

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD
HELD ON 5 APRIL 2018 FROM 5.00 PM TO 7.10 PM**

Present

Nick Campbell-White	Healthwatch
Richard Dolinski	Executive member for Adults' Services (Chairman)
Darrell Gale	Acting Strategic Director of Public Health for Berkshire
Charlotte Haitham Taylor	Leader of the Council
Ian Pittock	Opposition Member
Clare Rebbeck	Voluntary Sector representative
Paul Senior	Interim Director People Services
Dr Cathy Winfield	NHS Wokingham CCG

Also Present:

Madeleine Shopland	Democratic and Electoral Services Specialist
Jim Stockley	Healthwatch Wokingham Borough
Dr Debbie Milligan	NHS Wokingham CCG
Julie Hotchkiss	Interim Consultant in Public Health
Barrie Patman	
Graham Ebers	Director of Corporate Services

74. APOLOGIES

An apology for absence was submitted from Councillor Mark Ashwell.

75. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Board held on 8 February 2018 were confirmed as a correct record and signed by the Chairman.

76. DECLARATION OF INTEREST

There were no declarations of interest.

77. PUBLIC QUESTION TIME

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

77.1 Tracey Stone had asked the Chairman of the Health and Wellbeing Board the following question. Due to her inability to attend a written answer was provided by the Interim Director of People Services:

Question

I am hearing conflicting information on the waiting list for CAHMs support in Wokingham. My daughter is eleven and suffers from anxiety and OCD and I was told by my GP that the waiting list for CAHMs could be up to eighteen months so I was offered support from ARC

counselling for six sessions instead which we took but now their funding also seems to have been cut as that is no longer available to me either. Upon attending the workshop on children and young people's mental health on 14 March in Woodley I heard from the CAHMs team presenting there on two occasions during their talks both on stage and in the workshops that the waiting list is around one year. I was then informed that at the last meeting of the Health and Wellbeing Board it was stated the waiting list was now only six weeks. I am now having to pay Cardinal Clinic £350 for each psychiatrist appointment and then £100 for each psychologist appointment following that, can you clarify the time frames for the waiting list and also what is being to address the long waits in the Borough?

Answer:

I as the Director of People Services am not directly responsible for CAMHS, CAMHS being Children and Adolescent Mental Health Services, but naturally we do work closely as a local authority with our CCG partners in designing our workstreams around the needs of our children and young people. I have canvassed the views of our CAMHS colleagues to inform the response and I am happy to make sure that Tracey does get full sight of the response but I will read it as if she were here.

Naturally as a local partnership working with our most vulnerable children and people and families we are disappointed and sorry that she has found the process of finding the right support for her child so difficult and appreciate the level of frustration she must have felt with the system. Our colleagues, the CCG, continues to work with GP's to update them on the availability and waiting times of CAMHS services and will take her question as a reminder of the importance to continue to do this. However to provide Tracey with clear information now on the current arrangements for accessing CAMHS as well as local youth counselling services, I am just going to break it down:

In order for a child to access support for Anxiety and Depression from CAMHS, firstly there requires a referral to the Berkshire Healthcare Foundation Trust (BHFT) common point of entry (CPE). The average waiting time in CPE if not an urgent case, based on assessed criteria, is 5 weeks. Once the child has been referred onwards from CPE to the Anxiety and Depression pathway, it is currently, and as this was written, 13 weeks, until the children and family have their first session with the specialist from the anxiety and depression team, for routine cases.

There are currently 70 children waiting to start an intervention on the Anxiety and Depression pathway, with 48 of these (69%) waiting under 12 weeks. This information was accurate as of the end of December 2017 from the end of the Q3 performance report from the Trust.

At the February 2018 Health and Wellbeing Board meeting the CCG and local authority reported progress against the Future in Mind programme. In this report it included waiting time data but that was from Q2 which is at the end of October. At that the time, the average waiting time at this point for CPE was 3 weeks and for the Anxiety and Depression pathway was 10 weeks, and remember that was Q2. Obviously wait times change regularly and recently have increased from Q2 to Q3, but this is mainly due to the consistent increase of referrals into CPE, currently managing an 18% increase on this time in terms of demand on last year, as well as increasing numbers of complex referrals and therefore the need for multidisciplinary interventions and longer care packages.

Lastly, to conclude, both the local authority and the CCG have funded ARC youth counselling service and there has been no reduction in funding for the next financial year,

2018-19, for this service and so we would expect the service to continue to be available to local residents as it is now. The local authority and CCG have regular contract monitoring meetings with ARC so we will look into your experience and work to ensure that this is avoided in the future.

