

NOTICE  
OF  
MEETING

**HEALTH AND WELLBEING BOARD**

will meet on

**TUESDAY, 20TH APRIL, 2021**

at

**3.00 pm**

by

**VIRTUAL MEETING - ONLINE ACCESS ON [RBWM YOUTUBE](#)**

TO: MEMBERS OF THE HEALTH AND WELLBEING BOARD

COUNCILLOR STUART CARROLL (CHAIRMAN)  
HUW THOMAS (NHS) (VICE-CHAIRMAN)  
COUNCILLOR DAVID COPPINGER  
COUNCILLOR DONNA STIMSON  
TESSA LINDFIELD (STANDING DIRECTOR OF PUBLIC HEALTH)  
HILARY HALL (DIRECTOR OF ADULTS, HEALTH AND COMMISSIONING  
RBWM)  
KEVIN MCDANIEL (DIRECTOR OF CHILDREN'S SERVICES RBWM)  
MARK SANDERS (HEALTHWATCH WAM GET INVOLVED)  
TRACY HENDREN (HEAD OF HOUSING & ENVIRONMENTAL HEALTH)  
CAROLINE FARRAR (EXECUTIVE MANAGING DIRECTOR FOR RBWM, CCG)  
JANE HOGG (FRIMLEY INTEGRATED CARE SYSTEM)

Karen Shepherd  
Head of Governance  
Issued: 12<sup>th</sup> April 2021

Members of the Press and Public are welcome to attend Part I of this meeting.  
The agenda is available on the Council's web site at [www.rbwm.gov.uk](http://www.rbwm.gov.uk) or contact the Panel Administrator **Mark Beeley** 01628 796345 / [mark.beeley@rbwm.gov.uk](mailto:mark.beeley@rbwm.gov.uk)

**Recording of Meetings** – In line with the council's commitment to transparency the Part I (public) section of the virtual meeting will be streamed live and recorded via Zoom. By participating in the meeting by audio and/or video, you are giving consent to being recorded and acknowledge that the recording will be in the public domain.

If you have any questions regarding the council's policy, please speak to Democratic Services or Legal representative at the meeting.

## AGENDA - PART I

<u>ITEM</u>	<u>SUBJECT</u>	<u>PERSON</u>	<u>TIMING</u>	<u>PAGE NO</u>
1.	<u>APOLOGIES FOR ABSENCE</u> To receive any apologies for absence.	Chairman		-
2.	<u>DECLARATIONS OF INTEREST</u> To receive any declarations of interest.	Chairman		5 - 6
3.	<u>MINUTES</u> To confirm the minutes of the meeting held 19 <sup>th</sup> January 2021.	Chairman		7 - 12
4.	<u>HOUSING UPDATE</u> To receive an update on housing in RBWM.	Tracy Hendren		Verbal Report
5.	<u>HEALTH AND WELLBEING BOARD STRATEGIC FRAMEWORK</u> To hear about the strategic framework.	Hilary Hall/Caroline Farrar		To Follow
6.	<u>MAD MILLENNIALS</u> To receive a verbal report on the above titled item.	Charlotte/Lauren		Verbal Report
7.	<u>OUTBREAK ENGAGEMENT BOARD UPDATE</u> To receive an update on the work of the Outbreak Engagement Board.	Hilary Hall		Verbal Report
8.	<u>LIBRARY TRANSFORMATION STRATEGY</u> To receive a presentation on the <a href="#">Library Transformation Strategy</a> .	Angela Huisman		Verbal Report
9.	<u>BETTER CARE FUND UPDATE</u> To hear an update on the Better Care Fund.	Lynne Lidster		Verbal Report
10.	<u>FUTURE MEETING DATES</u> <ul style="list-style-type: none"> <li>• July 2021</li> <li>• October 2021</li> </ul>	Chairman		-

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## MEMBERS' GUIDE TO DECLARING INTERESTS IN MEETINGS

### Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a DPI or Prejudicial Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

A member with a DPI or Prejudicial Interest **may make representations at the start of the item but must not take part in the discussion or vote at a meeting.** The speaking time allocated for Members to make representations is at the discretion of the Chairman of the meeting. In order to avoid any accusations of taking part in the discussion or vote, after speaking, Members should move away from the panel table to a public area or, if they wish, leave the room. If the interest declared has not been entered on to a Members' Register of Interests, they must notify the Monitoring Officer in writing within the next 28 days following the meeting.

### Disclosable Pecuniary Interests (DPIs) (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit made in respect of any expenses occurred in carrying out member duties or election expenses.
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the relevant authority.
- Any licence to occupy land in the area of the relevant authority for a month or longer.
- Any tenancy where the landlord is the relevant authority, and the tenant is a body in which the relevant person has a beneficial interest.
- Any beneficial interest in securities of a body where:
  - a) that body has a piece of business or land in the area of the relevant authority, and
  - b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body **or** (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

A Member with a DPI should state in the meeting: ***'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

*Or, if making representations on the item: 'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

### Prejudicial Interests

Any interest which a reasonable, fair minded and informed member of the public would reasonably believe is so significant that it harms or impairs the Member's ability to judge the public interest in the item, i.e. a Member's decision making is influenced by their interest so that they are not able to impartially consider relevant issues.

