

# 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 12 SEPTEMBER 2024

**Present:** Councillor Heather Codling (Chairman), Dr Abid Irfan (Vice-Chairman), Councillor Patrick Clark, Paul Coe, AnnMarie Dodds, Sean Murphy, and Dr Matt Pearce

**Attending Remotely:** DCI Emily Evans (Substitute) (In place of Andy Penrith), Dr Janet Lippett, Bernie Prizeman (Substitute) (In place of Rachel Peters), Councillor Jo Stewart, Fiona Worby

**Also Present:** Dr Lara Alloway Chief Medical Officer, NHS Hampshire and Isle of Wight ICB), Steven Bow (Consultant in Public Health), Dr Charlotte Hutchings (Clinical Director, NHS Hampshire and Isle of Wight ICB), Naomi Ratcliffe (Clinical Programme Manager Hampshire Hospitals NHS Foundation Trust), Kate Toone (Adult Social Care), Alex Whitfield (Chief Executive, Hampshire Hospitals NHS Foundation Trust), Gordon Oliver (Principal Policy Officer) and Sam Chiverton (Apprentice Democratic Services Officer – Digital)

**Apologies for inability to attend the meeting:** Councillor Jeff Brooks, Councillor David Marsh, Gail Muirhead, Supt Andy Penrith, Rachel Peters, Dr Heike Veldtman

**Councillor(s) Absent:** Councillor Nigel Foot and April Peberdy

#### PART I

##### 19 Minutes

The Minutes of the meeting held on 11 July 2024 were approved as a true and correct record and signed by the Chairman.

##### 20 Actions arising from previous meeting(s)

Progress on actions from the previous meetings was noted.

In relation to action 24-5, it was noted that membership of the sub-groups had been added to each of their reports.

##### 21 Declarations of Interest

No declarations of interest were received other than the standing declarations given in the agenda papers.

##### 22 Public Questions

A full transcription of the public question and answer session is available from the following link: [Transcription of Q&As](#).

##### 23 Petitions

There were no petitions presented to the Board.

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### 24 Health and Wellbeing Board Membership

The following changes to the Board's membership were noted:

- Sarah Webster had gone on maternity leave, so Dr Abid Irfan would step in as Vice Chairman until a new ICB Medical Director was appointed.
- April Peberdy had been appointed as WBC Service Director – Communities. (It was confirmed that she would remain as a Board Member, since she managed a number of services that impacts the wider determinants of health.)

It was noted that the proposed Local Government Association review of the Health and Wellbeing Board would consider its future membership needs.

### 25 Hampshire Together Update

The Board received an update on the Hampshire Together Programme (Agenda Item 8). The Item was introduced by Isobel Wroe (Director of Reconfiguration and Strategic Change, NHS Hampshire and Isle of Wight ICB) and Alex Whitfield (Chief Executive, Hampshire Hospitals NHS Foundation Trust).

The following points were raised in the debate:

- The area covered by the consultation included the hospital's catchment plus key areas around the edges, including parts of West Berkshire.
- There would be little impact on the Royal Berkshire Hospital if the Basingstoke Hospital was to relocate, since changes to travel time would be minor. Some people may choose to travel to Swindon instead. It was recognised that public transport could affect hospital choices for some people. All current options for both hospitals were being considered in the modelling.
- It was noted that new ways of working were already being introduced, such as Integrated Neighbourhood Teams. Alongside the hospital redevelopment programme, collaborative community models of care were being developed with Primary Care Networks to reduce the need for patients to travel to hospital. This included tests and diagnostics as well as digital/remote transformation. It was recognised that more could be done to work with GPs near the Hampshire/West Berkshire boundary.
- The importance of public transport links was recognised. The Hampshire Together Team had already talked to Stagecoach. It was noted that hospital bus services tended to be amongst the most profitable. However, it was difficult to give absolute assurance at this stage about exactly what bus services would be provided. Until there was commitment to a particular site, the Hampshire Together Team had to be cautious about what they said. This was recognised as an important topic in terms of feedback received, and its role in tackling access and environmental issues. Most people would still go to the same location for scans and outpatient appointments, so their journeys would not be affected.
- It was confirmed that conversations were taking place between the teams planning new hospitals locally. These were happening at ICS level and through the New Hospitals Programme. The Hampshire, Berkshire and Frimley Teams were mindful of their inter-relationships. Transport had been a key concern highlighted in feedback from initial engagement on Berkshire Together, and access was considered to be more important than the hospital's location.
- It was noted that the Directors of Public Health had joined the Options Development Group. Conversations were being sought about: prevention, taking a whole system

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approach, managing demand, and new models of care, rather than just focusing on new buildings. This would be important in terms of reducing the size of the new hospitals.

- Members stressed the importance of investment in Newbury Hospital, given that current proposals were to relocate the acute hospitals further away.

