

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD
HELD ON 14 JUNE 2018 FROM 5.00 PM TO 7.05 PM**

Present

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| Richard Dolinski | Executive Member for Adult Social Care |
| Darrell Gale | Acting Strategic Director of Public Health for Berkshire |
| Charlotte Haitham Taylor | Leader of the Council |
| David Hare | Opposition Member |
| Clare Rebbeck | Voluntary Sector and Place and Community Partnership Representative |
| Katie Summers | Director of Operations, Berkshire West CCG |
| Martin Sloan | Assistant Director Adult Services |
| Jim Stockley (substituting Nick Campbell-White) | Healthwatch Wokingham |
| Graham Ebers (substituting Shaun Virtue) | Director Corporate Services |

Also Present:

| | |
|--------------------|--------------------------------------------------------|
| Madeleine Shopland | Democratic and Electoral Services Specialist |
| Manjeet Gill | Interim Chief Executive |
| Julie Hotchkiss | Interim Consultant in Public Health |
| Nicola Strudley | Healthwatch Wokingham |
| Chrisa Tsiarigli | Public Health Intelligence Specialist |
| Rhian Warner | Better Care Fund Programme Manager |
| Rosie Rowe | Programme Director Bicester Healthy New Town Programme |

1. ELECTION OF CHAIRMAN 2018-19

RESOLVED: That Councillor Richard Dolinski be elected Chairman of the Health and Wellbeing Board for the 2018-19 municipal year.

2. APPOINTMENT OF VICE CHAIRMAN

RESOLVED: That Dr Debbie Milligan be elected Vice Chairman of the Health and Wellbeing Board for the 2018-19 municipal year.

3. APOLOGIES

Apologies for absence were submitted from Nick Campbell-White, Councillor Pauline Helliard Symons, Lisa Humphreys, Dr Debbie Milligan and Dr Cathy Winfield.

4. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Board held on 5 April 2018 were confirmed as a correct record and signed by the Chairman.

5. DECLARATION OF INTEREST

There were no declarations of interest.

6. PUBLIC QUESTION TIME

In accordance with the agreed procedure the Chairman invited members of the public to submit questions to the appropriate Members.

6.1 Bill Luck had asked the Chairman of the Health and Wellbeing Board the following question. Due to his inability to attend the following written answer was provided:

Question

With the concerns being expressed by local residents about delays in getting to see a doctor, are there sufficient numbers of doctors in general practice in the Borough to serve all the current residents and are there any new surgeries planned to serve the significant new development in the Borough, or any shortfall in the current provision, and, if so, are any CIL funds earmarked for such provision?

Answer

Some surgeries in Wokingham are carrying GP vacancies but on the whole the Borough has sufficient numbers of doctors to serve its population. There is a national shortage of GPs and as such NHS England is looking to recruit GPs from overseas. BW CCG has submitted a bid to be part of this programme, which if successful, will see four additional GPs working in Wokingham by the end of 2019. Other initiatives are also in place to support GP recruitment and retention. Alongside these, practices are also increasingly working with a more diverse clinical workforce including pharmacists and paramedics.

A number of surgeries have recently been given NHS funding to enable them to extend their existing premises to provide additional clinical capacity in response to the planned housing developments. These are: Finchampstead, Swallowfield, Brookside and Chalfont. The CCG continues to work with Wokingham Borough Council to plan for future housing growth with a view to funding being made available to support health care provision. Section 106 monies have been set aside for this purpose.

There are no plans to use Community Infrastructure Levy (CIL) for healthcare facilities.

7. MEMBER QUESTION TIME

There were no Member questions.

8. HEALTH AND WELLBEING BOARD REFRESH

The Director Corporate Services presented the Health and Wellbeing Board Refresh.

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

- A Health and Wellbeing Board Manager had been appointed and would be starting on 25 June.
- With regards to training the Local Government Association Self-assessment process "Stepping up to the place: Facilitated integration workshop" had started. An initial scoping call had taken place with LGA representatives and further calls would take places calls with key individuals. A half-day workshop would be held on 2 July 2018.
- A separate Berkshire West wide workshop, including the Health and Wellbeing Boards of West Berkshire and Reading Councils, was being planned by Julie Hotchkiss and Dr Cathy Winfield, and a facilitator recommended by the LGA. The date would most likely be in September. Councillor Haitham Taylor asked that the weeks of the political party conferences be avoided.

