

Questions and Answers

Health and Wellbeing Board

Thursday, 24th September, 2020

West Berkshire Council is committed to equality of opportunity. We will treat everyone with respect, regardless of race, disability, gender, age, religion or sexual orientation.

If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.



Public Questions as specified in the Council's Procedure Rules of the Constitution

(a) Questions submitted to the Berkshire Healthcare Foundation Trust and Berkshire West CCG by Mrs Paula Saunderson:

Question 1: "Following an NHS MEDICAL Diagnosis of Dementia by The Older Adults Mental Health Service (Beechcroft – Hill House), what follow-up process does Berkshire Healthcare NHS Foundation Trust put in place for the Patients within West Berks?"

Answer: The person with dementia and their carer are offered post-diagnostic information and counselling to address any queries they have about the diagnosis and to provide emotional support as required, including psychological therapy for patients/carers experiencing significant distress.

Patients with dementia sub-types eligible for treatment with medication are asked if they would like to be prescribed medication and those who accept and for whom the treatment is not contraindicated due to physical health reasons, are prescribed the most appropriate anti-dementia medication. The Memory Service monitors the patient's response to the medication and if it is tolerated an increased dose is prescribed as appropriate. Patients with mild – moderate dementia are offered a place on a Cognitive Stimulation Therapy (CST) and Carers of all patients with a confirmed diagnosis are invited to the Understanding Dementia Course for Carers (UDC). Group interventions (CST and UDC) are currently not available due to social distancing requirements but we are trialling online provision of both groups)

Prior to Covid 19 the majority of post-diagnostic support was face to face but to minimise the risk to our older population, Memory Services are conducting as much of their work remotely as possible.

Once a patient's medication dose has been optimised, they are discharged from the Memory Service and ongoing monitoring is conducted by their GP. A person with dementia or their carer can self-refer back to the Memory Service within the first 6 months of discharge from the Memory Service. Patients and Carers are offered a referral to the local Dementia Advisor and provided with information about support available in their local community.

Question 2: "Following an NHS MEDICAL Diagnosis of Dementia by The Older Adults Mental Health Service (Beechcroft – Hill House), what follow-up process does Berkshire Healthcare NHS Foundation Trust put in place for a Nominated Unpaid Family At Home CARER who has no involvement with WBC Adult Social Care?"



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Answer: With the patient's permission, Carers are fully included in the assessment and post diagnostic support. This includes advising the Carer that they are entitled to an assessment of their own needs and where the Carer accepts, the Memory Service will refer them to WBC for a Carer's Assessment. If the Memory Service identifies a potential need in the person with dementia or their carer, they offer to refer them for a social care assessment.

Question 3: "Adults diagnosed with Learning Difficulties are subject to an Annual Review, does this apply to Dementia Patients and if so who would arrange for this to take place?"

Answer: People with dementia who are no longer open to Memory Services should be reviewed annually by their GP. A person with dementia or their carer can self-refer back to the Memory Service within the first 6 months of discharge from the Memory Service. Patients under the Learning Disability service are assessed, diagnosed and managed by Learning Disability Services and not transferred to Older People's Mental Health Services.

Question 4: "How does the Berkshire NHS Older Adults Mental Health Service medically evaluate and categorise the STAGES of Decline in a Dementia Patient?"

Answer: Broadly, we refer to mild, moderate and severe stages of dementia, but as dementia is a progressive neurodegenerative condition, deterioration is usually gradual and can be fluctuating, so it is more important to understand the extent to which the disease is impacting on a person's daily life and relationships than it is to categorise the stage they have reached.

Question 5: "Why is the existence of NHS Continuing Health Care as a source of funding not mentioned during the Understanding Dementia Course?"

Answer: In respect of Continuing Health Care (CHC) and dementia, eligibility for CHC assessment and funding eligibility is not based on a person's diagnosis, as such not everyone with a dementia diagnosis will need a CHC assessment. The decision as to whether a CHC referral should be made would be the responsibility of either a health or social care professional involved in the care of the person.

Question 6: "At what STAGE in the Dementia decline is NHS Continuing Health Care likely to be available?"

Answer: Eligibility for CHC is not based on a specific condition or presenting symptoms, as such there is no set stage in the decline of dementia where a person will automatically be eligible for CHC funding. A health or social care professional involved in the care of the person would make a clinical decision to make a referral for a CHC assessment at the point at which that Professional believes CHC should be considered.

(b) Questions submitted to the Portfolio Holder for

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Public Health and Community Wellbeing by Mrs Lucy Brown:

Question: “With the current over-reaction to Covid-19 nationally and the low numbers of infections experienced locally, how do you intend to keep local perspective and avoid on-going unnecessary panic and harmful draconian measures?”

