

**HEALTH AND WELLBEING BOARD**  
**CONFERENCE ROOM - YORK HOUSE AT 3.00 PM**

**02 July 2019**

PRESENT: Councillor David Coppinger (Chairman), Huw Thomas, Jane Hogg, Councillor Stuart Carroll and Councillor Donna Stimson

Officers: Hilary Hall, Kevin McDaniel and Nabihah Hassan-Farooq

**PART I**

182/15 **APOLOGIES FOR ABSENCE**

Apologies of absence were received from Duncan Sharkey ( Managing Director) and Tessa Lindfield ( Director of Public Health).

183/15 **DECLARATIONS OF INTEREST**

Councillor Carroll declared a personal interest as he works for a pharmaceutical company, Sanofi Pasteur. Cllr Carroll declared his employment in the interests of full transparency and to highlight that should for any reason during any point of the meeting, or indeed during future meetings, the HWB discussed anything directly related to Sanofi Pastuer's business he would abstain from the discussion and leave the room as required.

184/15 **MINUTES**

**RESOLVED UNANIMOUSLY;** That the minutes of the last meeting held on the 15<sup>th</sup> January 2019 were agreed as a true and accurate record.

185/15 **APPOINTMENT OF VICE-CHAIRMAN**

**RESOLVED UNANIMOUSLY:** That Huw Thomas be elected as the Vice-Chairman for the Health and Wellbeing Board for the Municipal year 2019/2020.

186/15 **UPDATE ON BETTER CARE FUND**

Hilary Hall, Head of Commissioning-Communities gave an update on the above titled item. It was highlighted that the Better Care Fund had a joint budget with the Clinical Commissioning Group which facilitated the integration of health and care services and that this had been highlighted as a bespoke project. Members were informed that there was a new Better Care Fund model which was trialled as part of the NHS Plan and that guidance had not yet been received in how to progress. The Board were told that metrics for the current quarter were as follows;

- Non elective admission to hospital was currently at 1.14% and was under target.
- 0-5 year olds were currently at 40% admissions to accident and emergency services and that there was a wider drive to improve performance and to reduce the total

number of admissions. It was highlighted that RBWM were below the national average.

- Delayed admissions into elected care- it was noted that there had been zero admissions for a long period and that patients were remaining in their homes. A new discharge passport had been launched and that this had been in operation for four months.
- Re-admissions to hospital was currently at 83.8% against the target of 78% and that this compared well with south east region figures. It was noted that there were more residents being discharged with higher complex needs. There has been a significant trend with nursing placement and resident care placement trends and it was expected that this figure would decrease, however it was highlighted that there had been an increase in the cost of domiciliary care costs.

Councillor Carroll queried whether there had been any guidance on the way in which the Better Care Fund model would look like moving forward and it was confirmed that the guidance had not been issued as of yet but that there had been notable improvements in partnership working as a result of the fund.

At the conclusion of the update, members noted the verbal report.

## 187/15 JOINT STRATEGIC NEEDS ASSESSMENT

Hilary Hall, Head of Commissioning gave a verbal report on the above titled item. Members were informed that there had been a refresh of the JSNA for the 2019.2020 period and that there was a joint duty between the local authority and the clinical commissioning group. It was outlined that there was a duty to provide assessments on behalf of the Health and Wellbeing Board to guide local needs. The Board were told that the refresh of the JSNA was an incredibly resource intensive document which did not currently align with the commissioning cycle. Members were informed that a review around Berkshire would be carried out. It was highlighted that this review would include rapid needs assessments and that it would identify areas of relevant improvement. It was outlined that the ambition was to create a library of online resources which would be tailored to align with the local authority commissioning cycles. It was noted that there had been enthusiasm for the cycle responsiveness.

At the conclusion of the report, discussed the following:

Jane Hogg stated that it felt as if there was more importance placed upon commissioning structure as opposed to system wide planning. It was confirmed that the suite of resources and insights would work well within the Integrated Care system and would be bespoke. This would support the delivery of the duty to assess needs locally. Kevin McDaniel, Director of Children's Services commented that he was pleased to see the recommendation (A.25 per the report), relating to working with residential colleges. Councillor Carroll queried the amount of 20-24 years leaving the borough and it was confirmed that this was a period where young persons were transition between higher education and that this proved to be an area of challenge.