- The Board discussed public engagement and branding. Councillor Hare asked about the sub partnerships which fed into the Health and Wellbeing Board; the Community Safety Partnership was co-chaired by Graham Ebers and Superintendent Shaun Virtue, the Children and Young People's Partnership was chaired by Lisa Humphreys, Assistant Director Children's Services, Clare Rebbeck chaired the Place and Community Partnership and the Wokingham Leaders Partnership Board was co-chaired by Martin Sloan and Katie Summers.
- Katie Summers, Director Operations Wokingham, NHS Berkshire West CCG, stated that West Berkshire Health and Wellbeing Board had invited a planning officer to participate in the Health and Wellbeing Board in order to better connect the health and planning processes. She suggested that similar be investigated for the Wokingham Health and Wellbeing Board.
- Graham Ebers outlined which Officers and Members had been allocated which specific priorities to progress.

RESOLVED: That the actions to refresh the Health and Wellbeing Board Agenda be supported and noted.

9. BICESTER HEALTHY NEW TOWN PRESENTATION

Rosie Rowe, Programme Director Bicester Healthy New Town Programme, provided a presentation on the Bicester Healthy New Town programme.

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

- Bicester had a population of approximately 39,000. This was set to double by 2031.
- The programme was about growth and the challenges and opportunities that this brought. It was an opportunity to promote the health and wellbeing of the whole local population.
- The programme promoted behaviour change; becoming more active; being good neighbours; and eating healthily. It was appreciated that sustaining individual behaviour change could be difficult.
- A systems based approach and partnership was vital. Board members were informed of an event which a number of partners participated in. Talks had been given around exercise for diabetics, health walks and the Bicester Healthy New Town Programme, amongst other topics. After the event 27% of attendees had signed up for some form of structured education and support.
- The programme's key objectives had been consulted on with experts and residents and were as follows:
 - To increase the number of children and adults who are physically active and a healthy weight.
 - To reduce the number of people who feel socially isolated or lonely in order to improve their mental wellbeing.
- There were three programme workstreams:
 - Bicester's built environment - making best use of the built environment to encourage healthy living.
Community Activation – enabling local people to live healthier lives, with the support of local community groups, families and schools, and employers.
 - Health and care services -delivering new models of care that are focused on prevention and care closer to home which minimises hospital based care.
- Board members were informed that the programme had taken a year to set up and had been just over a year in delivery.

- The built environment was discussed. The relationship between health colleagues and planners had improved and there was a better understanding of each other's needs and constraints.
- The built environment could help encourage an active lifestyle. Digital innovations were also helping to address social isolation. Three safe and accessible 5km health routes had been marked out by a blue line in the old part of town. This encouraged people to meet up and walk the 'Bicester Blue Line.'
- On the Bicester West Health Route, the daily average footfall prior to installation of the Health Route was 557 people: this had increased to 708, a 27% increase.
- Work was being carried out with community groups, leisure providers, schools and businesses, to encourage the use of walking routes and cycle paths. There were a lot of micro businesses in the area.
- New models of care enabled through use of technology were being developed and tested with Bicester acting as a 'demonstrator site.'
- Rosie Rowe outlined the benefits of healthy place making at the 2 year point, including the fact that 2,000 primary school now ran a mile a day at school and 469 more people were participating in health walks.
- Healthy place making required a whole systems approach; policy, physical environment, organisations and institutions, social environment and the individual. It was important to build into Integrated Care Systems.
- Councillor Haitham Taylor asked how much resources had gone into the programme prior to its start. Rosie Rowe commented that the Healthy New Town programme was an NHS England funded demonstrator programme. Ten sites had been selected across the country. It was three year programme and funding had been provided from 2016. Approximately £900,000 would be provided over the three years. Rosie Rowe felt that results could potentially be achieved with approximately £150,000 per year. She went on to emphasise that it was important to have the dedicated resources in place to engage people and to make the necessary connections.

RESOLVED: That the Bicester Healthy New Town programme presentation be noted.

