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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, 30 JANUARY 2020

Present: Councillor Steve Masters (Shadow Portfolio Holder (Green Party) for Health and Wellbeing), Councillor Dominic Boeck (Executive Portfolio: Corporate Services), Councillor Rick Jones (Executive Portfolio: Health and Wellbeing, Leisure and Culture), Dr Bal Bahia (Berkshire West CCG), Councillor Lynne Doherty (Executive Portfolio: Children, Education & Young People), Councillor Graham Bridgman (Executive Portfolio: Adult Social Care), Councillor Richard Somner (Executive Portfolio: Community Resilience and Partnerships), Andy Sharp (Executive Director (People)), Nikki Luffingham (NHS England), Tessa Lindfield (Strategic Director for Public Health), Cathy Winfield (Berkshire West CCG), Neil Carter (Group Manager - RBFRS), Garry Poulson (Volunteer Centre West Berkshire), Andrew Sharp (Healthwatch) and Matthew Pearce (Head of Public Health and Wellbeing)

Also Present: Pete Campbell (Head of Service, Children and Family Services), Catalin Bogos (Performance Research Consultation Manager), Andy Fitton (Berkshire West CCG), Karen Parker (Democratic and Electoral Services), Linda Pye (Principal Policy Officer), Michelle Sancho (Principal Educational Psychologist / Service Lead), and Maria Shepherd (Service Manager, Integration Lead (Health & Social Care))

Apologies for inability to attend the meeting: Councillor Owen Jeffery

PART I

77 Minutes

The Minutes of the meeting held on 3 October were approved as a true and correct record and signed by the Leader.

Catalin Bogos noted that some of the names/titles of some of the attendees on the agenda were incorrect. **Action: Catalin Bogos to rectify.**

Bal Bahia drew attention to the fact that the list of items for inclusion on the Forward Plan had not been added to the Forward Plan circulated with the agenda.

78 Health and Wellbeing Board Forward Plan

Catalin Bogos stated that Charlotte Hall, Head of Programming and Engagement – Corn Exchange Newbury & 101 Outdoor Arts Creation Space had asked for the following item to be included on the Forward Plan:

- The Professional Arts and Cultural Offer in West Berkshire - with suggestions of how to make better use of the resources available to improve the health and wellbeing of our communities and what more could be done in the future. **Action: Catalin Bogos to add to the Forward Plan**

Bal Bahia referred to the upcoming Health and Wellbeing Conference and had a few thoughts on how this should be run/items for discussion.

- West Berkshire Working – enabling, being productive

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- Culture and Arts – culture and arts were being brought in to the wellbeing domain. It was suggested that each organisation bring two or three items demonstrating the things they were doing to improve health and wellbeing
- Top organisations/partners top priorities – how to improve health and wellbeing in the local community. All thoughts and ideas welcomed through the PP group. Matt Pearce supported Charlotte Hogg's suggestion of taking the main things around the district and he suggested linking this in with the Health and Wellbeing Strategy.

Martha Vickers asked if the environment would be a high profile theme at the conference. Councillor Rick Jones responded that the Health and Wellbeing Conference would focus on health. The environment was important but was not a key theme for this conference and he would discuss that with Councillor Vickers outside of the meeting.

Councillor Rick Jones stated that he would like to use public engagement to promote the conference.

79 **Actions arising from previous meeting(s)**

There were no actions arising from the meeting held on 3 October 2019.

80 **Declarations of Interest**

Dr Bal Bahia declared an interest in all matters relating to Primary Care, by virtue of the fact that he was a General Practitioner, to Secondary Care by virtue of the fact that he was a Director for Royal Berkshire NHS Foundation Trust and also that he was a Director for Recovery in Mind, but reported that as his interests were personal and not disclosable pecuniary or other registrable interests, he determined to remain to take part in the debate and vote on the matters where appropriate.

Councillor Steve Masters declared an interest by virtue of the fact that he was the Chair of the Trustees for Eight Bells for Mental Health and reported that, as his interests were personal and not disclosable pecuniary or other registrable interests, he determined to remain to take part in the debate and vote on the matters where appropriate.

Councillor Martha Vickers declared an interest by virtue of the fact that she was a member of the Environment Group and reported that, as her interests were personal and not disclosable pecuniary or other registrable interests, she 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 interests were personal and not disclosable pecuniary or other registrable interests, he determined to remain to take part in the debate and vote on the matters where appropriate.

Cathy Winfield declared an interest in Agenda Item 13, in that her post would be affected by the change, and reported that, as her interests were personal and not disclosable pecuniary or other registrable interests, she determined to remain to take part in the debate and vote on the matters where appropriate.

