

DRAFT

Note: These Minutes will remain DRAFT until approved at the next meeting of the Committee

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING HELD ON THURSDAY, 28 SEPTEMBER 2017

Present: Luke Bingham (Divisional Director - Sovereign Housing), Garry Poulson (Volunteer Centre West Berkshire), Dr Bal Bahia (Newbury and District CCG), Rachael Wardell (WBC - Community Services), Councillor Lynne Doherty (Executive Portfolio: Children's Services), Councillor Graham Jones (Leader of the Council & Conservative Group Leader), Councillor Mollie Lock (Shadow Executive Portfolio: Education and Young People, Adult Social Care), Andrew Sharp (Healthwatch) and Councillor James Fredrickson (Executive Portfolio: Health and Wellbeing)

Also Present: Jo Reeves (Principal Policy Officer), Suzanne Taylor (Community Anchor - Hungerford), Shelly Hambrecht (Hungerford Family Hub) and Susan Powell (Building Communities Together Team Manager)

Apologies for inability to attend the meeting: Neil Carter, Dr Barbara Barrie, Dr Lise Llewellyn, Cathy Winfield, Councillor Rick Jones, Councillor Marcus Franks and Jim Weems

PART I

63 Minutes

The Minutes of the meeting held on 25 May 2017 were approved as a true and correct record and signed by the Leader.

64 Health and Wellbeing Board Forward Plan

The Forward Plan was noted.

65 Actions arising from previous meetings

The actions arising from previous meetings were noted.

Councillor Lynne Doherty advised that she would confirm that the action for the Children's Delivery Group had been completed.

66 Declarations of Interest

Dr Bal Bahia declared an interest in all matters pertaining to Primary Care, by virtue of the fact that he was a General Practitioner, but reported that as his interest was personal and not a disclosable pecuniary or other registrable interest, they determined to remain to take part in the debate and vote on the matters where appropriate.

Andrew Sharp declared an interest in any items that might refer to South Central Ambulance Service due to the fact that he was the Chair of Trustees of the West Berks Rapid Response Cars (WBRRRC), a local charity that supplied blue light cars for ambulance drivers to use in their spare time to help SCAS respond with 999 calls in West Berkshire, and reported that, as his interest was personal and not a disclosable pecuniary or other registrable interest, he determined to remain to take part in the debate and vote on the matters where appropriate.

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67 Public Questions

There were no public questions submitted.

68 Petitions

There were no petitions presented to the Board.

69 Community Conversations Update

The Board considered a report and presentation (Agenda Item 8) regarding an update on community conversations.

Suzanne Taylor, the community anchor in Hungerford, provided an overview of the story and outcomes of the multi-professional lens, a group of professionals and parents which had built networks and relationships and brought about changes in their community as a result. There was a broad membership of approximately 30 members from a range of organisations with average attendance at a meeting being 15 people. Suzanne explained that her role was to facilitate the meetings to ensure they made progress and had focus.

In her capacity as the Headteacher of Hungerford Nursery and Family Wellbeing Hub, she saw the role of the group as providing a bridge between the community and professional agencies to enable access to other services and build on strengths. She highlighted the need for effective communication to have a response and not just information sharing in order to stop silo working.

The meetings used the Scanning, Analyse, Response, Action (SARA) model used by the police which gathered information, considered existing solutions, other potential solutions and shared actions. A communal language was developing and the members of the group had been reflecting on the language they had been using with the community, particularly around mental health.

The outcomes for professionals had been that new connections were established and there was concise information sharing in a non-judgemental forum. The Education Welfare Officer had questioned why there were not similar models of working in other areas and professionals had begun to shadow each other to gain a better understanding of their roles. For organisations there had been the outcome to introduce new ways of working and building capacity, for example it had been identified that fire fighters could operate as SAFE workers in schools. The community outcomes had been better integrated services which worked consistently and built trust. The SAFE programme was now running a pilot in feeder schools of John O'Gaunt, Theale Green and Trinity for Years 5/6.