10. DIRECTOR OF PUBLIC HEALTH'S ANNUAL REPORT 2018

The Board received the Director of Public Health's Annual Report for 2018.

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

- It was a statutory requirement of the Director of Public Health to produce an annual report.
- The 2018 report focused on creating the right environment for health.
- The report, 'Creating the Right Environments for Health' recommended the following;
 - Local authorities and other agencies should continue to encourage community initiatives that make the most of natural space available, with the aim of improving mental health, increasing physical activity and strengthening communities.
 - Existing green space should be improved and any new developments should include high quality green spaces. The use of professional design and arrangements to ensure the ongoing management of natural environments should be considered if spaces are to be sustainable.
 - Opportunities to increase active transport should be considered when designing new green spaces and in the improvement of existing space.

- Planning guidance for new developments should specifically consider the use of green and blue space to improve the health and wellbeing of residents and others using the space.
- Local Authorities and their public health teams should foster new relationships with organisations aiming to improve the natural environment and its use.
- Councillor Haitham Taylor asked how the document would remain live. Darrell Gale, Acting Strategic Director Public Health Berkshire, commented that next year's report would include an update on the progression of the recommendations. The report would be circulated widely to schools, the voluntary sector and GP surgeries amongst others.
- Katie Summers commented that a group should be established to progress the report. Clare Rebbeck stated that this was something which the Place and Community Partnership could assist with.

RESOLVED: That the Board note the Director Public Health Annual Report and its conclusions and share it widely within their respective organisations and local communities.

11. JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) 2018 UPDATE

Chrisa Tsiarigli, Public Health Intelligence Specialist and Julie Hotchkiss, Interim Consultant in Public Health presented the draft Joint Strategic Needs Assessment (JSNA) 2018 updates.

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

- The document represented a refresh of the current JSNA. It was split into 6 chapters, starting with the Borough profile for general background. The next 4 chapters were arranged across the life course. The final chapter, 'People and Places' provided information on the wider determinants of health and intelligence on specific groups of people.
- A blank matrix had been circulated which Board members were encouraged to complete and return to Public Health, identifying key services, key service achievements, key service gaps and future recommendations.
- Chrisa Tsiarigli indicated that the draft JSNA was being finalised with a Steering Group. Six different groups had reviewed the different chapters.
- Manjeet Gill, Interim Chief Executive commented that it was a valuable document but that how Wokingham would help its most vulnerable residents needed to be further highlighted. More feedback was required, the data analysed and the key priorities identified.
- Clare Rebbeck indicated that a charity had undertaken research which provided information regarding deprivation in specific wards, which could be useful to the development of the final JSNA.
- Katie Summers commented that Public Health England had recently provided information to the Buckinghamshire, Oxfordshire and Berkshire West footprint which was at individual ward level and highlighted gaps in inequalities. Board members were informed that the gap between life expectancy for those with and without mental health problems was approximately 25 years in some areas.
- Councillor Haitham Taylor emphasised that the key outliers needed to be highlighted and addressed.
- Clare Rebbeck commented that food bank usage figures were a good indicator of deprivation.

RESOLVED: That the draft [JSNA] chapters be reviewed.

12. HEALTH AND WELLBEING PERFORMANCE DASHBOARD

Julie Hotchkiss, Interim Consultant in Public Health presented the Health and Wellbeing Performance Dashboard.

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

- With regards to 'Residents' Perception of Fear of Crime', Julie Hotchkiss indicated that if this was to go forward a bespoke survey of residents would need to be carried out. A decision would need to be taken with regards to whether or not to undertake this survey and if it were to go ahead, who would run and fund it.
- Graham Ebers, Director Corporate Services, commented that although Wokingham had a low crime rate, the perceived fear of crime was high.
- It was suggested that 'Gap in employment rate between those with a learning disability and the overall employment rate' and 'Gap in employment rate between those in contact with secondary mental health services and the overall employment rate' be selected as priority indicators.
- Julie Hotchkiss proposed that 'Self-reported: high anxiety score' be considered as a priority indicator.
- With regards to the 'Health-related quality of life for people with long-term conditions' it was noted that Wokingham was performing well but improvements could still be made.
- It was suggested that 'Dementia: Indirect Age-Standardised Recorded Prevalence (aged under 65years) per 10,000' not be included as a priority indicator.
- In response to a question from Councillor Haitham Taylor, Julie Hotchkiss indicated that an action plan would be developed around the agreed key priority indicators. The Board would be informed if measurable actions could not be produced. If this was the case the inclusion of the particular indicator would be relooked at.