81 **Public Questions**

There were no public questions brought to the Board.

82 **Petitions**

There were no petitions presented to the Board.

83 **Delivering the Health and Wellbeing Strategy Q2 2019/20**

Catalin Bogos presented the Delivering the Health and Wellbeing Strategy Q2 2019/20 report (agenda item 8) which reviewed the progress made by the Health and Wellbeing Board's sub-groups to deliver the Health and Wellbeing Strategy.

Catalin Bogos thanked colleagues and sub group leads for their input in to the report. He added that improved and complete data had been provided to the Board. The majority of measures showed an increase in activity and performance and the target was being reached.

Councillor Lynne Doherty thanked Catalin Bogos for the report. She made reference to item 6.3 which stated that during Q2, a total of 17,201 page views had been recorded on the West Berkshire Directory (Family Information and SEND Local Offer). She congratulated the team for their success and highlighted the fact that the word was out there which demonstrated that information services were working.

Councillor Lynne Doherty felt that it would be useful to know the actual numbers representing the percentages despite the absence of a target. She also added that it was good to see over 40 of the KPIs at green status.

Andy Sharp commented that the level of delays for transfers of care were comparatively low. Joint and Social Care delays were the main problems due to access to care services. The pathway had improved, along with booked beds in the sector. He added that the Marketing Management Lead role had gone out to advert.

Andrew Sharp commented on the re-enablement pathways. He asked if the pathway with Great Western was as good as it was. **Action: Andy Sharp to forward information to Andrew Sharp.**

Councillor Graham Bridgman referred to the reduction in the number of child protection cases. He asked what the actual number of cases was and if we were doing better. He also asked if pharmacists were employed at PCN level and how this worked.

Dr Bal Bahia mentioned that individual PCNs needed to work out what their requirements were and if more than one pharmacist was being employed. He referred to the fact that one of the two suicide targets had been achieved and asked if there was ever a red and also how this was being RAG rated. Councillor Rick Jones stated that the Health and Wellbeing Board had ten sub-groups, some of which had had an extraordinary job delivering the Health and Wellbeing Strategy. It was currently work in progress in terms of deciding what the actions were and how these were being measured.

Councillor Martha Vickers informed the group that she had attended the Substance Misuse Group and reported that poor attendance had led to cancellations of the group sessions. She also reported that health champions had had their funding cut. **Action: Councillor Martha Vickers to put this in writing to Councillor Rick Jones.**

Tessa Lindfield referred to the falls prevention objective (No.19) being amber. She asked what was being done to increase the number of people aged over 65 being referred to the Steady Steps programme. Matthew Pearce responded that this needed to be chased up, and the Council was working closely with the Fire Service to increase the number of referrals. **Action: Matt Pearce to contact Fire Service re Steady Steps referrals.**

Andrew Sharp asked the question why the housing objective (No.14) was not targeted. Dr Bal Bahia responded that he would clarify the number the CCG was looking for. **Action: Bal Bahia to clarify CCG's requirements for the housing objective.**

84 Update on Priority One (Give Every Child the best Start in Life/ First 1000 Days) for 2019/20

Pete Campbell presented a verbal report on the Update on Priority One (Give Every Child the Best Start in Life/First 1000 Days) for 2019/20 (agenda item 9). He referred to the Children's Delivery Group which had struggled to find its identity as there had been some overlap with the Children's Safeguarding Board. He reported that change was expected in three areas as follows:

- (1) Trauma informed experiences – provision of appropriate training for schools, communities and organisations so that they become trauma informed.
- (2) Earlier help approaches – timely and multi-agency, with good collaboration. A reduction in higher Tier 3 and 4 interventions were being seen.
- (3) School performances – being more resilient and making healthier choices

Going forward, there would be therapeutic informed commissioning. Formation of the brain in the early stages of life had an impact (first 1000 days). Studies had taken place which showed that if childhood development fell behind at an early stage then it was difficult to catch up or the gap could even widen. The Domestic Abuse Bill picked up on the importance of the first 1000 days. A conference workshop had been booked for late April to share initiatives and to explore opportunities. The project was ongoing and would last well beyond the calendar year. He stated that the name might be changed to something which better reflected the group and what it wanted to achieve.

Councillor Martha Vickers asked if Health Visitors had the capacity to undertake prevention work. She had attended a lunchtime education session and there had not been any Health Visitors in attendance which had used to be the case. This was a good opportunity for networking and she hoped that they had been invited to the session. Matthew Pearce responded that Public Health was undertaking a health need assessment and how services could meet that need. This would be a public document. He also added that a national bid had been submitted a couple of weeks ago, which would provide a system approach to improving Early Years Health and Wellbeing.