### **ACTION- That Hilary Hall look at the delivery of the JSNA being pushed out through RBWM Communications team**

Councillor Carroll queried whether the homelessness strategy had been co-ordinated to dynamically feed into the JSNA. It was confirmed that within the JSNA there was specific importance placed on the assessment of needs and that this was linked to other emerging needs. It was outlined that there would be a refresh of the homelessness strategy and that there was a wider question of how to align all strategic documents and monitor strategies without duplication of work. Councillor Coppinger highlighted that members should be included and should examine the refreshed documents. Councillor Coppinger also queried ways in which local surgeries could be linked with local councillors.

**ACTION- Huw Thomas and Councillor Coppinger to meet to discuss ways in which councillor representation could be delivered with local surgeries.**

It was highlighted that there had been changes to the ward boundaries across the locality and that currently Bracknell has produced some mapping work of boundaries and that this would be shared with the wider health partners.

At the conclusion of the discussion, the chair thanked officers for their work and effort on the JSNA.

188/15 UPDATE ON FRIMLEY HEALTH AND CARE INTEGRATED SYSTEM

Jane Hogg, Transformation Director gave a presentation on the above titled item. It was outlined that there were currently three categories of transformation initiatives; improved support to stay well; joined up accessible local care and specialist care when needed. Under these three categories sat ways in which transformation would be achieved which included; prevention and self-care; integrated care decision making; GP transformation; supporting the workforce; care and support; reducing clinical variation and the implementation of the shared care record. Members were told that Frimley Health and Care were working towards building a five year strategy with partners and our population and that this would feed into the NHS long term plan. It was outlined that there would be importance placed on strengthening each place with the support of the local authority and health partners. It was highlighted that there would be a key role for primary networks as they developed. Insights would be provided across the population and would highlight variances within it. Members were told that that there would be a greater focus on wider determinants and not solely on health interventions. There was specific mention of the need to reduce variation through new approaches in the most challenged areas and vulnerable populations. It was noted that there would be a commitment to develop the strategy from a granular level with a particular focus on independence, asset mapping and managing health and wellbeing for individuals. At a system level there were opportunities to look at the population as a whole and that there was a foundation for collaborative leaderships to emerge and develop.

The Board were informed that Frimley ICS had natural communities which varied in size and that locally place was defined to include the following local authority boundaries- Slough, Bracknell Forest, Surrey, Windsor/Maidenhead and Hampshire. It was outlined that neighbour had been defined as primary care networks. Members were told that some elements of working partnerships did not fall into place as organically as provider sectors or clinical networks. It was accepted that there would be other geographies and docking, along with variations in scale for the task. It was highlighted that place was where the most locally focussed change would occur and that it was crucial to recognise the key partnerships with local authorities. It was outlined that these partnerships would form major roles in the delivery of outcomes and improvements for local populations. A genuine opportunity has arisen for residents from PCNs, providers, CCGs, VCOs and LAs to work together as one team with the wider local populations. Members were informed that there was a need to agree how places would drive change whilst continuing to drive benefits at scale. Councillor Coppinger queried how the Board and wider cohort of elected members could support the ICS, and it was noted that wider dissemination of information to networks was key. Kevin McDaniel, Director of Children's Services commented that he was pleased to see children's priorities outlined and included, and that there was further work to be carried out with breaking down barriers but that progress felt positive.

