must not be on any other DWP provision 	

(APPENDIX 3)	Description	From/comments
	<p>If they fulfil the above eligible criteria, they must also meet one of the following criteria:</p> <ul style="list-style-type: none"> • have a disability as defined in the Equality Act 2010 • be in one of these early access disadvantaged groups: <ul style="list-style-type: none"> ○ ex-offenders (someone who has completed a custodial sentence or a community sentence) ○ offenders (someone who is serving a community sentence) ○ carers ○ ex-carers ○ homeless people ○ former members of HM Armed Forces ○ members of the HM Armed Forces reserves ○ partners of current or former HM Armed Forces personnel ○ people for whom a drug / alcohol dependency presents a significant barrier to employment including in the past ○ care leavers ○ refugees ○ an Afghan resettler ○ a Ukrainian evacuee ○ victims of domestic abuse ○ young people identified as being involved or at risk of being involved in gangs or serious violence <p>Additional Work and Health Programme participant specific eligibility</p> <p>Claimants who reach 24 months unemployed, have disengaged from Work and Health Programme and are in the Intensive Work Search regime may be considered on a mandatory basis for the balance of their allotted time on the programme. Where the claimant is a mandatory participant, the provider has the authority to mandate the claimant to activities, appointments, jobs and job interviews. Universal Credit payments may be affected where mandatory participants fail to take part. Claimants who move to a non-mandatory regime, then become voluntary participants on Work and Health Programme.</p> <p>Suitability</p> <p>Claimants who are eligible must also be suitable to participate in the Work and Health Programme or Pioneer. Eligible claimants are only considered suitable if they:</p> <ul style="list-style-type: none"> • not doing any paid work, including zero-hour contracts • can be helped by the offer • need more support than can be provided within the standard Jobcentre Plus offer or through other available services and provisions • have committed to the goal of finding employment within 12 months • have already been helped with their core job search activity, for example: 	

(APPENDIX 3)	Description	From/comments
	<ul style="list-style-type: none"> ○ basic job search skills ○ reading, writing, numeracy ○ digital skills ○ can speak and communicate in English ○ CV writing ○ use of email ○ support with Find a Job <p>The last two bullets (and sub-bullets) will not be applicable for potential Pioneer participants who are not seen in a job centre or in receipt of any job centre Plus support.</p> <p>Allocation to Work and Health Programme including Pioneer</p> <p>From 13 September 2023 customers on Universal Credit “Intensive Work Search” regime will be defined as ‘active’, and if eligible and suitable will receive the current Work and Health Programme. Individuals who are defined as inactive (Inactive is defined as those who are not in the Universal Credit Intensive Work Search regime at the point of referral) will receive Pioneer or place and train support on the Work and Health Programme:</p> <ul style="list-style-type: none"> ● Work Preparation ● Work Focused Interview Only ● No Work-Related Requirements ● Light Touch Out of Work ● Not in receipt of a benefit and not working <p>Work and Health Programme support</p> <p>The Work and Health Programme including Pioneer tackles barriers to work by linking up with health and social care providers and other local services aimed at getting people into work. It offers more intensive, tailored support than can be provided by the standard Jobcentre Plus offer, or through other available services and provision.</p> <p>Providers will:</p> <ul style="list-style-type: none"> ● provide the specialisation and capability to offer personalised and tailored support ● address both work and health barriers ● provide support through a range of delivery channels, including digital support ● effectively link with other services, including transition between support offers ● achieve a high level of quality employment outcomes that support the claimant and are in line with Universal Credit ● create an action plan outlining the manageable steps to take to help them ● receive support for up to 456 days (15 months), even if the claimant’s benefit changes ● if the claimant finds a job, provides support for up to 182 days (6 months) 	