Matt Pearce referred to self-harm – this was an area that West Berkshire had benchmarked poorly in and he hoped that this could be a focus in the future.

Andrew Sharp commented that the voluntary sector was struggling to cope and this needed to be highlighted as a problem somewhere as if they were being asked to take on additional duties that might risk the chance of success. Dr Bal Bahia accepted that there was a need to focus on interaction with other agencies. It was necessary to ensure that agencies did not work alone as it was better to bring them together to ensure an informed approach. He felt that Domestic Abuse and Child Protection should be prioritised. Councillor Lynne Doherty asked if anything was being done around prenatal and antenatal. Pete Campbell confirmed that the first 1000 days included prenatal and antenatal and the clock starting ticking from day one of a pregnancy.

Councillor Rick Jones commented that the report provided a good update and was pleased that the objectives had been revised. He expressed hope that the next Health and Wellbeing Strategy would focus on Young People and Children in order to address the balance.

85 Update on Priority Two (Primary Care Networks) for 2019/20

Cathy Winfield presented a report which updated on Priority Two (Primary Care Networks) for 2019/20 (agenda item 10) on activity since the last update at the meeting in October 2019.

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Cathy Winfield pointed out that PCNs (Primary Care Networks) were groups of GP practices and other services working together to plan and co-ordinate care within local neighbourhoods typically serving 30,000 - 50,000 patients. PCNs would be developing and extending their team of staff and would be working on a neighbourhood footprint. In October 2019 it was reported that PCNs had been constituted and in July they were recruited to additional roles.

Cathy Winfield reported that work was underway to have a more coherent process, with a focus on working together to target people with a high level of risk and need. There would also be a focus on personalised planning, and were hoping to have specifications next year. There would be more work on anticipatory planning along with the paring back of requirements. Higher priority would be placed on PCNs along with increased flexibility in the amount of resource. In 2021 there would be an expansion of the workforce. A workshop was held across all PCNs on 16 January 2020 on how it could be brought together.

Andrew Sharp asked if there was confidence around the contracts. Cathy Winfield responded that concerns would be addressed, and GPs would need to respond to concerns raised. Andrew also suggest trialling. Cathy stated there would be learning to share across PCNs. A lot of work had been done nationally to address recruitment and retention and it would be necessary to look at how to incentivise, e.g. auto enrolment of GPs into fellowship. There would need to be a lot of educational support and financial incentive.

Kamal Bahia confirmed that she was linking in with Planning and the Children's Development team. Councillor Rick Jones asked how the Locality Integration Board was working. Maria Shepherd reported that it was working on a joint work programme.

86 Future in Mind Local Transformation Plan for Children's Mental Health

Andy Fitton and Michelle Sancho introduced the Future in Mind Local Transformation Plan report (agenda item 11) which provided an overview of the refreshed Future in Mind Local Transformation Plan (LTP) which was published in October 2019 in accordance with national Future in Mind requirements. The LTP provided an update on service development and improvement across the comprehensive Child and Adolescent Mental Health Service (CAMHS) system.

Andy Fitton stated that Berkshire West CCG was continuing to make progress on the challenging area of emotional mental health.

Key achievements/areas of strength included:

- The impact of large scale training across partners could be evidenced.
- Access to services by children and young people had increased again this year.
- West Berkshire was one of 20 national trailblazer sites to set up Mental Health Support Teams in two local authorities.
- More financial investment had been secured for the Eating Disorder Service.
- West Berkshire was successful in becoming one of 9 pilot sites for a research project on improving mental health assessment for children in care.

Areas of challenge and development:

- There had been an 8% increase in demand which in turn was having an impact on waiting times across providers. The demand was outstripping the ability to commission or recruit.
- The rise in self-harm rates above the national average, particularly in the 15-19 year old age group, was particularly concerning.

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- Work was continuing to provide Tier 4 hospital beds, as better capacity was required locally.
- Some children and young people who were under specialist CAMHS continued to experience more severe symptoms and had more complex presentations than in comparator areas and this was particularly difficult to manage.