The Interim Director People Services indicated that he would be commissioning the development of a CAMHS Improvement Plan. Dr Winfield requested that this work be located within the Future in Mind Group.

Nick Campbell-White indicated that some people had informed Healthwatch that they had found it difficult to access the Common Point of Entry. He was asked to provide any specific information to the Interim Director of People Services.

With regards to ARC Clare Rebbeck asked whether 6 sessions was standard. Paul Senior commented that he hoped that it was based on the individual needs. Clare Rebbeck also indicated that a community CAMHS awareness event had been held two years previously and that information regarding the different providers was on the Wokingham Direct website.

77.2 Anne-Marie Gawen asked the Chairman of the Health and Wellbeing Board the following question which was answered by Interim Director of People Services:

Question

"The "Together - Wokingham Your Way" service - (which supported people in Wokingham Borough who were recovering from mental illness in the community, individually or in groups,) has had its service ended prematurely.

What interim service is there in place now to replace it, manage the impact of its closure and to avoid any risks to those in need of the withdrawn service, and how is the "saved" allocated budget being used to provide alternative services to those who need them now?

I understand that there is an aspiration for a mental health Recovery College in Wokingham Borough and that it is hoped to be opened in September 2018. This will provide recovery services, though not the one to one support provided by Wokingham Your Way. September is a long way off, and there are no guarantees that September will see the Recovery College opening. On opening it will inevitably need to build up slowly, so a full service will not all be immediately available then.

I am very concerned that those existing clients of Wokingham Your Way will be required to travel further (I understand Reading Your Way has an interim role until June) and new people may fall through the gap and not receive a service at all. I am aware that people are currently in distress and struggling following the closure of Wokingham Your Way and would like to be able to let them know what support is available to them.

Answer:

Because it is quite a complex, wide ranging question, I have broken it down to four categories.

Q1. "The "Together - Wokingham Your Way" service - (which supported people in Wokingham Borough who were recovering from mental illness in the community, individually or in groups,) has had its service ended prematurely.

1. WBC Response

The mental health recovery, day support and outreach service was commissioned in 2016 via a competitive tender process. The contract was awarded to Together for Mental Wellbeing (Together) and the service, named Wokingham Your Way, commenced on 1 November 2016 for a period of one year until 31st October 2017 with a possible extension of up to one year.

The service was established and it became apparent around June 2017 that the service had not been meeting the targets of 75% of service provision, as set out in the service specification.

Consequently, the People Commissioning team worked with Community Mental Health Team (CMHT) and Together and in October 2017 we had an agreed service improvement plan with the provider in place. Shortly after this, Together issued notice to terminate the contract having decided they could not continue, even with the full support of Wokingham Borough Council.

Whilst the contract for the 'Wokingham Your Way' service ended on 12 January 2018, we awarded a contract to Together via 'Reading Your Way' to continue to deliver a service from 15 January. Although this is a reduced service, customers are still able to access support via group sessions and 1:1 support. This arrangement is being reviewed regularly and will be amended as appropriate in response to local needs if needs escalate.

Q2. What interim service is there in place now to replace it, manage the impact of its closure and to avoid any risks to those in need of the withdrawn service, and how is the "saved" allocated budget being used to provide alternative services to those who need them now?

Q2 WBC Response

A series of exit meetings were set up between Together, People Commissioning and CMHT to agree the move on plan for each individual who was accessing the service and ensure a safe way to exit from the support of the Together service. During the course of these meetings, a short term proposal for CMHT to spot purchase support from the Reading Your Way office in order to allow the support groups to continue as well as some 1:1 support was put forward. CMHT reviewed this and accepted the proposal as a safe and viable option. Customers were consulted about the changes, the reasons for them and their view on the temporary service.

A short term contract has been awarded to Together via the Reading Your Way service with effect from 15 January for a 5 month period with a 3 month extension, dependant on success and need.

The contract permits CMHT to spot purchase up to 10 hours per week for a named support worker to deliver group sessions and 1:1 support as required. As a result of the consultation with customers we know that the groups were important to them, so the groups have continued.

I am running out of time so I have time for one more response and I have a hard copy here that I can give you.

Q3 I understand that there is an aspiration for a mental health Recovery College in Wokingham Borough and that it is hoped to be opened in September 2018. This will provide recovery services, though not the one to one support provided by Wokingham Your Way. September is a long way off, and there are no guarantees that September will see the Recovery College opening. On opening it will inevitably need to build up slowly, so a full service will not all be immediately available then.

