

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD
HELD ON 14 DECEMBER 2017 FROM 5.00 PM TO 7.05 PM**

Present

Julian McGhee-Sumner	WBC
Mark Ashwell	WBC
Beverley Graves	Business Skills and Enterprise Partnership
Charlotte Haitham Taylor	WBC
Paul Senior	WBC
Ian Pittock	WBC
Clare Rebbeck	Voluntary Sector representative
Katie Summers	Director of Operations, Wokingham CCG
Jim Stockley (substituting Nick Campbell- White)	Healthwatch Wokingham Borough
Jo Jefferies (substituting Judith Wright)	Public Health

Also Present:

Madeleine Shopland	Democratic and Electoral Services Specialist
Graham Ebers	Director Corporate Services
Nicola Strudley	Healthwatch Wokingham Borough

46. APOLOGIES

Apologies for absence were submitted from Nick Campbell-White, Darrell Gale, Judith Wright and Dr Zylstra.

47. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Board held on 12 October 2017 were confirmed as a correct record and signed by the Chairman.

Katie Summers informed the Board that a case of influenza had been identified in a West Berkshire care home. There was a likelihood of further cases. A prevention Plan was being put in place.

48. DECLARATION OF INTEREST

There were no declarations of interest received.

49. PUBLIC QUESTION TIME

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

49.1 Anna Cousins asked the Chairman of the Health and Wellbeing Board the following question:

Question

I am a Personal Trainer with GP Referral - I am qualified to accept GP referrals for common conditions such as diabetes, anxiety, mental health issues, hypertension and obesity, and also able to provide a more comprehensive, specialist service to non-referred

clients who also suffer from these conditions. With this qualification, I can provide consultations to GP referred patients and work with them to overcome common health problems. By providing the correct nutritional advice and specific exercise programmes, my expertise will help referred and existing clients to manage their medical conditions and live longer, healthier lives. I am struggling to get meetings set up with local medical practices and would like to know what the committee is doing to support this type of work?

Answer:

Wokingham Borough Council Sport & Leisure provide a GP Referral pathway with local GPs and have been doing so for around five years now. The scheme has grown, and they now have a new computerised system Referral which captures all the data from members of the public and GPs. We have also increased our sessions by offering additional activities rather than the gym based, therefore patients can now play badminton, swimming, Pilates, and many more activities.

The Referral system also links into our other schemes such as Long Term Conditions, Steady Steps, Mental Health and Cardiovascular.

At present Wokingham Borough Council are linked into the work with the Health and Social Care, (CHASC) where members of staff both medical and social workers and members from Public Health attend weekly meetings at Wokingham Hospital to discuss individual cases where a multi discipline team are all sat around the table. The patients are then discussed with the GPs and we can then link in any cases through the GP referral system. This has worked very well and again increased the number of referrals. Therefore the GP Referral is a much wider service now.

Supplementary Question:

Ms Cousins asked a question around local support for the development of specific set programmes.

Supplementary Answer which was provided by Katie Summers and Jo Jefferies:

The responsibility for commissioning the GP referral scheme is actually the responsibility of the Public Health team which are held here with the local authorities. I would actually recommend that you contact the Public Health teams. There is not necessarily a point generally going to the GP systems themselves because what they will do is go directly to the Public Health teams themselves to get access to whatever services that they have commissioned as part of GP referrals. You have probably gone through the wrong route as such so it is worth actually contacting the Public Health team here. There is a really good package which is already in place for GP referrals and it is actually tied in to what was read out by Julian. That is actually working very, very closely with all the GPs and they are targeting individual residents and looking at which residents would be really ideally suited to getting our self-care message and activity. I would really recommend that you speak to the Public Health team here rather than coming through the GPs as it will not be the right group and I do not want you to waste your time. I can put you in contact with Darrell Gale.

I absolutely support the point that it is a Public Health commissioned service. That multi-disciplinary group that meets to review the needs of the resident for GP referral would be the group to consider adding additional services and service providers into the mix that they have. So there is already a well put together process if you like, in terms of the various providers, of which yours could be one of, but it is that process that you would need to feed into. There would be a process around that to make sure that there was a

need to find an extra service and that for any provider commissioned to meet that need, there was no bias in the way that it is commissioned by the Public Health team.

50. MEMBER QUESTION TIME

There were no Member questions.

51. HEALTH & WELLBEING BOARD REFRESH

Graham Ebers, Director Corporate Services presented a report proposing a refresh of the Health and Wellbeing Board.