Shelly Hambrecht, Co-ordinator Family Centre Hungerford, discussed the role of the family centre, outlining that the domestic abuse theme had begun to be discussed in March 2017 and had inspired women who had experienced domestic abuse to become involved in Peer Volunteering. A natural pathway had emerged to support people move from support for low mood, to parenting support, to getting to a position where they could support other families.

Suzanne Taylor concluded the presentation with some quotes from group members which demonstrated the impact of their work.

Councillor Fredrickson enquired how the balance between focussing the conversations but not leading them was struck. Suzanne Taylor advised that the group had chosen the themes and the SARA model was a useful way to enable the conversation to develop.

Councillor Fredrickson noted that he had attended the Thatcham community conversation the previous evening and noted the absences of young people. He enquired

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whether attracting a wide range of people had been a problem in Hungerford. Suzanne Taylor responded that different groups engaged at different points for different purposes and they were attracted if the theme being discussed was of interest.

Garry Poulson thanks Susanne and Shelly for their clear presentation and raised a query regarding whether the term 'community conversations' might run the risk of making anyone not involved feeling excluded. Suzanne Taylor explained that her group understood how their community works. She advised that communities rise to a challenge when they need to, for example when there is flooding. Their work created ripples, rather than waves.

Councillor Lynne Doherty noted that Suzanne's leadership had contributed to the success of the group and raised her experience of the Newbury community conversation. It was not attended by any professionals and begun by raising issues such as litter and developed to discussing social isolation. asked what an appropriate balance would be. Suzanne Taylor advised that it would depend on the focus and the principal aim had to be community empowerment. She advised that matters such as litter had emerged when the process began two years ago and had evolved with what had worked and what had kept momentum.

Councillor Doherty enquired whether there might be scope for the family hub to stretch the age range they worked with to include elderly people. Suzanne Taylor reported that the community officer from Sovereign would be attending a future meeting due to their interest in older peoples' mental health.

Rachael Wardell noted that it might be a challenge for the Health and Wellbeing Board, considering its governance and focus on programme management, to support and enable a way of working which was less predictable. The work in Hungerford developed in a way that could not have been anticipated and different things would emerge in different areas. It had been really helpful to have the success described as an outcome measure on the dashboard would not encapsulate the impact.

Councillor Mollie Lock noted that facilitators needed to hold on to attendees like balloons and know when to draw them in and when to let them drift away for a time. She also noted that many groups operating on any number of names could be considered to be community conversations. Suzanne Taylor agreed that the name of the group was not important so long as they discussed things which interested people.

Luke Bingham enquired how such groups could be supported to be self-sustaining. Suzanne Taylor suggested that her group was self-sustaining in that the facilitator role could move around but the groups should not be afraid of changing. Luke Bingham further asked whether the group made use of social media to promote the meetings. Suzanne Taylor advised that the group had worked because it did not make demands upon peoples time and had evolved into a format that worked for everyone.

Susan Powell gave a presentation to summarise the progress of community conversations being undertaken elsewhere in the District. She stated that she was encouraged by the acknowledgement that the work was flexible and highlighted that action plans which emerged from community conversations would also be flexible.

Community conversations were building momentum. A meeting had been held in Burghfield following a large number of anti-social behaviour complaints. Seventeen new Neighbourhood Watch schemes had been set up and in Aldermaston and interesting conversation had emerged with anti-social behaviour initiated discussions but the community revealing that they were concerned about social isolation. A meeting had also been held in Thatcham on 27 September 2017 and was attended by around 40 people.

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Councillor James Fredrickson noted that he had attended the meeting in Thatcham and was sceptical that there would be many people due to poor weather conditions but he was pleasantly surprised to see the meeting well attended. The conversation naturally evolved and identified small things which had a big impact on the community. He noted that many residents were concerned about anti-social behaviour by young people on the Broadway but there were no young people present to discuss. There was a clear appetite in the room to address the issues that were identified and he left with the view that there was a vibrant community in Thatcham.

Susan Powell advised that a Youth Council meeting would be held that evening with attendees to be asked what they would like to create. The profile of the Building Communities Together Partnership was being raised with a refresh of the website and template posters. Existing community forums were being mapped so duplication could be avoided.