RESOLVED: That

- 1) one or two of the new proposed indicators be substituted for the existing two in Priority 1;
- 2) a small group be convened to assess the value of and the cost-feasibility of commissioning an annual survey to assess the community's fear of crime;
- 3) support be given to the analysts working on the 5 Year Forward View to produce the synopsis statistic;
- 4) the specific changes to the indicators in Priority 2B, C and D be approved;
- 5) Priority 3 indicators be adjusted so that they measure inequality, and that the recommendations with regards to these indicators be accepted.
- 6) support be given to Wokingham Integrated Service Partnership analysts to produce the synopsis statistic for Priority 4.

13. BCF KEY ACHIEVEMENTS 2017-18

The Board considered the Better Care Fund Key Achievements 2017-18.

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

- The report provided a summary of Wokingham's Better Care Fund Programme performance for 2017-18 (financial year), including progress of integration, milestones, challenges, performance metrics and finances.
- Katie Summers, Director Operations Wokingham, NHS Berkshire West CCG, informed Board Members that Wokingham had done well with regards to keeping over 75's fit and healthy in their own homes.
- Although Non Elective admissions had performed less well Board members were assured that there were no particular issues in this area.

RESOLVED: That the performance of the Better Care Fund in 2017/18 be noted.

14. HEALTH AND WELLBEING BOARD ANNUAL REPORT 2017-18

The Board considered the Health and Wellbeing Board Annual Report 2017-18.

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

- Martin Sloan, Assistant Director Adult Services, went through the report which covered work undertaken by the Board in the 2017-18 municipal year.
- Board members asked that greater reference be made to wellbeing aspects. Clare Rebbeck asked that in particular reference be made to the Wokingham Health and Wellbeing Board community engagement and hashtag. (#WokinghamHWBB)
- A finalised report would be presented to Council.

RESOLVED: That the Health and Wellbeing Board Annual Report 2017-18 be noted.

15. UPDATE FROM BOARD MEMBERS

The Board was updated on the work of the following Board members:

Healthwatch Wokingham Borough:

- Nicola Strudley informed the Board that the Healthwatch service contract was out for tender and the results were due shortly. The new service would begin in October.
- Healthwatch Wokingham Borough had produced its annual report which would be published shortly.
- Board members were informed of a particular case study. It was clarified that Healthwatch should in future inform Martin Sloan of concerns that they received.

Place and Community Partnership:

- Clare Rebbeck encouraged Board members to participate in the Health and Wellbeing Board social media engagement.

Voluntary Sector:

- Clare Rebbeck referred to an engagement session between the Clinical Commissioning Group and the Voluntary Sector and the need for further work.

Community Safety Partnership:

- Board members were informed that the Group were currently working to reduce anti-social behaviour and a reported increase in substance misuse in Wokingham particularly in the Woosehill area through the implementation of Operation Orca.
- Following reports of young people using bags of dog mess from bins to throw at resident's properties, a problem solving task group were looking at whether tamper proof dog fouling bins could be installed in high risk areas to stop access to the contents of the bins.
- In response to a Member question, Graham Ebers explained what was meant by 'County Lines Dealing.'
- Katie Summers referred to the fear of crime and the recent incident of a bomb scare at The Oracle in Reading. Board members were assured that lessons would be learnt and shared across Thames Valley.

RESOLVED: That the update from Board members be noted.

16. FORWARD PROGRAMME

The Board discussed the forward programme.

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

- The Chairman would write to Rosie Rowe on behalf of the Health and Wellbeing Board, thanking her for her presentation regarding the Bicester Healthy New Town Programme.
- It was noted that it was Darrell Gale's last Health and Wellbeing Board meeting. The Board thanked him for his hard work and wished him well for the future.

RESOLVED: That the forward programme be noted.