

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD
HELD ON WEDNESDAY 2 APRIL FROM 5.10PM TO 6.50PM**

Present:-

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| David Lee | Leader of the Council |
| Julian McGhee Sumner | Executive Member for Health and Wellbeing |
| Prue Bray | Opposition Member (until item 79) |
| Dr Lise Llewellyn | Director of Public Health |
| Stuart Rowbotham | Director Health and Wellbeing |
| Dr Stephen Madgwick | Wokingham Clinical Commissioning Group (from item 77) |
| Katie Summers | Wokingham Clinical Commissioning Group |
| Jim Stockley | Healthwatch Wokingham Borough (substituting for Nick Campbell-White) |
| Matthew Tait | NHS England |
| Andy Couldrick | Community Safety Partnership (substituting for Chief Inspector Rob France) |
| Carolyn Collyer | Place and Community Partnership (substituting for Clare Rebbeck) |

Also present:-

Darrell Gale, Consultant in Public Health

Jeanette Longhurst, Berkshire West Integration Programme Director

Madeleine Shopland, Principal Democratic Services Officer

Nicola Strudley, Healthwatch Wokingham Borough

Dr Justin Wilson, Medical Director, Berkshire Healthcare NHS Foundation Trust

PART I

71. MINUTES

The Minutes of the meeting of the Board held on 13 February 2014 were confirmed as a correct record and signed by the Chairman.

72. APOLOGIES

Apologies for absence were submitted from Nick Campbell White, Chief Inspector Rob France, Beverley Graves, Councillor Charlotte Haitham Taylor, Judith Ramsden and Clare Rebbeck.

73. DECLARATIONS OF INTEREST

There were no declarations of interest made.

74. PUBLIC QUESTION TIME

There were no public questions received.

75. MEMBER QUESTION TIME

There were no Member questions received.

76. BETTER CARE FUND PLAN

Stuart Rowbotham presented the Better Care Plan which was due to be submitted to the Local Government Association (LGA) and NHS England by 4 April 2014.

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

- Stuart Rowbotham, Director of Health and Wellbeing, commented that some amendments were still being made to elements of the Plan and suggested that authority be delegated to the Chairman and Vice Chairman to sign off any additional amendments to the proposed Better Care Plan prior to its submission.
- Stuart Rowbotham took the Board through the updated outcomes and metrics section. Councillor Lee requested that a clearer definition of each performance indicator be provided at a future meeting. He explained what was meant by 'Metric Value', 'Numerator' and 'Denominator.'
- With regards to the metric 'Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population' it was noted that performance was in the upper quartile. '
- Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services' was also a standard performance indicator.
- Performance against 'Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month) was again in the upper quartile. The ambitious target reflected investment in services.
- The 'Number of patients going through reablement' had been selected as a local measure. Councillor Bray asked how the local measure had been decided on and whether others had been considered. Stuart Rowbotham commented that guidance had suggested a number of measures and that this was one which data was already collected for.
- In response to a question regarding the success of the Hospital at Home scheme, Katie Summers stated that should there be a problem at the diagnosis stage in hospital, Royal Berkshire Hospital NHS Foundation Trust would be the point of contact and if an issue arose whilst care was being provided at home, Berkshire Healthcare NHS Foundation Trust, would be the point of contact.
- Dr Llewellyn commented that a user friendly definition of what all the services were would be helpful. It was suggested that Jeannette Longhurst, Berkshire West Integration Programme Director be involved in this process and that a lay person be asked for their views on its user friendliness.
- Matthew Tait asked what the sections regarding risk sharing and contingency meant in reality. Stuart Rowbotham indicated that further work to the contingency section was required. Much of the risk fell on the Clinical Commissioning Group (CCG) currently. Engagement with the acute sector was important as the service model was predicated on a reduction in the focus on the acute sector. Matthew Tait commented that it could be made clearer that effectively the CCG would be agreeing to take on much of the risk should the Better Care Fund Plan not deliver. Katie Summers indicated that this would be made clearer in the risk table and that there were elements of shared risk. For example the Hospital at Home project required the support of social care in order to be a success.
- Dr Llewellyn suggested that as part of the monitoring of the Hospital at Home and Enhanced Care and Nursing Home Support projects, emergency rates be considered.
- Matthew Tait asked where discussions regarding the total agreed value of pooled budget: 2014/15 were and was informed that the Wokingham Integration Strategic Partnership were discussing details.

