

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, 25 JANUARY 2018

Present: Dr Bal Bahia (Newbury and District CCG), Councillor Lynne Doherty (Executive Portfolio: Children's Services), Councillor Graham Jones (Leader of the Council & Conservative Group Leader), Dr Barbara Barrie (North and West Reading CCG), Cathy Winfield (Berkshire West CCGs), Rachael Wardell (WBC - Community Services), Andrew Sharp (Healthwatch) and Jim Weems (Thames Valley Police)

Also Present: Jo Reeves (Principal Policy Officer), Nick Carter (WBC - Chief Executive), Tandra Forster (WBC - Adult Social Care), April Peberdy (Programme Manager - Public Health), Andrea King (Head of Prevention and Developing Community Resilience), Susan Powell (Building Communities Together Team Manager) and Denise Sayles (Senior Programme Officer (Substance Misuse, Homelessness and Smoking))

Apologies for inability to attend the meeting: Councillor James Fredrickson, Councillor Rick Jones, Councillor Mollie Lock, Neil Carter, Luke Bingham and Garry Poulson

Absent: Councillor Marcus Franks

PART I

80 Minutes

The Minutes of the meeting held on held on 28 September 2017 and the special meeting held on 24 November 2017 were approved as a true and correct record and signed by the Vice-Chairman.

81 Health and Wellbeing Board Forward Plan

The Health and Wellbeing Board noted the forward plan. Jo Reeves noted that an update from the Mental Health Action Group would be added to the meeting on 18 May 2018.

82 Actions arising from previous meetings

The actions arising from previous meetings were noted. Susan Powell reported that regarding action 95, a presentation on repeated incidents of domestic abuse to be added to the Forward Plan, there had been an error in how the data was reported and the indicator should actually have been reported as green.

83 Declarations of Interest

Dr Bal Bahia and Dr Barbara Barrie declared an interest in all matters pertaining to Primary Care, by virtue of the fact that they were General Practitioners, but reported that as their 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

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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.

Councillor Graham Jones declared an interest in Item 10, Pharmaceutical Needs Assessment, by virtue of the fact he was a pharmacy contractor, and reported that as their interest was personal and a disclosable pecuniary or other registrable interest, he would leave the meeting during discussion of the item.

84 Public Questions

a Question submitted by Richard Carrow to the Chairman of the Health and Wellbeing Board

A question standing in the name of Richard Carrow on the subject of the promotion of Macmillan cancer support services was answered by the Chairman of the Health and Wellbeing Board.

85 Petitions

There were no petitions presented to the Board.

86 Refreshed Future In Mind Local Transformation Plan for Children and Young People's Mental Health and Wellbeing

The Health and Wellbeing Board considered a report (Agenda Item 8) regarding an update on the refreshed Future in Mind Local Transformation Plan for children's mental health and wellbeing.

Andrea King and Andy Fitton reported that a wide range of initiatives across the system were underway to improve emotional health and wellbeing of children and young people. The Government Green Paper Transforming Children and Young People's Mental Health Provision had just been published. Recommendations made were similar to actions already contained within West Berkshire's refreshed Local Transformation Plan. However the Green Paper did not make clear how possible additional resources would flow (via health or education) or where additional staff capacity would be sourced from. It was recommended that the ~Health and Wellbeing Board respond to the Green Paper.

Like most other areas of the country, demand for emotional health and wellbeing services had increased and the complexity of presenting issues was increasing. The increase in demand and complexity was being seen across the voluntary sector, schools and specialist services. Nationally there were specialist CAMHS staff shortages.

While waiting times for specialist CAMHS had reduced since 2015, the service was now at full capacity and waiting times were likely to increase unless demand could be managed better at an earlier stage across the system and additional resources in terms of staff and finance could be secured.

Locally, West Berkshire had recently hosted visits by the Children's Commissioner and Richard Benyon MP to the Emotional Health Academy (EHA) which provided early help to children. NHS England had presented the EHA as a national example of best practice. 1628 were seen by the service in 2017, which had just employed a specialist worker to work with Looked After Children. There was further work to do, in particular working with schools to support children with autistic behaviour.

