

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD
HELD ON 12 OCTOBER 2017 FROM 5.00 PM TO 7.00 PM**

Present

Dr Johan Zylstra	NHS Wokingham CCG
Nick Campbell-White	Healthwatch
Beverley Graves	Business Skills and Enterprise Partnership
Charlotte Haitham Taylor	WBC
Ian Pittock	WBC
Katie Summers	Director of Operations, Wokingham CCG
Darrell Gale (substituting Judith Wright)	Consultant in Public Health
Philip Sharpe (substituting Judith Ramsden)	WBC
Jeremy Sharpe (substituting Kevin Ward)	Place and Community Partnership

Also Present:

Madeleine Shopland	Democratic and Electoral Services Specialist
Carol-Anne Bidwell	Public Health Project Officer
Graham Ebers	Director of Corporate Services
Manjeet Gill	Interim Chief Executive
Julia Mlambo	Interim Community Safety Partnership Manager
Chrisa Tsiarigli	Public Health Intelligence Specialist

31. APOLOGIES

Apologies for absence were submitted from Councillors Mark Ashwell and Julian McGhee-Sumner and Judith Ramsden, Clare Rebbeck, Jim Stockley, Superintendent Shaun Virtue, Kevin Ward, Dr Cathy Winfield and Judith Wright.

32. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Board held on 10 August 2017 were confirmed as a correct record and signed by the Chairman.

33. DECLARATION OF INTEREST

There were no declarations of interest.

34. PUBLIC QUESTION TIME

There were no public questions.

35. MEMBER QUESTION TIME

There were no Member questions.

**36. DEVELOPMENT OF THE WOKINGHAM COMMUNITY SAFETY STRATEGY
2018/21**

Julia Mlambo, Interim Community Safety Partnership Manager updated the Board on the development of the Wokingham Community Safety Strategy 2018/21.

During the discussion of this item the following points were made:

- The aim of the strategy would be to reduce crime within Wokingham by supporting victims, reducing offending and diverting individuals away from the criminal justice system, by directing resources and interventions to people and communities most in need.
- The 1998 Crime and Disorder Act (as amended by Police and Social Responsibility Act 2011) placed a statutory duty on all Community Safety Partnerships to prepare and implement a partnership plan to reduce crime, substance misuse and Anti-Social Behaviour within their areas. Whilst the Council did not currently have a Strategy in place, a strategic assessment which comprised of local data which aimed to provide a comprehensive picture of crime and disorder related need in the Borough, had been produced in 2016.
- Data would be gathered and analysed to help further identify priorities. A draft Strategy would be produced and consulted on early in the new year. The Community Safety Partnership Manager would be part of the Joint Strategic Needs Assessments working group, which would facilitate the sharing of relevant data key intelligence leads.
- The Community Safety Partnership would consult with partners including Public Health when setting its priorities for 2018 to 2021.
- Councillor Haitham Taylor commented that she was pleased to see that domestic abuse was a priority for the Partnership but that she would like to see greater mention of the rehabilitation of perpetrators. She went on to question whether Priority 2 – Serious Organised Crime could also include reference to gang crime and problems around new illegal substances such as Spice. With regards to Priority 3 – Child Sexual Exploitation, she questioned whether reference should be made to Female Genital Mutilation.

RESOLVED: That the Health and Wellbeing Board support the development of a Community Safety Strategy to drive forward the Borough's crime reduction activities from 2018 to 2021.

37. UPDATES FROM BOARD MEMBERS

The Board received updates on the work of the following Board members:

Business, Skills and Enterprise Partnership:

- Beverley Graves updated the Board on an event that the Central Berkshire Education Business Partnership had hosted on 20 July at Bulmershe School to encourage young people to pursue careers in Science, Technology, Engineering and Maths. 115 young people had participated and had been set the task of designing an app to support young people with mental health concerns. Positive feedback had been received. Beverley thanked Healthwatch for their contribution to the event.

Place and Community Partnership:

- Jeremy Sharpe commented that there would be a discussion on the Partnership's involvement in the Health and Wellbeing Board, at the next Board meeting.

Healthwatch Wokingham Borough:

- Nick Campbell-White stated that feedback had been received on Healthwatch Wokingham Borough's report on extra care and that it was clear that many people

did not understand what was meant by extra care. Dr Zylstra commented that it was important to understand what was being offered and to communicate this effectively to the public. Darrell Gale indicated that a definition could be included in the Health and Wellbeing Board's glossary of terms to assist Board members.

- In response to a query from Nick Campbell-White regarding a response to how the CCG would be prescribing gluten free products, Katie Summers commented that this had been passed to the Head of Prescribing, who would respond.
- Board members were updated on a number of Enter and Views including a forthcoming visit to Prospect Park which would be a joint visit of 5 Healthwatches.
- Healthwatch Wokingham Borough had supported Brighter Berkshire in raising mental health issues.
- Katie Summers thanked Healthwatch Wokingham Borough for their support in the engagement work around the Community Health & Social Care.