RESOLVED That:

- 1) the Board notes and supports the outline of the Wokingham Better Care Fund Plan together with the progress made in relation to developing further detail to the earlier draft presented in February.

- 2) the proposal for submission as the final plan for consideration by the Local Government Association (LGA) and NHS England on 4 April 2014 be agreed.
- 3) authority be delegated to the Chairman and Vice Chairman of the Board to sign off any additional amendments to the proposed Better Care Plan prior to its submission.

77. WOKINGHAM NEEDS ASSESSMENT

Darrell Gale, Consultant in Public Health presented the Wokingham Needs Assessment. The Board was informed that it had been delayed from December due to capacity issues.

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

- The Health and Social Act 2012 requires all Health & Wellbeing Board's working through local authorities and CCG's to produce a Joint Strategic Needs Assessment of the health and wellbeing of their local community (Wokingham Needs Assessment).
- The format for the document was now web based. The document could now be updated as and when new data or intelligence was published. The Board viewed sections of the proposed Wokingham Needs Assessment. The Assessment included Ward Profiles highlighting the issues in each ward, as well as topic-based chapters giving headline information and detailed data arranged in sections reflecting the life course.
- Jim Stockley asked how many people would look at the document. Dr Llewellyn commented that the Wokingham Needs Assessment was a technical document with mandatory requirements. The CCG would be required to use it when developing their 2 and 5 year plans and the NHS England Area Team would consider whether the CCG's operational plans reflected the Needs Assessment. Dr Madgwick stated that the CCG found the Needs Assessment useful when it tailored services.
- Darrell Gale commented that the Needs Assessment was not necessarily a directory of services but could be used to progress enquiries.
- Matthew Tait asked whether there were any obvious data gaps and was informed that different data came out at different times of the year. Dr Llewellyn indicated that the Shared Public Health Team had a programme in place which detailed when updates would become available across the year.
- Stuart Rowbotham stressed that it was important that there was a single version of the truth between agencies and that the same data was used by all the different organisations.

RESOLVED That Health and Wellbeing Board notes and supports the content of the Needs Assessment and recommends that it be uploaded onto the website of Wokingham Borough Council.

78. HEALTH AND WELLBEING STRATEGY 2014-15

The Board considered a report regarding the Health and Wellbeing Strategy 2014/15 which suggested some improvements and amendments to the current Health and Wellbeing Strategy.

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

- A refresh of the Strategy was required. The Board were reminded that the Strategy should be informed by the Wokingham Needs Assessment.
- Darrell Gale commented that the current Strategy contained 42 objectives and that this was perhaps too many. Those that had already been achieved would be removed.

- There were five overriding aims within the current Strategy. The Board discussed whether including an aim for each of the sub groups of the Board under each overriding aim, would be more effective.
- Some objectives in the current Strategy had not yet been achieved and further clarification about who was responsible for the delivery of each objective was required.
- Matthew Tait asked about monitoring and accountability which he felt could be made clearer.
- Stuart Rowbotham stated that whilst the Strategy for 2013/14 had perhaps been overly ambitious a lot had been achieved. It was suggested that a summary of the statements and measurable within the current strategy be provided to ascertain what had already been achieved when developing the refreshed strategy.
- Dr Llewellyn stated that the Board would be held accountable through the Public Health Outcomes Framework and that the Board should consider where there were any gaps in information, where progress could be made, where the Board could add value and areas that the Strategy should focus on.
- Councillor Lee commented that he believed that the Board should act as a sounding board and a facilitator.
- Dr Madgwick suggested that the refreshed strategy focus on two or three particular areas where the Board could add value, such as the widening gap in health and wellbeing across the Borough.
- It was agreed that a draft strategy would be considered in more detail at the Board's next meeting.

RESOLVED That the Health and Wellbeing Strategy 2014/15 update be noted.

79. NHS WOKINGHAM CCG OPERATIONAL PLAN

Katie Summers presented the NHS Wokingham CCG 2 Year Operational Plan 2014 – 2016