The LTP Plan had identified 7 priorities to focus on and would also act as a way to galvanise the partnership to collectively achieve improvement and change as follows:

- Priority 1 – Ensure that we embed and expand the Mental Health Support Team in Berkshire West
- Priority 2 – Continue to focus on meeting the emotional and mental health needs of the most vulnerable children and young people, with particular attention to children in care
- Priority 3 – Continue to build a 24/7 urgent care/crisis support offer for children and young people
- Priority 4 – Continue to build a timely and responsive eating disorder offer
- Priority 5 – Improve the waiting times and access to support, with particular focus this year on access to ASD/ADHD assessments and support
- Priority 6 – To improve the equalities, diversity and inclusion offer and access for children and young people in Berkshire West
- Priority 7 – Building a Berkshire West 0-25 year old comprehensive mental health offer

Michelle Sancho stated that Berkshire West CCG was one of twelve trailblazers in a cohort of mental health support, delivering to 8,000 children in 3 secondary schools and 20 primary schools. A team had been set up which were working in a multi-agency joined up way. A hard launch had taken place for the Mental Health Support Team with events being held in schools. New data systems had been put in place and work continued with partners to flow children and young people access data onto the national dataset. Michelle Sancho commented that mental health support in West Berkshire was joined up and the children in care project was working well.

A three day training course on therapeutic training was taking place on trauma and how to work with young people. It was noted that there were no exclusions in the primary sector at present. All services were working in a complementary way and not in isolation.

Councillor Dominic Boeck thanked Andy and Michelle for the report. He asked if there would be a merger between the Emotional Health Academy (EHA) and the Mental Health Support Team. Michelle Santo responded that it would be a phased adjustment. The Emotional Health Academy and the Mental Health Support Team were doing different work at the moment, but that might change over time.

Andrew Sharp raised concerns regarding where people would go if the EHA pathway was not for them – the waiting list was long and people did not hear anything until about two weeks prior to their appointment. He asked if there was anything that could be done here. Andy Fitton agreed that waiting lists were too long but even if money was available there were still issues around recruitment. The issue was not just about waiting but more around what self-help or enabling that parents could do for themselves. Some pathways were long and digital assessments or telephone support was something that was being looked at. Michelle Sancho added that Mental Health Support Team and EHA should not have such a long wait time as the CAMHS pathway. Michelle Sancho stated that she was

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looking at the CAMHS and ADHD provision and the ability to provide provision without a diagnosis. Councillor Lynne Doherty felt that services should not wait for a diagnosis.

Dr Bal Bahia asked whether the Mental Health Support Team and the Emotional Health Academy were separate entities. Michelle Sancho responded that not every area had an EHA. West Berkshire had put in a bid for a Mental Health Support Team, but there was an overlap and some flow between the two. Andy Fitton added that this was a new resource which was linked in with emotional health triage. It drew the resource closer to schools. However, the GP pathways remained the same.

Dr Bal Bahia asked for clarification as to whether the Eating Disorder service was based in Maidenhead. Andy Fitton confirmed that it was based in Maidenhead – it was a Berkshire-wide service but there was only one option across the area. Dr Bahia was concerned that it might be difficult for some people to get to. Councillor Martha Vickers said that it was worrying to hear that this important service was under strain and felt that it needed more resources. She also queried why there was such a high level of self-harm in this area. Councillor Martha Vickers asked if Andy Fitton had heard of Young Health Champions in schools. Andy Fitton responded that he had heard of them but that they were not used in this area. Michelle Sancho added that their role would not be to make referrals.

Matt Pearce asked if it was possible to strengthen the role of the CCG in this. Kamal Bahia said that this was already an item on the agenda for the next meeting and she would link in with Andy Fitton to ensure that all the issues were picked up.

Councillor Lynne Doherty thanked Andy Fitton and Michelle Sancho for the report. She referred to a statement in the LTP which said that Children and Young People under CAMHS seemed to be more embedded in West Berkshire and she asked why that was the case. Andy Fitton replied that demand had increased provision which had uncovered more complex issues.

Councillor Rick Jones noted that one of the challenges was around the complexity of the Berkshire West system and he wondered if anything could be done about that. Andy Fitton responded that decisions could be made on the footprint that was best suited. All three local authorities had the same responsibilities, but delivered them in different ways, and the key was how that footprint was managed. The CCG was facing a challenge as they were trying to coalesce three CCGs. Cathy Winfield commended the work of the CCG. Bringing all the Directors of Children's Services across all three unitary authorities together would present new opportunities for joint working and alignment.

Councillor Steve Masters noted that in the challenges it talked about the availability of a skilled, qualified and experienced health workforce. He asked what measures were being put in place to mitigate that as the cost of living in this area was high. Nikki Luffington advised that there was a focus on Children and Young People recruitment at present. Berkshire was very close to London and so some degree of salary enhancement might be required with a need to prioritise those posts which were most important. The incentives would be dependent on what people thought the priorities were - there were lots of initiatives at BHFT. Councillor Steve Masters asked what feedback had been received. Feedback had been mixed and would depend on the individual need e.g. relocation expenses or transport. They had been out to school and careers fairs, on social media and on the ground.