Answer: Covid-19 is the most significant pandemic of our time. As of 23rd September 2020, 409,729 people in the UK have been diagnosed with Covid-19 with 41,862 people dying of the disease. The UK has the 14th highest number of cases and the 5th highest number of deaths worldwide. In the early stages of the coronavirus outbreak in the UK, a national lockdown was put in place in an attempt to contain the virus across the whole country.

The immediate impact of coronavirus on the NHS led to a huge increase in the demand for acute care and intensive care facilities. Large numbers of cases over a short time period stretched hospitals to capacity. The restrictions were in order to keep case numbers under control, to help the NHS to cope and therefore try to minimise the wider health impacts on the rest of the population.

As cases began to decline, national restrictions were released and at this point, we moved into a control and recover phase with an emphasis on local monitoring and local response and actions, working in conjunction with NHS Test and Trace. It is recognised that different geographical areas across the country have differing rates of infection and different populations at risk and so a more nuanced approach is now required. West Berkshire Council’s Local Outbreak Control Plan details how our local knowledge and trusted partnerships are being used in order to control Covid-19 and minimise further spread across our area, in a localised proportionate response.

More recently, the country’s chief medical officers have advised that the coronavirus alert level be raised from 3 to 4. This indicates that transmission is high or rising exponentially. Although cases in West Berkshire remain on the lower side, this situation could change at any time. With the R number rising above 1, this means that every person infected is potentially infecting a number of people onwards – a situation that can quickly lead to rapidly rising cases. We are monitoring cases in our area in real-time, to ensure that early and targeted measures can be taken, to try to avoid having to impose more widespread restrictions.

In order to keep our local cases of Covid-19 low, we are encouraging all West Berkshire Residents to play their part, keep their social distance, regularly wash their hands and wear face masks when advised. These are relatively simple measures that everyone can take in order to keep our local cases low. Any further measures that are put in place locally, will be proportionate to the risk at that time with the aim of keeping local residents safe. While we understand that for many individuals, Covid-19 can be a mild illness, sometimes even with no symptoms; anyone who does contract the illness has the potential to pass it on to someone more vulnerable who could suffer much more severe consequences.

We recognise that the control measures will have led to longer term health and economic impacts and this is likely to continue and potentially worsen during a second wave. However,

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there are also ongoing recovery actions occurring in conjunction with response work to minimise any harmful effects and, as a council, we are working to ensure that we recover the healthy, prosperous and economically active West Berkshire.

**(c) Question submitted by Zoe Teather and Heather Wild
to the Berkshire Healthcare NHS Foundation Trust**

Question: “Does the board recognize and how does it plan to support the urgent need for expansion and resuming of health services available universally to new parents in particular new mothers who have had babies born during 2020?”

Answer: The Healthy Child Programme provides a commissioned framework for universal preventative support for families and children under the age of five years. This includes five mandated contacts (ante-natal, new birth, 6-8-week check; 9 month and 2½ year health and development reviews). We also offer additional targeted support to those families with identified needs. Universal support and guidance for families is also available via our duty phone line (09.00 – 4.30), through online resources (<https://cypf.berkshirehealthcare.nhs.uk/our-services/public-health-nursing-health-visiting-school-nursing-immunisation/health-visiting/>) and well-baby/child health clinics held in various locations across Reading.

Following the Government lockdown in March 2020 and the clear public message to ‘stay at home, protect the NHS, save lives’, Public Health England issued guidance for community provider services requiring the following HV contacts to be paused with immediate effect:

- Universal Antenatal group contacts
- Universal 9-12-month developmental review
- Universal 2-2.5-year developmental review
- Drop-in well-baby clinics/introducing solids sessions

However the service continued to prioritise the new birth visit and the 6-8 week contact as well as supporting those families with additional targeted needs, however these contacts were mainly by video link or phone with only those requiring essential contact seen at home in line with Government guidance. As a service we also identified that many families with young children were reluctant to have health professionals visit them at home for fear of the transmission of the virus.

The service appreciates that this was an extremely difficult time for all, but particularly for new parents without the usual support from family, friends and other services, a reduction in face to face contact from midwifery, primary care services and Health Visiting. The service has worked extremely hard to take all necessary steps to mitigate risks and the impact by initially extending the hours of operation of our Duty telephone line and our social media information.

In further recognising the needs of new parents, the service worked with the Public Health commissioners across Berkshire and temporarily introduced additional contacts for parents at 4 and 12-14 weeks, to provide added support and answer any questions families may have, including those in relation to mental health, coping with a new baby and the impact of Covid19 on families.