Councillor Lynne Doherty stated that the report and the example of the EHA demonstrated the success of the Health and Wellbeing Board; many of the recommendations in the Green Paper were already being done through the excellent partnership working between the Council and the CCG. She noted that this would be that

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last Board meeting that Andrea King attended and she would like to thank her for being a driving force for improving the mental health of children in West Berkshire.

Councillor Doherty noted that the Green Paper called for pilot sites to participate in new approaches to the mental health assessment looked after children and asked if any consideration had been given to putting West Berkshire forward. Andrea King advised that the Children's Delivery Group was of the view that West Berkshire would be well placed to participate as a pilot and further discussion was required with CCG colleagues. Cathy Winfield stated that she would be supportive.

In response to a question from Councillor Quentin Webb, Andrea King confirmed that a broad partnership including head teachers, GPs and the voluntary sector supported the system for children's emotional health. Andy Fitton advised that universal services needed to be included and equipped to respond better to children's emotional health needs.

Rachael Wardell endorsed the preceding conversation and noted that as a society there needed to be a conversation about what was being done to children which meant that they needed emotional health support. She was pleased to report that there were few children in tier four CAMHS placements but there were some welfare placements of out of area and this could be harmful. Issues regarding attachment and trauma were emerging and there needed to be robust arrangements to ensure a strong local response.

Rachael Wardell concluded by recommending that Board members investigated work by Sheffield University which saw dialogue as a social intervention and noted the link to community conversations.

Dr Bahia thanked Andrea King and Andy Fitton for the report and congratulated them on the accolades they had received. He noted the need to push out messages regarding resilience to the communities in West Berkshire. He requested that the Children's Delivery Group draft a report to the Green Paper on the Board's behalf.

RESOLVED that the refreshed Future in Mind Local Transformation Plan for children's mental health and wellbeing be approved.

87 Mental Health Action Group Update

The Board considered a report (Agenda Item 11) to provide more detail of the mental health action plan presented to the Board at its meeting on 24th November 2017. The five areas for action were: community navigation (also called community connections), peer support, a digital community resource directory, investigating preventable deaths of people with serious mental illness, and working with users and the Berkshire Health Foundation Trust (BHFT) to co-produce improvement to patients' experience in crisis.

Tandra Forster presented the report and thanked Adrian Barker for his hard work in writing it.

Rachael Wardell endorsed the emphasis on co-production and the avoidance of a strict project management approach. She enquired upon the timing of the production of a digital directory. Tandra Forster advised that the project was still in early stages and the group would need to look at existing directories before producing something new.

Councillor Lynne Doherty expressed the view that the report set out a sensible approach. She encouraged the use of plain English in naming the projects the group would carry out. Andrew Sharp commented that the group had already moved away from the term 'social prescribing' as this suggested a service provided by medical professionals. Dr Bal Bahia commented that plain English would also enable scrutiny of the projects.

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Councillor Marigold Jaques noted the large number of resources within communities which should be coordinated to support mental health. Rachael Wardell noted that the previous week she had attended a Brighter Berkshire Event at which there was goodwill and ongoing commitment to improving mental health.

Councillor Graham Jones enquired how success would be measured. Tandra Forster advised that the group was avoiding a strict project management approach but measures would be identified as the projects were scoped further. Some of the projects were due to be completed within one year and other actions had been identified for a 3-5 year period. Dr Bahia noted that sometimes it was difficult to pin down performance indicators while maintaining service user involvement.

RESOLVED that the report be noted.

88 Health and Social Care Integration

The Board considered a report and presentation (Agenda Item 9) regarding health and social integration.

Nick Carter stated that he was addressing the Board in his capacity as Chair of the Berkshire West 10 Integration Board and sought to provide the Board with an update on progress and his own perspective of integration.

Integration was defined as a method to ensure patients were at the heart of service design and delivery by overcoming professional boundaries, however it meant different things to different people. Nick Carter expressed the view that integration in West Berkshire was more like cooperation than a full state of dissolved boundaries between organisations. Integration occurred within the health sector and between the health sector and social care.

Nick Carter provided an overview of the history of integration and noted the large amount of activity over the last 20 years. In particular he noted that in 2015, Sustainability and Transformation Plans (STPs) saw 44 areas created and tasked with reducing costs and improving services. West Berkshire was part of the Buckinghamshire, Oxfordshire and Berkshire West footprint.