(APPENDIX 3)	Description	From/comments
	<p>Greenhill ward is served by Coalville Jobcentre which is based in the town centre within North-West Leicestershire and where Local Authority HQ of North West Leicestershire District Council is based</p> <p>Greenhill sits in the category of ‘significantly worse than rest of England’ in the Office for Health Improvement & Disparities figures, notably on issues including Income deprivation, Child Poverty, Long term Health & premature morbidity. Please see following link www.localhealth.org.uk.</p> <p>Jobcentre Plus and NW Leics District Council work collaboratively within the LA area and mindful of above figures and level of deprivation as a whole, are forward planning delivery of a pilot to increase engagement within the community to address health disparities. This support includes both JobcentrePlus customers and the economically inactive with offer of support from JCP Disability Employment Advisers and referral to partner organisations. The project itself will be overseen by a UKSPF funded lead appointed by NWLDC and whilst in its infancy, the project has a Health & Wellbeing provider event at Greenhill Community shop scheduled for 27th February with collaborative working from both JCP and NWLDC housing/support staff. A further employer event is at planning stage for April.</p> <p>Recognising the challenges of customer engagement (equally the value of delivery in community settings) the aim is to increase awareness of support available, in work benefits and support mechanisms such as Access to Work to narrow the disparities of health in Greenhill to it’s neighbouring wards.</p> <p>The aim is to improve engagement with unemployed residents in their most deprived ward – Greenhill - who are claiming Universal Credit due to health issues. Many of these customers are not required to see a work coach in the Jobcentre due to the severity of their health issue and are deemed “not fit for work” by both their own GP and then confirmed by a DWP health assessment. We are using a Disability Employment Adviser to contact these customers by phone to encourage them to attend an appointment.</p> <p>For those that agree, we are compiling info on health, work experience, outlook etc and will then case conference using a steering group that I have set up with OHID, LA and Talking Therapies (many customers declare mental health issues) to agree a way forward. This is very much in the early days and as I said on the call last week the emphasis is on engaging customers and partnership working, very much a micro version of Workwell.</p>	<p>Brendon Downie (DWP) – 18/12/23</p>
	<p>CT Skills(link is external) Signpost Safe Handling of Medication Healthwatch(link is external) Signpost NHS and social care decision makers hear your voice and use the feedback to improve care Leicestershire County Council(link is external) Signpost Local Area Co-ordinators Support to strengthen communities and reduce social isolation Lightbulb(link is external) Signpost</p>	

(APPENDIX 3)	Description	From/comments
	<p>For hospital patients with housing issues</p> <p>Prince’s Trust – Teams Programme</p> <p>Referral and signposting</p> <p>Young People 18-25, who need help developing confidence and with social interaction</p> <p>Mosaic 1898 I A Disability Charity United Kingdom</p> <p>Signpost</p> <p>General Support and Independent Living</p>	
	<p>Action Deafness(link is external)</p> <p>Signpost</p> <p>Provide specialist, accessible and equal services to deaf people</p> <p>Sense College(link is external)</p> <p>Sense Hub(link is external)</p> <p>Signpost</p> <p>An independent specialist college for aged 16-25 with complex disabilities to learn skills to live independently via Employment Support and/or Job Club</p> <p>Vista(link is external)</p> <p>Signpost</p> <p>Aims</p> <ul style="list-style-type: none"> • Promote eye health to prevent avoidable sight loss • Reduce impact of sight loss • Provide support and care for people affected by sight loss 	
	<p>Adhar Project(link is external)</p> <p>Signpost</p> <p>For ethnic minority groups but not exclusively</p> <ul style="list-style-type: none"> • Advocacy • Talking therapies • Health and Wellness • Group sessions • Recovery Project <p>Charnwood Community Action - John Storer House(link is external)</p> <p>Signpost</p> <p>Weekly activities for wellbeing</p> <p>CT Skills(link is external)</p>	