Q3 WBC Response

One key area of consideration is the establishment of a community Recovery College to focus on emotional, educational and physical needs and teach skills to regulate good mental health and further research will be carried out in the spring. CMHT have explored extensively various models of Recovery Colleges. A Recovery College can be structured in a way that suits the needs of our residents, so if 1:1 is identified as a need this can be built in. The current arrangement with Together has the option to be extended if needed, with the possibility of this phasing out as the new Recovery College launches. People Commissioning and the CMHT are working closely in order to develop a proposal for the new service. Customers, carer and families' feedback and input will be key to developing and shaping these proposals and further consultation events will be held.

Supplementary Question:

My concern is around this gap that is currently occurring because people who were accessing Wokingham Your Way have come to let me know that they have not been provided with a service and their mental health needs are quite significant, they cannot leave their home for instance so they possibly were not part of the various meetings that were held. The person in particular that I am thinking of says that the only thing that he can see is to access the Optalis jobs support scheme, but he is not well enough for that yet and his service has been cut. I do not know what to say to him.

Supplementary Answer:

Naturally I cannot comment on an individual case of that nature which has been brought to my attention for the first time. The Officers have assured me that they have been working on the exit strategy with all of the previous users of the service, and if there is someone whose needs have not been met and may have fallen between the gaps then if you let me know the information then I will ensure that it is forwarded to the Team Managers to follow up on that. I am sure that we will have a bespoke response on that. The intention is to make sure that no user suffers detriment as a result.

78. MEMBER QUESTION TIME

There were no Member questions.

79. HEALTH AND WELLBEING BOARD REFRESH

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

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

- The Board was advised that interviews would be held shortly for a post that would support both the Health and Wellbeing Board and the Children's and Young People Strategic Partnership (approximately 0.5 FTE each). It was hoped that an appointment would be made in May.
- The Board discussed training. It was noted that a Board wide bespoke training session would be organised to take place before the end of June. In addition the Chairman and

Vice Chairman would undertake a Leadership course in July. A Self-Assessment workshop would be held in October (in the context of the 2020 integration strategy).

- A workshop around integration was being arranged for the last week of May. Members of the Reading and West Berkshire Health and Wellbeing Boards would be invited to this. Dr Winfield requested that the CCG be involved in the planning of the integration workshop to help tailor it accordingly. There were only eight Integrated Care Systems in the country, including Berkshire West and it was important that the Health and Wellbeing Board was sufficiently engaged in this work as the consequences were potentially significant for all partners.
- Paul Senior, Interim Director People Services indicated that full integration was scheduled to be achieved by 31 March 2020. Wokingham was one of five local areas that had been invited to discuss the forthcoming Green Paper on Integration. Wokingham had a number of integration success stories including the Wokingham Integration Strategic Partnership, the Wokingham Integrated Social Care and Health Team and Community Health and Social Care.
- The Integration Strategy would set out the key milestones in integration.
- The Board discussed engagement with the public and branding of the Health and Wellbeing Board. Graham Ebers took the Board through some of the events undertaken by the Community Safety Partnership. It was proposed that a 'Big Tent' event be run annually, incorporating a range of relevant service providers. In addition it was hoped that a combined Health and Wellbeing Board events calendar would help to ensure that opportunities were maximised and that duplication was avoided.
- Darrell Gale, Acting Strategic Director Public Health Berkshire, introduced a revised dashboard. With regards to residents' perception of the fear of crime, Darrell Gale commented that the Health and Wellbeing Board could produce a bespoke online survey on this matter. Dr Milligan questioned whether all vulnerable residents would have access to the internet and was informed that approximately 95% of Borough residents had internet access.
- Councillor Haitham Taylor stated that the dashboard was still very health orientated. She indicated that the fear of crime did not just affect vulnerable residents. With regards to reducing health inequalities she commented that greater reference could be made to prevention pre birth and the role of education. Graham Ebers commented that these suggestions could be incorporated if not captured elsewhere.
- Clare Rebbeck commented that physical and emotional wellbeing were different concepts for different people, and questioned how this could be compared and benchmarked.
- The Board agreed that a short dashboard supported by more detailed action plans for different issues was the preferred approach.
- The Board was updated on the review of the Joint Strategic Needs Assessment.
- It was proposed that the Board's key priorities were allocated to a Councillor and Officer Board member, in order to enhance governance.

RESOLVED: That the Health and Wellbeing Board note and support the actions to refresh the Health and Wellbeing Board Agenda.

80. ADULT SOCIAL CARE STRATEGY PROPOSED PRIORITIES

Paul Senior, Interim Director of People Services provided an update on the Adult Social Care Strategy Proposed Priorities.