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

- The Health and Wellbeing Board were asked to support a refresh and for their thoughts about what might help reinvigorate the collective efforts of partners in the delivery of the Health and Wellbeing Board's agreed four key priorities.
- The Board considered ideas for improvements including more focused and time limited agenda items and agenda items being clearly linked to at least one of the four key priorities with clearly stated outcomes.
- Board members felt that the Board's remit and Terms of Reference should be reviewed to ensure that they reflected the current priorities.
- Public engagement could be improved through greater publicity of meetings. It was suggested that lessons be learnt from good practice by other Health and Wellbeing Boards.
- In order to create more vibrant meetings it was proposed that outside organisations be invited to provide presentations on how they were helping to contribute to the delivery of the Health and Wellbeing Strategy priorities. A protocol for attendees would be developed. Katie Summers suggested that a representative from the Bicester Healthy Town, a community led initiative, be invited to present at a future meeting.
- The Board agreed that resourcing capacity to support the facilitation, co-ordination and policy issues in respect of the Board should be reviewed.
- Paul Senior indicated that the Board should consider what was working well, future requirements of the Borough and decisions currently being taken. There was a need to develop community capital. He also emphasised that collective responsibility and ownership was important.
- Councillor Haitham Taylor commented that improvements still needed to be made to the performance dashboard. Greater focus on outcomes was required.
- Nicola Strudley stated that she sat on another Health and Wellbeing Board and that it focused on the difference that they as a Board could make. They had agreed to focus on four particular campaigns for three months. For example some schools in their area undertook the daily mile and the Board was encouraging other schools to also sign up in an effort to reduce obesity.
- It was considered that an enhanced collective contribution towards the four key priorities could be achieved by:
 - a stronger alignment of respective business cycles;
 - renewed discussions with the Board's sub groups around actions to achieve the key priorities;
 - review representation at Health & Wellbeing Board.
- Other suggestions for improvement included tailored training by the Local Government Association and site visits to other Board meetings to view good practice.

- The Board discussed the forward programme. Katie Summers commented that a lot of matters that the Board had considered previously primarily had a health focus or focused on the integration of services. Going forwards the Board's work programme needed to be reprioritised. She went on to comment that although there were national issues which the Board needed to be aware of, it was up to the Board members to drive the local agenda. Clare Rebbeck stated that there should be an increased focus on wellbeing on agendas.
- Graham Ebers, Director Corporate Services proposed that he, Katie Summers, Darrell Gale and Paul Senior review the forward programme.

RESOLVED: That the refresh proposed be supported,

52. COMMUNITY HEALTH & SOCIAL CARE (CHASC) WORKSHOP

The Board was updated on the outcome of the Community Health and Adult Social Care (CHASC) workshop which had been held in October.

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

- Katie Summers indicated that the CHASC fed into Priority 4 of the Health and Wellbeing Strategy: Delivering person-centred integrated services.
- The event had been designed to bring together operational and management staff from all partner organisations. Berkshire Healthcare NHS Foundation Trust, the Council, Optalis, Wokingham CCG, General Practice, Involve and Healthwatch had all been represented. Over 170 staff members had attended.
- Good feedback had been received and there had been some changes in practices as a result.
- The delegates were divided into three groups forming the localities that they would work in once the CHASC went live, following presentations. Delegates had discussed what was going well with their services.
- Katie Summers highlighted some of the positive feedback received. Multi-disciplinary team were working very well. She also highlighted some of the barriers which had been identified such as a lack of shared resources including paper records, costs, difficulties with confidentiality and patient consent.
- Next steps would be to hold individual locality workshops to continue with the work and to work with the partnerships' communications team to develop a communication strategy which would include the local population.
- There was a desire to involve Town and Parish Councils. Councillor McGhee-Sumner asked how Members would be communicated with. Clare Rebbeck indicated that there was a Town and Parish Council representative on the Place and Community Partnership. Councillor Pittock suggested that the Borough Parish Liaison Forum could also help to communicate the message to the Town and Parish Councils.
- The CHASC was a Health and Wellbeing Board project. Board members were asked how it could be further promoted.
- Paul Senior emphasised that it was vital to build on the momentum created and that the headlines from the workshop needed to be converted into an action plan.

RESOLVED: That the Board be informed about the CHASC workshop and next steps.

53. BOB STP PREVENTION UPDATE

Katie Summers provided an update on the Prevention Workstream of the Buckinghamshire, Oxfordshire and Berkshire West Sustainability and Transformation Plan (BOB STP).

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

- There were 6 themes which provided the focus of the Prevention workstream; obesity, physical activity, tobacco, Making Every Contact Count, Digital self-care and a Healthy Workforce. The overall objectives for these areas of work were to embed prevention within the local transformation programmes and to collaborate across the BOB on areas where working at scale would be beneficial.
- Katie Summers provided an update on the progress made to date in the six areas of work of the BOB STP Prevention Workstream.
- The milestone status of the obesity theme was green. Board members were advised that a lot of work had been undertaken to look at a complete obesity service. Katie Summers explained the different tiers of the obesity services provided. Locally, Tier 4 (bariatrics) was provided at the Royal Berkshire Hospital. The development of a business case for Tier 3 weight management services across BOB was being carried out. Clare Rebbeck asked about the number of people receiving treatment under each tier. Katie Summers stated that approximately 120 patients were being treated under Tier 4 and approximately 200 under Tier 3.
- The milestone status for Physical Inactivity was amber. The Board was informed that the promotion of IT such as apps to encourage physical activity was being looked at.
- The milestone status for Tobacco was amber. Board members were advised that those who smoked and went into hospital had a greater chance of a longer hospital stay. Katie Summers indicated that although Wokingham had one of the lowest smoking levels in the country, more could be done locally with regards to smoking amongst working class and ethnic minority residents. Nicola Strudley commented that resources should be targeted where a big difference would be made. Katie Summers advised that the Thames Valley Clinical Senate were reviewing the smoking cessation services in the acute trusts within BOB and Frimley and that whilst a lot had been done there were still improvements to be made.
- The Making Every Count milestone status was green.
- The Board was also updated on the Digital Self-care and Workforce health workstreams.