Garry Poulson referred to the issue around capacity and stated that there were volunteers, but there would be a need to provide proper training and again resources would be required to do that. It would be useful to have a small sum of money available

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to do that. Michelle Sancho stated that there had been good voluntary sector input into triage which had been useful and worked well.

87 Annual Report of the Director of Public Health

Tessa Lindfield presented the statutory annual director of Public Health report (agenda item 12) which focussed on workplace health and wellbeing. Tessa informed the group that she was the Director of Public Health across six Local Authorities in Berkshire. She informed the group that an individual report was produced each year. The purpose of Public Health was to help the population to be healthier and to retire healthy. The report highlighted the fact that good work was really good for you. The report also highlighted that there were good levels of employment in Berkshire, 40% of employees were employed by the 1% of large employers and there were lots of managers and professional people in the population.

Employment rates were lower among younger people. Some ethnic groups and disabilities also had lower levels of employment. The key metric was how long people lived, particularly important was the number of years a person had lived in good health. Women tended to live longer, but they also had longer years in poor health. The population of people at work were experiencing long term health conditions. The workforce was getting older and sickness absence had increased and therefore managers needed to look at presenteeism rates as well as sickness rates.

Tessa suggested that the group should look at the Public Health England blog called Public Health Matters. Behind each tile were actions that could be taken as employers. One in ten people worked in the gig economy and millennials wanted something different from work. The key findings of the report highlighted that organisations needed to have sound HR policies. A workplace needed to support health and some groups in the workforce required special attention.

Councillor Martha Vickers asked if the Mental Health initiative was still running. Matthew Pearce responded that it was still underway with one and two day packages available. Tessa Lindfield reported that there were good case studies in the report detailing evidence. Councillor Steve Masters asked what work Public Health or Berkshire were doing to look into the gig economy. He commented that the gig workforce was less stable therefore there would be a greater impact on mental health. Tessa Lindfield stated that she was not aware of local work on the gig economy, however there was a Public Health workstream looking at this.

Tessa Lindfield commented on how the voluntary sector could help people in the gig economy. Tools were required to look into workplace health. Improving mental health would improve productivity which was a win-win situation. Councillor Steve Masters queried the source of the sickness rates metric. Tessa Lindfield responded that they had been obtained from the national HR organisation, which only collected information from businesses. Councillor Lynne Doherty asked what work had been done to escalate the message to other businesses. Tessa Lindfield responded that it had gone out through businesses and the network and that she was happy for members of the group to forward suggestions to her. Matthew Pearce reported that he was trying to interpret data on learning disabilities. Andrew Sharp asked if there was any commitment from different parties. Councillor Rick Jones thanked Tessa Lindfield for the presenting report.

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88 Decision on Future CCG Management Arrangements

Cathy Winfield introduced the report which set out the Future CCG Management Arrangements (agenda item 13). The purpose of the report was to provide an update to the Health and Wellbeing Board regarding the progress made by the Architecture Oversight Group, including their recommendations following the engagement exercise. She informed the group that the governing body had considered the paper in January 2020. By the end of the day the three CCGs would have considered whether they were supportive of the decision.

Councillor Rick Jones asked if the paper would address concerns. Cathy Winfield responded that the NHS had received a significant amount of money. The CCG was a good vehicle and would receive an allocation of money. There would be a strengthened integrated care partnership, with PCNs presenting opportunities. There would be a significant challenge across Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB). Garry Poulson recommended that the voluntary sector become embedded in all the right decision pathways. He asked if it was critical the Volunteer Bureau were there and if there would be a volunteer representative. There would be joint commissioning in the voluntary sector.

Andrew Sharp stated that he felt the joint geography did not make sense as Community Mental Health ran across East Berkshire and it was 60 miles from Aylesbury to Hungerford. He also asked how it would work locally with the board meeting in Amersham and he felt that the merger should not take place. Cathy Winfield corrected Andrew Sharp in that there would not be a merger. Three statutory bodies would remain with three boards, with varying thresholds across all three. This would be subject to a GP vote. Councillor Rick Jones added there would be a compromise to try and address concerns.

89 Members' Question(s)

There were no questions from Members.

90 Future meeting dates

21 May 2020
24 September 2020
28 January 2021

(The meeting commenced at 9.30 am and closed at 11.46 am)

CHAIRMAN

Date of Signature