189/15 DEFINING THE ROYAL BOROUGH AS A PLACE WITHIN THE INTEGRATED CARE SYSTEM

Hilary Hall, Interim Director of Adult Services and Deputy Director Strategy and Commissioning presented the above titled report. It was outlined that the Royal Borough of Windsor and Maidenhead was located within the Frimley Integrated Health and Care System which was recognised as a national exemplar. The NHS Long Term Plan had been published in January 2019 and had identified Integrated Care Systems as being central to the delivery of integrated primary and specialist care, physical and mental health and health and social care. Members were told that the evolution of the ICS and the Royal Borough's role within it provided an opportunity to use the JSNA to refine the existing Joint Health and Wellbeing Strategy, in line with the emerging Five Year Plan Strategy for the ICS. Members were told that they would review the membership of the Health and Wellbeing Board in order to broaden it to respond to and plan for, "place" in its widest sense and the wider determinants of health. There would also be confirmation of supporting the governance structure beneath the Health and Wellbeing Board, including the sub boards- ageing well, living well and keeping well. It was outlined that a strategic focus was needed to align the boards and that there was a need to formalise meetings of senior leaders as a connected leaders group. The connected leaders group would look at streamlining resources and evolving primary care networks.

Councillor Coppinger commented that the progress within the ICS was good and that there was a need for the HWB and LA to also progress in the development of ideas.

**ACTION- That Hilary Hall draft the HWB strategy and that a place based report return to the Board for consideration at the next meeting.**

#### 190/15 "THE FIRST 1,000 DAYS" SCOPING

Kevin McDaniel, Director of Children's Services outlined the report on the above titled item. Members of the Board were informed that the select committee had concluded that the first 1000 days of life, from conception to age 2 was a critical phase for a child's development and set backs at this stage could increase the risks of poor outcomes in the future. The select committee calls for a long term and co-ordinated response nationally and locally which would seek to reduce adverse childhood experiences, improve school readiness and seek to reduce infant mortality and child poverty. It was highlighted that the select committee report set out six principles as follows; "proportionate universalism"; prevention and early intervention; community partnerships; a focus on meeting the needs of marginalised groups; greater integration and better multiagency workings and evidence based provision. Members were told that there would be a review of pre-school children across the borough and that these would align with the six principles. It was highlighted that community partnerships would play a key role in the delivery of prevention and intervention. Actions arising from the report included working with marginalised groups and that it was not enough to identify these groups, but that further work was needed around unwillingness to engage with services. Next steps included, aligning leadership culture and values to make a positive difference.

Jane Hogg commented that it was key to have the ICS as a partner in the delivery of outcomes.

**ACTION- That Kevin McDaniel circulates the papers via Democratic Services.**

#### 191/15 SEND PROGRESS UPDATE

Kevin McDaniels presented the above report. It was outlined that there had been a joint inspection led by Ofsted in 2017. Members were told that there had been 47 key identified

measurable which were looked at. There had been early successes in December 2017, and there had been a recruitment drive for a designated clinical officer and PaCip. Members were told that there had been a struggle pulling together with data in January 2018. It was highlighted that there had been 50 autism assessments carried out in February 2018. In April/May 2018 an inclusion summit was held which brought together all partners. In June/July 2018 the Annual General Meeting(AGM) for the Better Care Fund. Next steps included, introduction of the 14+ pathway, parent questionnaire for the ECHP process. Members were informed that significant progress had been made over the past two years and that Ofsted were to revisit and look at the 8 key areas. It was highlighted that there was still some work to be done and that there was confidence that the revisit would go well. Councillor Coppinger commented that there was a greater team collaboration now and it was confirmed that there were much better working relationships within specific teams. It was also stated that there was a greater focus moving forward to attract more parents whose children did not meet the ECHP threshold criteria.

192/15 POTENTIAL FUTURE AGENDA ITEMS

Board Members asked for the following items to be considered at future meetings:

- Joint Health and Wellbeing Strategy & feedback from workshop
- Homecare Networks
- Integrated Care System Strategy
- Mental Health Strategy

193/15 QUESTIONS FROM THE PUBLIC

No questions were received from members of the public.

194/15 FUTURE MEETING DATES

Future meeting dates were confirmed as follows:

- 15<sup>th</sup> October 2019 - 3pm, Council Chamber, Town Hall, Maidenhead
- 14<sup>th</sup> January 2020 - 3pm, Council Chamber, Town Hall, Maidenhead

The meeting, which began at 3pm, ended at 4.29pm

CHAIRMAN.....

DATE.....