(APPENDIX 3)	Description	From/comments
	<p>Signpost</p> <p>Short courses</p> <ul style="list-style-type: none"> • Understanding Behaviour that Challenges • Children And Young People’s Mental Health • Counselling Skills • Understanding Mental Health in Early Years • Mental Health First Aid • Understanding Men's Mental Health <p>Go Learn with Leicestershire Adult Learning Service(link is external)</p> <p>Signpost</p> <p>Learning for Confidence/Better Mental Health</p> <p>Related to confidence, journaling, positivity, mindfulness, motivation etc</p> <p>Helping Hands(link is external)</p> <p>Signpost</p> <p>A face to face service for all sorts of difficulties</p> <p>LAMP(link is external)</p> <p>Advocacy and support</p> <p>Leicester City Council</p> <p>Signpost</p> <p>Changing Futures Programme</p> <p>For multiple disadvantages including complex mental health</p> <p>Leicester City Council</p> <p>Signpost</p> <p>Advice and support for various mental health symptoms</p> <p>5 ways to wellbeing</p> <p>Leicester, Leicestershire and Rutland MIND(link is external)</p> <p>Signpost</p> <p>Community mental/wellbeing services for poor mental health..</p> <p>Leicestershire Recovery College(link is external)</p> <p>Signpost</p> <p>Recovery focused educational courses and resources</p> <p>Libris Search(link is external)</p>	

(APPENDIX 3)	Description	From/comments
	<p>Signpost Multiple Level 2 courses in Mental Health, Wellness and Inclusion Life Links(link is external) Leicester Mental Health and Wellbeing Service - P3 (p3charity.org) Charnwood and Melton Mental Health and Wellbeing Services NCHA</p> <p>Signpost Different support networks/choice dependent on personal needs Peer Support Groups</p> <ul style="list-style-type: none"> • Creative Links • Hearing Voices • Maintaining Wellbeing • Managing Anxiety <p>Mental Health Wellbeing and Recovery Services(link is external)</p> <p>Signpost For individuals and their carers Information and guidance, 121 support and support groups MRC Community Action(link is external)</p> <p>Signpost Marlene Reid Centre crisis cafes and wellbeing sessions NHS Leicestershire Partnership Trust(link is external)</p> <p>Signpost Central Access Point (CAP) Mental health support for self or others can call this service anytime NHS Leicestershire Partnership NHS Trust(link is external)</p> <p>Signpost Neighbourhood Mental Health Cafés (previously known as Crisis Cafes) to talk about mental health – no appointment needed Information booklets - English, Arabic, Bengali, Gujarati, Polish and Punjabi(link is external)</p> <p>NHS Leicestershire Partnership NHS Trust(link is external)</p> <p>Signpost</p>	

(APPENDIX 3)	Description	From/comments
	<p>Service Finder(link is external) Quetzal(link is external) Signpost For women having experienced trauma of childhood sexual abuse Rethink(link is external) Signpost Find services and groups in your area The Way of the Horse(link is external) Signpost Equine Therapy Centre Project Pony Rutland County Council (link is external) Signpost COVID-19 update An adult social care service to support Rutland people with Learning Disabilities and / or Mental Health issues to access work, volunteering and training. Rutland Health Primary Care Network(link is external) Signpost Mental health Support The Rutland Health and Care portal is an initiative bringing together information and news from GP Practices across Rutland. Initially this includes the following practices</p> <ul style="list-style-type: none"> • Empingham Medical Centre (link is external) • Market Overton & Somerby Surgeries (link is external) • Oakham Medical Practice (link is external) • Uppingham Surgery <p>Vita Health Group(link is external) Signpost Improving Access to Psychological Therapies (IAPT) Talking therapies in partnership with NHS Service Six(link is external) Signpost Support for young people with anxiety symptoms or depression symptoms Vita Health Group(link is external)</p>	