(Councillor Graham Jones joined the meeting at 10.35am)

Councillor Fredrickson expressed the view that externally it was right that 'community conversations' should be a flexible term and asked whether internally they needed to be thought of in a different way. Susan Powell advised that 'engagement' did not quite describe what a community conversation was and supported the view that a community would self-define their name and ambition.

Councillor Lock noted that there had been a successful forum in Thatcham North which had created a playground in Dunston Park. She noted that the group had served its purpose then ebbed away. Susan Powell agreed in an organic approach where conversations ended when there was no longer that shared purpose.

Andrew Sharp noted that conversations lead by different agencies might have different content and results. Susan Powell agreed that if there was a different seed there would be a different flower.

Councillor Fredrickson concluded that brilliant progress had been achieved and was encouraged to hear how the conversation in Hungerford had matured. Flexibility had enabled tangible, if not measurable, results that would give momentum to conversations in other areas.

RESOLVED that the update report and presentations be noted.

70 Alcohol Harm Reduction Partnership Update

The Board considered a report (Agenda Item 9) concerning an update from the Alcohol Harm Reduction Partnership. Denise Sayles introduced herself as the new Public Health Senior Programme Officer with responsibility for substance misuse, homelessness and smoking.

Alcohol Concern had been appointed to deliver the Blue Light Project and were to hold a stakeholder workshop on 19 October 2017. The target group for the project would be people drinking at dependent levels who were not engaging in treatment services who were costing emergency services a disproportionate amount. The approach was a different way of working with this group as usually the person was expected to ask for help. The project would train staff in partner organisations how to engage with treatment resistant drinkers. Following the stakeholder workshop training would be held for staff on motivational interviewing.

Councillor Fredrickson enquired how partner organisations would know who was best to engage with this group. Denise Sayles responded that a Focus Group would meet to identify which service should take the lead with each individual. She noted that she had

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met with the Liaison Team at Royal Berkshire Hospital's Accident and Emergency department who had committed to attend the training but noted that they might not always be the right service to lead on service user engagement.

Rachael Wardell noted that motivational interviewing was a technique used in the family safeguarding model. Denise Sayles highlighted another link to the Making Every Adult Matter work and commented that the two workstreams would need to work together to identify which approach would be most effective for a particular person.

Shairoz Claridge commented that the Clinical Commissioning Groups had conducted some research to identify the 'frequent flyers' and asked how Blue Light clients would be identified. Denise Sayles noted that West Berkshire residents did not always make the hospitals' 'frequent flyers' lists so identification would rely on good communication with Thames Valley Police, South Central Ambulance Service (SCAS) and GPs. Shairoz Claridge expressed the view that it was a good project and she would raise the matter at the Sustainability and Transformation Programme (STP) Prevention Board as it linked to the Making Every Contact Count model.

Dr Bal Bahia noted that GPs received information from SCAS and noted that if a person was regularly attending their GP they were somewhat engaged with a treatment process. He noted that people were multi-faceted and alcohol misuse was usually a symptom of a problem. Dr Bahia noted that although the aim of the project was to reduce costs, ultimately the benefit of the project would be that lives were saved.

Councillor Quentin Webb noted that it would be helpful to engage with employers. Denise Sayles agreed that missed work due to alcohol was an issue.

Councillor Graham Jones expressed the view that a plurality of Primary Care outlets should be involved.

Andrew Sharp argued that it would not matter which service identified the client and if the system worked they would not be bounced between services. All agencies would need to work together to achieve the best results. He questioned what support would be available for treatment resistant drinkers who were not causing a burden to emergency services and hoped that the good practice learnt by staff would carry through. Andrew Sharp also highlighted that the Alcohol Harm Reduction Partnership wished to broaden their remit to include substance misuse as they already had the right membership.

(The meeting was adjourned between 11.00am and 11.15am for a test of the lockdown procedure)

Councillor Lynne Doherty enquired upon the membership of the Children and Young Peoples' Substance Misuse Strategy. It was agreed that this information would be circulated outside the meeting.