**RESOLVED** to note the update.

### 26 **Cost of Living Update**

The Board considered the Cost of Living Crisis Update (Agenda Item 9). Sean Murphy (Service Lead - Public Protection) presented this item.

The following points were raised during the debate:

- Concern was expressed that West Berkshire Council's latest Household Support Fund allocation had already been exhausted.
- It was agreed that it was important for the Board to keep a watching brief on cost of living issues.
- Housing was acknowledged as a key factor, and changes proposed in the current Renters (Reform) Bill were of particular interest.
- It was noted that the Board had recently held a Hot Focus Session on Housing and Health, and a report would be brought to a future HWB meeting on this topic.
- The cost of living reports were considered useful for providing valuable insights into the local situation and how local residents were affected.
- The Board was reminded that the Joint Local Health and Wellbeing Strategy included a priority to reduce the differences in health between different groups of people. Lifestyle and behaviour factors were of secondary importance when people were struggling to pay for food and bills.
- It was noted that there had been no drop in demand for support, and in Children's Services they were seeing increasing complexity, which was linked to the Cost of Living Crisis. The situation was particularly challenging due to the reduction in early help and prevention activity as a result of the pressures the Council was experiencing.
- It was recognised that the Council needed to have a more pro-active and early engagement model of working with the voluntary sector.

**RESOLVED:**

- (a) To note the report and the response of partners to date.
- (b) That the Service Lead for Public Protection provide an update to the Board at its next meeting.

### 27 **Proposed Review of the Health and Wellbeing Board**

The Board considered the report on the Proposed Review of the Health and Wellbeing Board (Agenda Item 10). The item was introduced by Dr Matt Pearce (Director of Public Health).

The following points were raised in the debate:

- Members were supportive of the proposals and agreed that the Board should seek to provide tangible benefits for the health and wellbeing of local residents.
- It was agreed that the brief had captured all the relevant 'positives' and 'drivers for change'.
- Members could see the potential power of the Board, but agreed that it needed to do more than rubber stamp reports.

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- It was suggested that Board should review what it was doing to drive improvements in population health.
- It was highlighted that the Board's sub-groups did not feel empowered, and lacked dedicated funding to deliver additional work.
- Also, it was stressed that officers should not be expected to take on additional work, and sometimes an additional resource was needed to be an activator of change.
- It was felt that this was a good point at which to undertake a review of the Board.

**RESOLVED** to approve the brief for issue to the Local Government Association to inform their review of the Board's governance arrangements and working practices.

### 28 **Joint Local Health and Wellbeing Strategy Delivery Plan Update**

The Board considered the Joint Local Health and Wellbeing Strategy Delivery Plan Update (Agenda Item 11). The item was presented by Steven Bow (Consultant in Public Health).

The following points were raised in the debate:

- It was acknowledged that the Delivery Plan would need to be aligned with the findings of the LGA review, but the review may not be able to consider the Delivery Plan in detail and the onus would be on the Board and Steering Group to drive this forward.
- It was suggested that attention should be given to those actions that hadn't been delivered as planned.
- Issues with delivery of Action 2.1 (Dementia Awareness Training) were noted, and concerns were expressed at the lack of take-up amongst Adult Social Care (ASC) staff. However, it was explained that ASC staff already had considerable insight into dementia and this particular action was unlikely to add to their knowledge and understanding. Further work was needed to work out who was the best target for awareness training and what the best way would be to get the message across.
- It was suggested that the Board needed to reflect on whether the underlying strategy should be reviewed. It was felt that the strategy was quite broad, so rather than reviewing the strategy, the Board may wish to consider whether it was focusing on the right things and the areas where performance was poor.
- It was highlighted that some of the actions had delivery timescales that were in the past and it was suggested that these should be reviewed.

**RESOLVED** to note the progress made in implementing the Delivery Plan and agree that it be updated, taking account of feedback received as part of the proposed LGA Review of the Health and Wellbeing Board.

### 29 **Changes to Pharmaceutical Services**

The Board considered the report on Changes to Pharmaceutical Services (Agenda Item 12). Gordon Oliver (Principal Policy Officer) presented the item.

The following points were raised during the course of the debate:

- It was noted that recent media articles had highlighting that West Berkshire had the lowest number of pharmacies per head of population in the country and there had been issues in the recent past where individual pharmacies had struggled to meet demand. It was suggested that this could be highlighted in the response.