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

- Paul Senior indicated that the paper was a holding paper. A Department of Health Green Paper on Integration by 2020 was due. It was important that the Adult Social Care Strategy aligned with the Green Paper.
- The Board was taken through priority themes and potential pressures such as the fact that the Borough had an ageing population and financial constraints.
- Clare Rebbeck commented that the number of informal carers was likely to increase.
- Paul Senior referred to the possible impact of the Council's 21st century council project.
- The Strategy would be underpinned by an action plan.
- A further update would be provided at the June Board meeting.
- The use of technology in integration was discussed.
- In response to a question from Dr Winfield, Paul Senior indicated that a Workforce Development Strategy would also be produced.

RESOLVED: That the Adult Social Care Strategy Proposed Priorities be noted.

81. BERKSHIRE WEST HEALTHY WEIGHT STRATEGY: DEVELOPING A LOCALISED ACTION PLAN

Darrell Gale, Acting Strategic Director Public Health Berkshire presented a report which provided an outline/framework of the localised action plan for Wokingham and next steps to develop a comprehensive action plan.

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

- A Berkshire West Healthy Weight steering group would be developed to ensure co-ordinated action across the locality.
- Board members were informed that the Sustainability Transformation Plan prevention workstream would be reflected in the localised action plan.
- Dr Milligan commented that the focus was primarily on activity and there needed to be increased reference to the importance of a healthy diet, starting at a young age with school children.
- Clare Rebbeck referred to a voluntary sector initiative which helped less active children to become active. Nick Campbell-White referred to a successful cooking scheme for single parents in Norreys.
- Councillor Pittock emphasised that the sugar tax on soft drinks had come into effect. However, there was still a lot of hidden sugar within foods.
- Councillor Haitham Taylor referred to Tier 3 services and commented that it was important that every contact was made to count in order to reduce obesity levels.
- Clare Rebbeck commented that a community awareness event focused on obesity could be held. She referred to the Harvest Festival event that the Place and Community Partnership would be holding.
- Darrell Gale reminded the Board of a successful pilot scheme run by Wokingham Medical Centre for some patients with diabetes.

RESOLVED: That the development of the localised Healthy Weight action plan for Wokingham be supported.

82. UPDATES FROM BOARD MEMBERS

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

Place and Community Partnership:

- The Place and Community Partnership communications project was starting in April 2018. Raising awareness of the Health and Wellbeing Board and its role and key priorities would be central to the wider engagement piece. A theme each month to highlight positive resources and support available across the Borough would be delivered. This would be carried out on the second Monday of the month. Themes had been selected up to March 2019. The Place and Community Partnership could reach approximately 30,000 people via social media.

Voluntary Sector:

- Clare Rebbeck informed the Board that Involve had been involved in the Mayor's Ball and had helped to raise £10,000 for the Mayor's Charity.
- The Voluntary Sector and Place and Community Partnership had begun to attend Community Safety Partnership meetings.
- Board members were informed that changes to funding methods would potentially have a negative impact on a number of local organisations.

Community Safety Partnership:

- Graham Ebers outlined the partnership's main priorities.
- With regards to substance abuse, Councillor Haitham Taylor questioned whether there had been instances of drugs such as ketamine in the area. Graham Ebers commented that the use of cannabis and alcohol as well as Xanax (benzodiazepine) and in some instances traces of Class A substances (heroin and cocaine) had been found.
- Clare Rebbeck indicated that Involve would be running a Community Safety Partnership awareness event for the community and the agenda could feature an item on the fear of crime.
- It was confirmed that health representatives attended the Community Safety Partnership.
- With regards to the Drugs and Alcohol and Substance Misuse services, Dr Winfield commented that each of the three local authorities within Berkshire West commissioned their own services, and questioned whether better value for money could be achieved through joint commissioning. Paul Senior stated that scalability was vital for a local authority of Wokingham's size.

Healthwatch Wokingham Borough:

- Nick Campbell-White advised the Board that an article regarding Healthwatch Wokingham Borough had been included in the Borough News.
- Healthwatch Wokingham Borough had produced a report regarding Extra Care, making recommendations. However, Nick Campbell-White commented that the new manager of Fosters Extra Care facilities had been unaware of the report. Paul Senior, Interim Director of People Services requested that he be sent the report so that he could ensure that it was followed up.
- The Board was advised that Healthwatch Wokingham Borough would be publishing a report regarding the implementation of the Accessible Information Standards within the Borough, with particular attention being paid to the communication needs of deaf people. Recommendations for improvements had been made. Councillor Dolinski asked whether further work would be carried out with those with mobility issues or who were partially sighted. Nick Campbell-White indicated that anecdotal evidence had been received from the deaf community in particular.

RESOLVED: That the updates from Board members be noted.