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

- The draft 2 year plan would be submitted at the same time as the Better Care Fund Plan.
- At its last meeting the Board had received the CCG's NHS Wokingham CCG Draft 2 Year Operational Plan on a page, which represented a synopsis of the 2 year plan.
- The Plan set out the CCG's current position, needs, where improvements were required, potential barriers to success, how money was allocated, outcomes and performance rates. Section 3 also included details of improvement interventions such as the Hospital at Home project.
- There were a number of national policies and documents that set out goals and responsibilities for clinical commissioning groups within the NHS. The NHS Outcomes Framework was grouped around five themes or domains, these set out the national outcomes the NHS should be aiming to improve. Board members were reminded of the seven ambitions to improve health outcomes which had been set by NHS England and the six characteristics that NHS England had identified that any high quality, sustainable health and care system would have.
- Katie Summers commented that the CCG had endeavoured to include sufficient detail to reassure NHS England that the CCG were addressing financial challenges and working to improve health and wellbeing within the Borough.
- Councillor Lee questioned whether all GP practices had signed up to 'Nursing & Care Homes – GP support to registered nursing and care home residents via MDT.' He was informed that an opportunity had been offered for GPs to provide enhanced

services and that all GP surgeries had been asked whether they wanted to sign up to provide a different level of service. All Wokingham GP surgeries had signed up.

- Dr Llewellyn questioned whether the 'A 3.2% reduction in the potential years of life lost from conditions which can be treated' target was a 2 or 5 year target as it was perhaps an overly ambitious 2 year target as Wokingham currently had the lowest early death rate from the major four killers, like heart disease and stroke, liver and lung disease and cancer. Dr Madgwick emphasised that it was a 5 year target but that 1.6% may be more achievable.
- Andy Couldrick commented that services for children were underrepresented in the Plan and highlighted ongoing concerns around CAMHS. Dr Madgwick indicated that a Berkshire West Children's Services Strategy Group was looking at commissioning children's services and that CAMHS was a high priority. A strategy was being developed. Providers and commissioners across Berkshire would be meeting to discuss CAMHS. It was also noted that service users across Thames Valley were being asked to complete a survey on the service and that focus groups with service users and parents were being held. Dr Llewellyn indicated that she would circulate copies of the survey to the Board. Matthew Tait commented that NHS England would be producing a specialised commissioning strategy in June. It was suggested that CAMHS might be one of the priorities which the Board would wish to take forward.

RESOLVED That the NHS Wokingham CCG Operational Plan be noted.

80. FEEDBACK FROM THE CALL TO ACTION EVENT

Katie Summers presented the visual feedback from the Call to Action event held on 18 March. 52 members of the public had attended the event which had been very successful. Feedback had contributed to the overarching vision. Stuart Rowbotham had presented on the Better Care Fund Plan and a helpful conversation regarding the development of neighbourhood clusters had been had. There had been a positive appetite for more engagement events and attendees had liked being able to vote on particular questions.

RESOLVED That the feedback from the Call to Action event be noted.

81. DRAFT BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST QUALITY ACCOUNT 2014 QUARTER 3 REPORT

Dr Wilson presented the draft Berkshire Healthcare NHS Foundation Trust Quality Account 2014 Quarter 3 report.

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

- The 2014 Quality Account was due to be published in June 2014. The report provided an update on progress with regard to Quality Account priorities and mandated information at the end of Quarter 3. The Board was invited to comment on the Quarter 3 report. A response from the Board, if provided, would be published in the final Quality Accounts. Comments were requested by early May.
- Councillor McGhee Sumner commented that it was important that the Board provided a coordinated response but some Board members such as Healthwatch and the CCG may also be responding in own capacity. Dr Madgwick emphasised that it was positive for the Board to be able to view the draft Quality Account at this early stage.
- A lot of the content was mandated. Each year there were three-five priorities relating to quality which were reported on under the headings of Patient Safety, Clinical Effectiveness and Patient Experience.
- Stuart Rowbotham commented it was helpful to see the key issues.

- Dr Llewellyn felt that it was a robust and comprehensive document. She was pleased to see improvements in staff morale levels and Friends and Family scores. However, more information on the CAMHS could be included. She went on to comment that often those with mental health issues also had physical health issues so she was disappointed that the number of physical health checks carried out, had reduced. She wanted to see joint work between the Trust and Public Health to address this.

RESOLVED That:

- 1) the draft Berkshire Healthcare NHS Foundation Trust Quality Account 2014 Quarter 3 report be noted
- 2) any comments on the report be sent to the Consultant in Public Health for the formulation and submission of a formal response from the Health and Wellbeing Board, within the deadline.

82. FORWARD PROGRAMME 2013/14

The Board discussed the Forward Programme 2013/14. It was agreed that the Health and Wellbeing Strategy be added as an item to the June meeting and that the Director of Public Health Annual Report be taken to the August meeting.

RESOLVED That the Forward Programme 2013/14 be noted.

These are the Minutes of a Meeting of the Health and Wellbeing Board

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