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- It was highlighted that there had previously been four pharmacies in Thatcham, but there were currently only two, which suggested that a third pharmacy would not be an issue.
- Officers reminded the Board that they had previously agreed not to publish a supplementary statement to say that there was a significant gap in provision. The Local Pharmaceutical Committee was consulted on all applications for new pharmacies - they were mindful of the impact on the viability of existing pharmacies and looked to see whether there was sufficient capacity, taking account of changes in demand and population. The existing pharmacies in Thatcham were considered to be performing well. However, it was suggested that the perspective of local residents needed to be considered as well.
- It was noted that communities to the north of the town tended to visit Thatcham to use pharmacy services.
- While local Ward Members had not raised any fundamental concerns, they had previously highlighted temporary issues with local pharmacies.
- It was recognised that the Pharmacy First programme was being rolled out and a new contract proposed for 2025 may generate additional work. It was suggested that this would be a lot of additional work for just two pharmacies in Thatcham.
- The Board was reminded that major housing growth was proposed for areas to the north and east of Thatcham.
- It was noted that work was about to commence on updating the Pharmaceutical Needs Assessment, which would take account of the aforementioned issues.

**RESOLVED** that the Board should make formal representation to NHS Resolution to support the unforeseen benefits application for an additional pharmacy in Thatcham, delegating the wording of the response to the Director of Public Health in consultation with the Chairman of the Health and Wellbeing Board.

### 30 **Better Care Fund Plan 2024/25**

The Board considered the Better Care Fund Plan 2024/25 (Agenda Item 13). The item was presented by Paul Coe (Executive Director – Adult Social Care).

The following points were raised in the debate:

- Due to the challenging timescales for submission, the Plan had already been signed off by the Health and Wellbeing Board Chairman, so the item was presented for information only.
- Thanks were expressed to Maria Shepherd for the work she had put into preparing the submission.

**RESOLVED** to note the report.

### 31 **BOB ICB Annual Report and Joint Capital Resource Use Plan 2024-25**

The Board considered the BOB ICB Annual Report and the Joint Capital Resource Plan (Agenda Item 15). Dr Abid Ifan presented the item.

The following points were raised in the debate:

- It was suggested that a report should be taken to a future meeting of the Health and Wellbeing Board to provide an update on the ICB's new operating model.

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- It was confirmed that the consultation had closed and the ICB was reviewing the feedback provided. This would be considered at a ICB meeting towards the end of September, and the outcomes would subsequently be communicated to partners.
- It was highlighted that the ICB had done a lot of work on how they could work differently in future.
- While it was recognised that there had been some reassurances from the ICB about how some potentially undesirable impacts could be mitigated, the Board wanted to have the opportunity to comment on the impacts of the new operating model at a later date and raise any concerns about areas that were not felt to be working as they should.

### **Actions:**

- **ICB to provide an opportunity for the Board to provide feedback on how the new operating model is working by means of a report to the May 2025 meeting.**

**RESOLVED** to note the two reports presented.

## **32 Community Wellness Outreach Update**

The Board considered the Community Wellness Outreach Update (Agenda Item 14). Kate Toone (Project Manager (Integration and Quality) and TEC Service Manager) presented the report.

The following points were raised in the debate:

- The Board considered this to be a good example of joint working, preventative work, and awareness raising, and expressed their support for the scheme.
- Links to the hospital redevelopment proposals and alternative models of care were identified.
- It was noted that the programme of checks was being expanded with regular clinics in the Council Offices and Newbury Library.
- Members asked about where the community champions had come from.
- It was suggested that a clinical audit would be useful to understand how the project had impacted population health.

### **Actions:**

- **Kate Toone to provide details about how the community champions had been recruited.**
- **Matt Pearce to discuss the project with the Audit Team.**

**RESOLVED** to note the report.

## **33 Integrated Care Board Update (September 2024)**

The Board considered the ICB Update (Agenda Item 16).

No comments were received in relation to this item.

**RESOLVED** to note the report.

## **34 Health and Wellbeing Board Sub-Group Updates**

The Board considered the Sub-Group Updates (Agenda Item 17).

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It was noted that reports were missing for the Homelessness Strategy Group and Skills and Enterprise Partnership.

**Action: Updates to be circulated when available.**

**RESOLVED** to note the report.

### 35 Members' Question(s)

There were no Member questions submitted to this meeting.

### 36 Health and Wellbeing Board Forward Plan

The Board reviewed the Forward Plan (Agenda Item 19).

- It was noted that Dr Abid Irfan would not be able to attend the next meeting in December, so Helen Clark would present the item on the implementation of the Pharmacy First initiative.
- The following changes were proposed:
  - Bring an Annual Health Protection report to the December meeting.
  - Bring a report on the new ICB Operating model to the March meeting.
  - Dr Matt Pearce to consider whether a report would be required on the approach to be used for the Pharmaceutical Needs Assessment.
  - Bring a report on SEND and the outcomes of the Delivering Better Value Programme to the March meeting.
  - Bring forward the report on Housing Standards from March to December.

**Action: Dr Matt Pearce to consider whether a report on the PNA should come to the December meeting.**

**RESOLVED** to note the Forward Plan subject to the proposed amendments.

### 37 Future meeting dates

The dates of the future meetings were noted.

*(The meeting commenced at 9.30 am and closed at 11.09 am)*

**CHAIRMAN** .....

**Date of Signature** .....