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From June 2020 the service has moved forward with the phased restoration of the Health Visiting Service as per the guidance issued by Public Health England, however the usual venues where well-baby/child health clinics are provided including community halls and children's centres have unfortunately been temporarily closed due to Covid19 restrictions and some remain closed. In responding to the lack of clinic space, the service has continued to offer booked well-baby clinic appointments at NHS Trust sites for identified babies to be seen across Berkshire and as venues open up the service is gradually returning to its usual venues. However due to the limited available space and requirements for social distancing, these appointments are spaced apart to ensure that we do not have more than one parent/child present at any one time. This does impact on the numbers of appointments that can be offered, therefore currently only offered to those assessed by a Duty Health Visitor as having an identified concern.

In adhering to Government/Covid19 restrictions and prioritising the health and wellbeing of our families, the Health Visiting service is currently unable to offer 'drop-in' or Group Clinic contacts.

The service is now increasing face to face contacts, including all targeted families and universal new birth contacts and the re-introduction of the ASQ health and developmental reviews at 9 months and 2 - 2½ years. They hope to extend the availability of bookable clinic appointments; however this is of course subject to having suitable venues open and available that have been assessed as compliant with Covid19 environmental risk assessments.

(d) Question submitted by Zoe Teather and Heather Wild to the Berkshire West Clinical Commissioning Group

Question: "What additional services will be made available to support the maternal mental health crisis here in West Berkshire as part of the Board's post-Covid planning?"

Answer: Please find below some info about Perinatal mental health support post-Covid:

In order to support women to enjoy good mental health during pregnancy midwives work in close partnership with the Perinatal Mental Health services that operate in our area such as the Berkshire Perinatal Mental Health Team, Health Visitors, Talking Therapies, Community Mental Health Teams, The Birth Trauma Service and GPs. Together we are working to ensure that our services are accessible, responsive to women's individual needs, and follow national recommendations.

Several recommendations about the provision of Mental Health Services have been published in a recent report following a review of outcomes for women during the current pandemic. The maternity department with the Royal Berkshire Hospital and the Berkshire Perinatal Mental Health service are working to ensure all recommendations from this report are included in our service.

We are also reviewing the training midwives receive regarding perinatal mental health to include early identification of changes to women's mental health and the effects the pandemic is having

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on women and their families. The Berkshire Perinatal Mental Health Team is developing a pathway of care for partners as per the Long Term Plan.

In recognition of women's needs during the pandemic at the RBH we:

- Encourage one birthing partner to be present for labour and birth this includes early labour and induction of labour
- Partners can attend hospital antenatal appointments and scans
- Partners can visit on the postnatal wards
- Enabled partners to stay overnight if women have mental health concerns
- The community team now telephones partners on day 9 after birth to find out how they are and answer any specific they have
- Midwives can refer directly to any Perinatal Mental Health Service within our area, as can women
- Midwives enquire about emotional wellbeing and mental health at every contact
- Consultant midwives that develop in partnership with women and Perinatal Mental Health Service their preferences for their care, offer psychological support and care planning
- A Joint Obstetric and Perinatal Mental Health Clinic
- Access to training by the Institute of Health Visitors and the Berkshire Perinatal Mental Health Team
- Hold live Facebook chats with women so they can ask any question they have
- Developed a FAQ document that explains changes to care during the pandemic, this is available on the RBH website and is update frequently
- Facebook, Instagram and Twitter pages where information is shared

(e) Question submitted by Mrs Carol Jackson-Doerge to the Berkshire Healthcare NHS Foundation Trust

Question: "What steps are being taken by the Health and Wellbeing Board to ensure that pregnant women from ethnic minority backgrounds in West Berkshire, who are known to face additional maternity risks compared to white women, don't suffer even poorer outcomes during the COVID pandemic?"

Answer: NHS England and NHS Improvement have asked Maternity services across the country to take four specific actions to minimise the additional risk of COVID-19 for Black, Asian and minority ethnic (BAME) women and their babies. In response to this request the maternity service at Royal Berkshire Foundation Trust (RBFT) has set up a working group to look at how we can achieve these actions. The actions include increasing support for at risk pregnant women from BAME backgrounds through tailored communication, co-producing an operational policy with Maternity Voices Partnership (MVP) and community organisations for managing risks of COVID-19 for this group, this will include how we help minimise the risk of vitamin D deficiency. As part of this work we have also reviewed our digital clinical systems to ensure we can effectively identify these women in our care. The maternity service and the MVP will also be looking to increase links with local community support groups and networks to help with this work



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