(APPENDIX 3)	Description	From/comments
<p>Signpost Excessive worry and anxiety JAMILA'S LEGACY (jamilaslegacy.co.uk) Signpost Normalisation of seeking support with Mental Health</p>		
<p>Supporting economically inactive people Positive Communities 2 will provide range of personalised support services to key target groups to help address barriers / issues faced preventing them from moving from economically inactive (EI) to a more active status within the labour market. Intensive 1:1 wrap around support targeted at areas with a high percentage i.e. EI Asian females (e.g. Greater Highfields), looking after the home or family, long-term sick or disabled, 50+ and 16-24 year olds. Confidence building skills, (IAG), employability and employment orientation advice and onward progression support to help beneficiaries engage with the benefits system and /or Job Centre Plus and employers.</p>		<p>UK Shared Prosperity Fund (UKSPF) supported projects - Bev White/Jo Ives (City) – 12-15/12/23</p>
<p>Supporting economically inactive people Futures will deliver a programme of activities combining careers advice and guidance, employability support and entry-level non-regulated training for economically inactive people in Leicester. Activity is targeted towards priority groups, Long-term unemployed, 18-24, 50+, Black & Asian communities, Females and people with disability/health issues.</p>		
<p>Delivering ESOL provision & wrap around support Everyday English is an innovative ESOL programme delivered in partnership with local community organisations aimed at engaging and supporting Leicester residents with limited English skills. Enrichment activities are also on offer to boost participants' confidence and increase their independence. A caseworker will be providing learners with individual support to remove barriers and raise awareness of existing services and promote further learning and volunteering and employment opportunities. Classes will be free and accessible in the city centre and numerous venues across Leicester</p>		
<p>Delivering ESOL provision & wrap around support The project will support individuals from ethnic communities to access:</p> <ul style="list-style-type: none"> • explore their skills/goals/the local labour market • access ESOL courses pre-entry to Entry Level 3 • improve basic skills (English, Maths and IT) • gain employability skills • learn new life skills • gain qualifications in money management and pre-vocational qualifications 		
<p>Support for digital / budgetary advice for Leicester Residents – Community & Place intervention Moneywise Living will provide concentrated 1-2-1 support for individuals who are financially and digitally excluded to become more resilient and better able to deal with life challenges, i.e. energy costs, cost of living. Advisers will support around issues such as housing, debt and well-being</p>		

(APPENDIX 3)	Description	From/comments
	<p>through direct support or supported referrals. The project will equip individuals with the financial and digital skills needed to take cost of living reduction and energy efficiency measures and build resilience going forward.</p> <p>Project will focus on developing the individual's personal, and social confidence enabling independence, connection and the ability to achieve their goals such as training, employment, volunteering or simply enjoying a new hobby.</p>	
	<p>Support for digital / budgetary advice for Leicester Residents – Community & Place intervention</p> <p>The project will the most vulnerable households in Leicester to strengthen their finances by providing money and energy advice, helping them to reduce their household bills and survive cost-of-living crisis. Activities include: Providing Energy Advice and Energy efficiency measures; Working with beneficiaries to Maximise their Income; Helping people to Manage their Money; Training: Upskill frontline workers other agencies.</p>	
	<p>The LPT Employment Support Service (ESS) is delivered by Leicestershire Partnership NHS Trust; to adult patients (17+), open to community mental health teams, psychosis intervention and early recovery (PIER) and assertive outreach. Its aim is to provide information, advice, guidance and support to find paid work, as part of an individualised recovery plan. The ESS follows the individual placement and support (IPS) model which has been used for over 25 years and is the most successful support method for helping people who have experienced mental health problems into work. It looks at individuals' preferences for work and seeks to match these with a suitable employer.</p> <p>https://www.leicspart.nhs.uk/service/employment-support-service/</p>	<p>Peter Smith (LPT) – 20/12/23</p>
	<p>The Healthy Workplaces Leicestershire programme helps organisations of all sizes across the county to become healthier places to work. The tailored programme has been designed in collaboration with, and for Leicestershire businesses, helping to ensure that the support that is most needed by the county's workforce is available to them and their organisations.</p> <p>https://www.healthyworkplacesleicestershire.co.uk/</p> <p>This is not a targeted programme, it supports all employees and ideally the route is a HNA is completed that highlights certain areas that then an action plan is devised and then depending on what is highlighted support can be provided through a number of products i.e. MHFA training, MOTS or through the self-help hub where information can be found on, for example, menopause, financial wellbeing etc</p>	<p>Mel Maiden (County) – 20/12/23</p>