Nick Carter expressed the view that integration at the BOB level was ambitious but it was too soon to see any improved outcomes. It was health sector dominated and not particularly driving integration in West Berkshire.

The Berkshire West 10 had an established governance structure and work programme. Most activity was focussed on frail elderly and while there had been some good work, performance of some projects was disappointing.

The majority of discussions about integration in West Berkshire had been based on the Better Care Fund (BCF), however the funding was used in the main to keep the system running. There was a mixed picture regarding the success of the projects.

Turning to the metrics used to monitor the success of the BCF, it was clear that integration had not managed to reduce non-elective admissions. However it should be noted that Berkshire West, as a system, performed well in comparison with other areas in the country. Likewise with delayed transfers of care, there was no apparent correlation between integration and a reduction in numbers.

Nick Carter concluded that there was not yet evidence to support the assertion that integration saved money, reduced hospital activity or improved patient outcomes. It had improved working relationships but there were still some challenges regarding organisations seeking to hold onto their sovereignty. The Accountable Care System had

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drawn some attention away from integration at the Berkshire West level and the operating environment remained unstable.

Cathy Winfield expressed the view that the presentation had been helpful and she agreed with a large part of it. She advised that she was less concerned with national targets as what the 'do nothing' position would have been was unknown and likely to be worse. She noted that financial changes and churn at senior leadership level had been the backdrop for integration in recent years but she remained optimistic about its potential. Cathy Winfield reported that the health system had been well prepared for the winter and working relationships were now significantly stronger. There was some concern that the children's mental health work, which was clearly successful, was not being reported to the Integration Board. An upcoming away day should help the Integration Board to stock-take its projects.

Councillor Lynne Doherty left the meeting at 10.50am.

Dr Bal Bahia thanked Nick Carter for the presentation and raised a question about whether integration was a goal that the Health and Wellbeing Board felt they owned.

RESOLVED that the report be noted.

89 Pharmaceutical Needs Assessment

(Councillor Graham Jones declared an interest in the item by virtue of the fact he was a pharmacy contractor, and reported that as his interest was personal and a disclosable pecuniary or other registrable interest, he would leave the meeting during discussion of the item. Councillor Jones left the meeting at 10.52am.)

The Board considered a report (Agenda Item 10) which presented the refreshed Pharmaceutical Needs Assessment (PNA) for West Berkshire. A PNA was the statement of the needs of pharmaceutical services of the population in a specific area. It set out a statement of the pharmaceutical services which were provided, together with when and where these were available to a given population. The PNA also considered whether there were any gaps in the delivery of pharmaceutical services and was used by NHS England to make decisions on which NHS-funded services should be provided by local community pharmacies. The PNA could also be used to inform commissioners, such as local authorities and Clinical Commissioning Groups (CCGs), who might wish to procure additional services from pharmacies to meet local health priorities.

Jo Jeffries, in introducing the item, advised that the document was the post-consultation draft and had received a small number of responses, mainly from professionals. Some minor amendments had been made as a result of the comments to improve the clarity of the document.

A query had been received from the Local Pharmaceutical Committee that the Board provide a steer on commissioning intentions outside of the contract with NHS England. Jo Jeffries noted that the Council's Public Health Team already worked closely with pharmacies.

Rachael Wardell advised that there were no pots of funding available for the Board to deploy in new ways and suggested that the Board considers alignment of resources and further consideration to how pharmacies could support the Board to implement its Strategy.

Andrew Sharp suggested that for future iterations of the PNA, further consultation be undertaken to ensure that there was a wider understanding of its importance.

RESOLVED that the Board formally approves the Pharmaceutical Needs Assessment and adopt it for 2018-2021.

90 Alcohol Harm Reduction Partnership Update

The Board considered a report (Agenda Item 12) regarding an update from the Alcohol Harm Reduction Partnership on projects to support one of the Board's two priorities for 2017/18: 'to reduce alcohol related harm to all age groups'.

Denise Sayles reported that the training for the Blue Light project was well underway and the strategic group would meet in February 2018, with the clients to be identified shortly after. There had been excellent feedback on the quality of the training. The Identification and Brief Advice training had begun which was receiving a good take up, with the first few sessions full.