Jo Reeves provided an update regarding the Alcohol Identification and Brief Advice (IBA) project. There had been a delay in commissioning the training due to annual leave in Legal Services over the summer however the service had been put out to tender with the deadline for bids being the following week.

Garry Poulson enquired whether Magistrates Courts could order a person, for example with a drink driving offence, to engage with alcohol treatment services. Denise Sayles confirmed it was possible and would be monitored through Probation Services. Jo Reeves was asked to write to the Magistrates Court. Rachael Wardell noted that the success rate of mandated treatment should be considered.

Denise Sayles concluded by stating that the Alcohol Harm Reduction Partnership wished to include substance misuse in its remit. She had also attended a meeting in Thatcham where the community advised they were more concerned about drugs than alcohol.

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Jo Reeves noted that Alcohol Awareness Week would run 13-19 November 2017 and asked that the Board support activities during that week.

Councillor Fredrickson concluded that the numbers trained in IBA was a key target and if there was any further delay he would like a special meeting to be held to explore the reasons why.

RESOLVED that

- **The report be noted.**
- **Jo Reeves would write to the Magistrates Court regarding alcohol treatment requirement orders.**
- **The Board support that the Alcohol Harm Reduction Partnership expand its remit to include substance misuse.**
- **A Special meeting would be held if there was any further delay to the Alcohol IBA project.**

71 Delivering the Health and Wellbeing Strategy - Q1 Update

The Board considered a report (Agenda Item 10) concerning delivery of the Health and Wellbeing Strategy – update at quarter one.

Jo Reeves advised that progress was on track in most areas although the sub-groups had some further work to do to define the outcomes they were seeking to achieve. One indicator (% of Looked After Children who had completed a Strengths and Difficulties Assessment) was showing as red. The Board were asked to permit a 2% tolerance in reporting as performance was at 98.8% against a target of 100%. Performance in 2016 had been at 20%. Councillor Doherty commended the excellent performance that had been achieved and confirmed the Corporate Parenting Panel was also interested in ensuring performance against this target was at 100%.

Jo Reeves continued that there was still no action plan under the aim to support mental health, although a Mental Health Action Group had been established and were aiming to present their action plan at a Special meeting of the Health and Wellbeing Board on 24 November 2017. Jo Reeves suggested that the Board consider making mental health one of their priorities in 2018/19.

Finally, there had also been concerns raised regarding delivery of good quality housing and rural access to services. A Problem Solving Session would be held on 19th October 2017 with the aim to produce some actions to be owned by the Steering Group.

Councillor Fredrickson supported the view to make mental health a priority for 2018/19 as it had been an area of weakness throughout 2017/18. He expressed the view that there was an interesting opportunity to achieve some quick wins by making better connections between the health and wellbeing strategy and the planning and transport strategies. For example the planning Team might receive an application to construct an annex for an elderly relative but there were opportunities to consider the health and wellbeing needs of the resident.

Garry Poulson raised a question of how the Suicide Action Group fit in with the Health and Wellbeing Board's governance and delivery of the strategy. Councillor Fredrickson suggested the co-chairs of the Mental Health Action Group consider how to link together.

RESOLVED that

- **The progress made a quarter one 2017/18 to deliver the Health and Wellbeing Strategy be noted.**
- **A 2% tolerance in the RAG rating for performance achieved against targets be permitted.**

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72 **Better Care Fund 2017-19**

This item was not discussed.

73 **Berkshire Flu Update**

Dr Bal Bahia asked that Board members be supportive in spreading messages about 'Flu vaccines and that the Board write to all care homes to encourage their staff to be vaccinated. The figure from Australia suggested that the UK should get ready for a difficult 'Flu season.

RESOLVED that a letter from the Health and Wellbeing Board would be sent to all care homes to encourage them to take up 'Flu vaccinations.

74 **Members' Questions**

There were no Members' questions.

75 **Future meeting dates**

The Board noted the following dates for future meetings:

Problem Solving Session – 19th October 2017

Development Session – 23rd November 2017

Special Health and Wellbeing Board – 24th November 2017

(The meeting commenced at 9.30 am and closed at 11.36 am)

CHAIRMAN

Date of Signature