RESOLVED: That the updates from Board members be noted.

38. LOCAL ACCOUNT OF ADULT SOCIAL CARE SERVICES 2016-17

Phillip Sharpe, Interim Assistant Director Adults' Services presented the Local Account of Adult Social Care Services 2016-17.

During the discussion of this item the following points were made:

- In 2016 the Adult Social Care teams were contacted by 4,988 people. 275 new clients went on to receive Short Term Support to maximise independence whilst 1,776 accessed Long Term Support.
- In 2016-17 Wokingham had scored 19.3 out of a maximum of 24 for the overall measure for enhancing the quality of life. This was up from 19.0 in 2015-16 and above the national average of 19.1.
- The number of people with a learning disability in paid employment had increased to 14.4%, up from 11.8% in the previous year, which compared well with the South East England figure of 6.2%.
- With regards to the percentage of people who had been given reablement services when they left hospital who were still at home 91 days later, the figure for Wokingham for 2016-17 had been 72.7%, down from 76.8% in the previous year. This decrease was thought to be the result of a recording issue.
- Katie Summers commented that Wokingham performed very well with regards to delayed discharges.
- The Board was pleased to note that the proportion of service users who said that those services made them feel safe and secure had increased from 78.8% in 2015-16 to 90% in 2016-17.
- 37.5% of carers had reported that they were extremely or very satisfied with the support services they received in 2016-17 which was a decrease from 39.7% in 2015-16 and lower than the South East region average of 41.2%. The reason for this was not yet known but the Carers Strategy was being refreshed.
- It was noted that 5 formal complaints had been received in 2015-16 and 2016-17. Board members questioned whether they related to similar matters.
- In response to a question, Phillip Sharpe agreed to feed back on the definition of secondary mental health services.
- The Board requested further information regarding the 510 safeguarding concerns received.

- The Board was informed that this was the last year that the Local Account would be presented in the present format.

RESOLVED: That the report be reviewed and noted.

39. MERGER OF THE FOUR BERKSHIRE WEST CCGS

The Health and Wellbeing Board received a briefing on the merger of the four Berkshire West CCGs.

During the discussion of this item the following points were made:

- Katie Summers indicated that the four GP councils had voted to merge. Ratification from NHS England was awaited. The Health and Wellbeing Boards were unlikely to see any change should the merge proceed.
- One of the primary reasons for the merger was to reduce bureaucracy.
- Darrell Gale commented that the governance structure did not include the Director of Public Health and that many CCG Boards included this officer as a non-voting member. Katie Summers indicated that Lise Llewellyn and Judith Wright had been regular attendees of the Executive Committee. Dr Zylstra emphasised that there was a strong recognition that Public Health needed to be involved in the Accountable Care System.
- Councillor Haitham Taylor commented that residents may see the merger as a step away from a local focus and that should the merger proceed, a clear message needed to be put out that residents should not see any change.
- Board members were assured that there would still be locality boards.

RESOLVED: That the update on the merger of the four Berkshire West CCGs be noted.

40. HEALTH AND WELLBEING STRATEGY ACTION PLAN AND DASHBOARD

The Board considered the Health and Wellbeing Strategy action plan and dashboard.

During the discussion of this item the following points were made:

- Darrell Gale reminded Board members that the purpose of the Key Performance Indicators (KPIs) dashboard was to monitor the overall performance in the four key Health and Wellbeing priority areas.
- At present there were 44 proposed KPIs; 8 relating to Key Priority Area 1, 11 to Key Priority Area 2, 18 in Key Priority Area 3 and 7 to Key Priority Area 4. It was proposed that the KPIs be presented on a six monthly basis and that local targets be set for all KPIs.
- It was anticipated that the final dashboard would be signed off at the Board's December meeting.
- Councillor Pittock emphasised that it was important that each KPI was worded in such a way as to be easy for the public to understand.
- Councillor Haitham Taylor commented that many of the KPIs relating to mental health referred to the higher tier services. She questioned whether the impact of Talking Therapies could be monitored. Darrell Gale stated that the number of people using the service was still quite small.
- Councillor Haitham Taylor went on to request that there be more specific KPIs relating to Looked After Children and also more indicators relating to children and young people.

- Katie Summers suggested that those KPIs which purely measured activity numbers, be removed.
- Nick Campbell-White indicated that he would feed back Healthwatch Wokingham Borough's comments on the KPIs separately.
- Chrisa Tsiarigli, Public Health Intelligence Specialist, would have further discussions with individual Board members in order to develop the dashboard.