Denise Sayles further reported that she had attended a meeting of the Hungerford Multi-Professional Lens a few days previously and substance misuse had been identified as a cause for concern. Concerns were also raised regarding the consumption of alcohol among the racing community. The Alcohol Harm Reduction Partnership would consider next steps.

Dr Bal Bahia noted that in the report West Berkshire was reported to have the third lowest number of alcohol related admissions in the country. Denise Sayles advised that was the case but numbers were slowly rising so she would continue to monitor the situation.

RESOLVED that the report be noted.

91 Community Conversations

The Board considered a report (Agenda Item 13) concerning an update from the Building Communities Together Partnership on work to support one of the Board's two priorities for 2017/18: 'to increase the number of community conversations through which local issues are identified and addressed'.

Susan Powell further updated that since the production of the report, a community conversation had been held with years five and six at Bucklebury Primary School as part of their communities week. The children reported that they liked walking to school and the countryside but were concerned about Donald Trump. Some children were also scared about failing, not being good enough, bullying and drugs. The Building Communities Together Team had written a report on the discussion and shared this with the school and would investigate the children's concerns further. The team would also be looking to consolidate work around Lambourn.

In conclusion, Susan Powell reported that community conversations had matured and were now more nimble with support from skilful staff.

Rachael Wardell noted that many of the themes emerging from community conversations linked with other areas of the Board's work so it was reassuring that the Board was working in the right terrain.

RESOLVED that the report be noted.

92 Health and Wellbeing Board Membership

The Board considered a report (Agenda Item 14) which proposed that Vodafone, Berkshire Healthcare Foundation Trust (BHFT) and Royal Berkshire Healthcare Foundation Trust (RBHT) be invited to nominate representatives to join the Health and Wellbeing Board with effect from the 1st March 2018.

Dr Bal Bahia advised that the appointment of an employer representative would enable the Board to widen its reach and be given a steer on effective engagement. Vodafone was renowned for its strong approach to employee wellbeing. The majority of patients in

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West Berkshire used BHFT and RBHT services but because they were not members, the Board was unable to influence them in the way they would like.

Supt Jim Weems supported the proposal to appoint an employer to represent the 'working well', which the Board currently had little access to.

Rachael Wardell supported the principle of appointing an employer but noted that the majority of businesses in West Berkshire were small and suggested approaching the Chamber of Commerce to nominate a representative. Cathy Winfield noted that other Boards in the country invited the Local Enterprise Partnership to nominate a member.

Councillor Marigold Jaques suggested that the Board could invite Vodafone and a smaller employer to ensure that there was representation of the whole community. Dr Bahia reported that the Steering Group had considered whether a smaller employer would have the enthusiasm or time to devote to attending the Board.

The Board concluded that they supported that BHFT and RBHT be invited to nominate representatives to the Board and requested that the Steering Group give further consideration to options for appointing members to represent employers.

RESOLVED that:

- That the Health and Wellbeing Board invite Berkshire Healthcare Foundation Trust (BHFT) and Royal Berkshire Healthcare Foundation Trust (RBHT) to nominate representatives to join the Board.
- **The Steering Group were asked to complete further work regarding the proposals for employer representatives, to include representation from a small employer.**
- **The Board approve the role of the employer representative outlined in paragraph 7.3.**
- **The new members join the Health and Wellbeing Board on 1st March 2018.**

93 Berkshire West Healthy Weight Strategy 2017-2020

The Board noted the Berkshire West Healthy Weight Strategy 2017-2020.

94 Local Safeguarding Children's Board Annual Report 2016-17

The Board noted the Local Safeguarding Children's Board Annual Report 2016-17.

95 Safeguarding Adults Board Annual Report 2016-17

The Board noted the Safeguarding Adults Board Annual Report 2016-17.

96 Members' Questions

There were no questions submitted by Members.

97 Future meeting dates

The next meetings of the Health and Wellbeing Board would be:

Thursday 29th March 2018 – Development Session (private)

Friday 18th May 2018

(The meeting commenced at 9.30 am and closed at 11.27 am)

CHAIRMAN

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Date of Signature