RESOLVED: That the progress made against the delivery of the six STP themes within the BOB STP Prevention Workstream be noted.

54. PUBLIC HEALTH OUTCOMES FRAMEWORK

The Board received a report regarding the Public Health Outcomes Framework.

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

- Significant exceptions highlighted included:
 - The crude rate of households that were classified as statutory homeless in temporary accommodation was increasing;
 - The proportion of fuel poverty was increasing;
 - The proportion of population aged 65+ who were vaccinated for PPV was decreasing.
- Councillor Haitham Taylor asked how many females and how many males had successfully completed drug treatment. Jo Jefferies indicated that she did not have this information to hand but that this information was collected.

- Katie Summers commented that it was important that the Board were aware of 'hot spots' at a very local level so the appropriate action could be targeted. Paul Senior emphasised that information regarding demographics and ethnic groups would also help target the support provided and the action taken.
- Katie Summers informed the Board that an application had been made for Wokingham to be a population health management dashboard owner. She had attended a stakeholder event around this and suggested that one of the attendees be invited to present to a future Health and Wellbeing Board meeting.

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

55. UPDATES FROM BOARD MEMBERS

The Board received an update on the work of the following Board members:

Community Safety Partnership:

- Graham Ebers took the Board through the Community Safety Partnership update included in the agenda.
- The Board was advised of joint partnership work around loneliness.
- Clare Rebbeck commented that the Link visiting scheme had experienced difficulties around safeguarding for volunteers befriending those with mental health issues or early onset dementia.

Healthwatch Wokingham Borough:

- Healthwatch had produced a report on how dementia friendly Suffolk Lodge was. They had been invited back the next year to provide another check up. This had also been promoted to other providers.
- Healthwatch Wokingham Borough had sponsored the 'Wellness in Wokingham' event. Anne-Marie Gawen from Brighter Berkshire commented that Brighter Berkshire was an initiative to reduce the stigma of mental health. The 'Wellness in Wokingham' event had looked at mental health in a joined up way. Anne-Marie stated that locally there was a lack of recovery services and mental health first aid. She felt that there should be a recovery college in the Borough.
- Nicola Strudley indicated that there had been an increase in comments regarding accessing GP appointments at Wokingham Medical Centre. These had been escalated to the Care Quality Commission.
- The report of the Enter and View at Prospect Park Hospital would be published in the near future.

Business, Skills and Enterprise Partnership:

- Beverley Graves advised that it was her last Health and Wellbeing Board meeting.
- The Business, Skills and Enterprise Partnership would be refreshed in the new year. The Health and Wellbeing Strategy priorities would help the partnership structure. Beverley Graves commented that the Partnership could help the Board deliver on the wellbeing agenda.
- Councillor McGhee-Sumner, on behalf of the Board, thanked Beverley for her work and contribution.

Voluntary Sector:

- Clare Rebbeck commented that the funding of the voluntary sector in Wokingham was generally quite stable and that there was a good number of volunteers. However, as Wokingham was perceived as an affluent area it could be more difficult to attract funding.
- Clare Rebbeck had looked at the four key priorities and asked representative from the voluntary sector how they had delivered against them. She referred the Board to a number of examples including from Brighter Berkshire, Home from Hospital from Age UK and Reading Football Community Trust.
- Board members were asked to inform Clare if there were any topics that they wished Involve to raise via community awareness events or calls to action.

Place and Community Partnership:

- Clare Rebbeck reminded the Board of a proposal from the Place and Community Partnership previously put forward in March 2017.
- It was proposed that from April 2018 partnership members pilot the participation in 'one day a month' of interactive activity online to promote awareness on a given subject and to promote opportunities and support available to enhance knowledge and wellbeing for residents. The Health and Wellbeing Board would guide the Partnership on topics of interest and information about the Board's role that they would like to be raised. Board members would join in with the online activity where possible.

RESOLVED: That the updates from Board members be noted.

56. FORWARD PROGRAMME

It was noted that Graham Ebers, Paul Senior, Darrell Gale and Kate Summers would discuss themes for the Health and Wellbeing Board forward programme.

RESOLVED: That the forward programme be noted.