RESOLVED: That the current proposed list of KPIs Health and Wellbeing Dashboard Draft be noted.

41. RESOURCES AND INITIATIVES WHICH SUPPORT THE HEALTH & WELLBEING STRATEGY ACTION PLAN.

The Board was updated on the resources and initiatives which supported the Health & Wellbeing Strategy Action Plan.

During the discussion of this item the following points were made:

- The report had been produced as a response to a specific question from a Member who had wished to understand the resource allocation for the range of projects funded in line with the Health and Wellbeing Strategy priorities.
- Darrell Gale explained that the Public Health grant was currently ring-fenced but that the Government was looking to remove this ring-fence from April 2019. The 21st century Council project would also have an impact with regards to funding.
- Councillor Pittock commented that the majority of initiatives related to health rather than wellbeing.
- In response to a Member question regarding the use of 'no specific resources allocated' and 'no specific resources allocated as yet' Darrell Gale clarified that in these instances the initiative was provided as part of the general service delivery work.
- With regards to the priority area 'Reducing the gap in school achievement between identified disadvantaged children and the wider population', Beverley Graves stated that although schools were not charged for all school improvement team activities with this focus, there was a cost associated with officers' time.

RESOLVED: That the report be noted.

42. INFLUENZA VACCINE CAMPAIGN 2016-17 REVIEW

Carol-Anne Bidwell, Public Health Project Officer updated the Board on the Influenza Vaccine Campaign 2016-17 Review.

During the discussion of this item the following points were made:

- Flu had a huge impact each year on the NHS and Social Care. A Flu Plan was developed to reduce the burden locally and to help plan business resilience.
- Planning for the 2017-18 flu season had begun in June.
- The Board's support for a multi-agency approach was requested.
- The key aims of the immunisation programme in 2016-17 were outlined. These had included to actively offer the flu vaccine to 100% of people in the eligible groups and to immunise 60% of children, with a minimum 40% uptake in each school.
- Board members were informed that uptake had improved across all areas in 2016 from 2015.

- Take up of flu vaccines amongst NHS workers had improved, except in Frimley NHS Foundation Trust.
- There was a variation in uptake between GP surgeries.
- Whilst uptake among school children was good, uptake in other risk groups remained below the desired level; this was in line with other areas of the country.
- Board members were informed that it was difficult to accurately measure the uptake amongst front line staff as some people chose to go private. If an individual chose to have a flu vaccination privately their GP was not notified of this.
- It was noted that providers of residential and nursing care were not consistently offering flu vaccines to employees in line with national recommendations, which remained a challenge for local authorities and CCGs to influence.
- Work was being carried out to improve take up by council staff. Flu clinics were being offered in satellite sites in addition to Shute End.
- The Board discussed the immunisation of children. The Board was informed that children aged 2 to 4 years old in particular were 'super spreaders.'

RESOLVED: That

- 1) the Board agrees and endorses the multi-agency approach;
- 2) the Board supports respective organisations to fulfil their responsibilities as set out in the national flu plan, be flu champions - take every opportunity to promote the vaccine and debunk myths and lead by example, take up the offer of a vaccine where eligible.

43. PUBLIC HEALTH OUTCOMES FRAMEWORK

The Board considered the Public Health Outcomes Framework.

During the discussion of this item the following points were made:

- It was noted that there had been no significant improvement in the cumulative percentage of the eligible population aged 40-74 who were offered a Health Check; and no significant change in the Chlamydia detection rate in population aged 15-24.
- Work was in progress to invite the remaining eligible population to an NHS Health Check.
- Wokingham Borough was an area of low prevalence for chlamydia so detection rates would always be low.

RESOLVED: That the changes in performance outcomes contained in the Public Health Outcomes Framework be noted.

44. WOKINGHAM INTEGRATION AND BETTER CARE FUND (BCF) NARRATIVE PLAN 2017/19

Katie Summers presented the Wokingham Integration and Better Care Fund (BCF) Narrative Plan 2017/18.

During the discussion of this item the following points were made:

- The Chairman of the Health and Wellbeing Board had signed off the Plan on behalf of the Board on 11 September 2017.
- Confirmation had been received of the first stage of NHS England assurance.

- It was hoped that Step Up beds would shortly be provided at Wokingham Hospital.
- Councillor Pittock commented that where the plan referred to a shortage of affordable housing it should read a shortage of social housing.

RESOLVED: That the narrative submission be ratified.

45. FORWARD PROGRAMME

The Board considered the forward programme for the remainder of the municipal year.

During the discussion of this item the following points were made:

- An update from the Sustainable Transformation Plan Prevention Group would be presented at the Board's December meeting.
- Dr Zylstra indicated that a paper on the strategic role of local authority for health needs in future would be taken to the Board's December meeting.

RESOLVED: That the forward programme be noted.