A Member with a Prejudicial interest should state in the meeting: ***'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

*Or, if making representations in the item: 'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'*

### Personal interests

Any other connection or association which a member of the public may reasonably think may influence a Member when making a decision on council matters.

Members with a Personal Interest should state at the meeting: ***'I wish to declare a Personal Interest in item x because xxx'. As this is a Personal Interest only, I will take part in the discussion and vote on the matter.***

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# Agenda Item 3

Health and Wellbeing Board - 19.01.21

## **HEALTH AND WELLBEING BOARD** **VIRTUAL MEETING - ONLINE ACCESS AT 3.00 PM**

**19 January 2021**

PRESENT: Councillor Stuart Carroll (Chairman), Huw Thomas (Vice-Chairman), Councillor David Coppinger, Councillor Donna Stimson, Tessa Lindfield, Hilary Hall, Kevin McDaniel and Tracy Hendren

Also in attendance: Councillor Maureen Hunt, Councillor Gerry Clark, Councillor Shamsul Shelim, Councillor Samantha Rayner, Councillor Simon Bond, Councillor David Cannon, Fidelma Tinneney and Bill Feeney

Officers: Duncan Sharkey, Tessa Lindfield, Jane Hogg, Lynne Lidster, Mark Beeley and Shilpa Manek

### **PART I**

#### 236/15 **APOLOGIES FOR ABSENCE**

An apology for absence was received from Caroline Farrar.

#### 237/15 **DECLARATIONS OF INTEREST**

The Chairman declared a personal interest as he worked for a pharmaceutical company, Sanofi Pasteur. Councillor Carroll declared his employment in the interests of full transparency and to highlight that should for any reason during 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. The Chairman also declared another personal interest as he was currently working as a policy advisor on the governments vaccine task force.

#### 238/15 **MINUTES**

**RESOLVED UNANIMOUSLY; That the minutes of the meeting held on 8<sup>th</sup> December 2020 were agreed as a true and accurate record.**

#### 239/15 **UPDATE ON HOMELESSNESS AND ROUGH SLEEPERS**

Tracy Hendren, Head of Housing and Environmental Health, provided an update on the homelessness and rough sleeper action plan. She said that the strategy was updated last year along with the action plan but would need to be reviewed on a regular basis. The Homeless Forum had recently had its first meeting with over 30 partner agencies being involved. The Forum was used to decide which agency would be leading on the actions in each of the priority areas. The meeting was a success and there was a positive approach to how services would be delivered. The next meeting of the Forum was due to be held in February and Tracy Hendren would be able to bring an update back to the next meeting of the Health and Wellbeing Board.

The Rough Sleeper Pathway had been launched in December 2019, and was a three stage

pathway to help people off the streets. The first stage was an initial assessment of what the needs of the individual were, the second stage was about providing intense support and accommodation, while the third stage was focussed on independent accommodation with support provided for the first six months. Tracy Hendren gave the Board some positive figures from the pathway:

- 38% of those on the pathway had got ID.
- 44% had been supported with welfare support or universal credit.
- 40% had been supported to register with primary care services.
- 45% had been supported with budget advice.

All of those on the pathway were given an initial assessment on their health and wellbeing needs.

As a result of the pathway, an alternative giving scheme had been set up in RBWM, which was designed to be a mechanism that residents could use to donate directly to organisations which help rough sleepers. Each time the scheme had been ready to launch, a new lockdown had been introduced which had proved to be challenging. There were currently window displays for the scheme at Maidenhead and Windsor libraries where residents were able to tap and donate. Four shops across the borough, in Maidenhead, Windsor, Eton and Ascot were also part of the scheme. Donations would be able to help rough sleepers with literacy, finance and budgeting advice. The income level of the scheme would be reported on a quarterly basis to the Board along with feedback from the rough sleeper pathway.

Councillors Cannon, Bond and Rayner joined the meeting.

The Chairman said that it was pleasing to see the strategy and asked how the scheme would provide evidence that it was working and had helped rough sleepers.

Tracy Hendren explained that a number of other local authorities were also part of the scheme and it was important that RBWM was providing the right level of support for rough sleepers. Shop owners were often unaware of how they could help rough sleepers, this new scheme ensured that donations would be used for the right purpose.

Councillor Stimson said that getting people back to work if they had lost their jobs was very important and that support was needed in this area. She mentioned the Kickstart scheme which had been working with the Maidenhead Chamber of Commerce to provide job opportunities for those that needed them.

Tracy Hendren said that this was something they would like to work with and that the pathway had provided support to some rough sleepers who had gone back into education or had been given job opportunities.

The Chairman passed on his thanks to Tracy and her team for all their work. He suggested that it would be good to bring this item back to the Board regularly.

## 240/15 CITIZENS ADVICE BUREAU

Bill Feeney, CEO of Citizens Advice Maidenhead and Windsor, gave the Board an update on the activities of the bureau over the course of the pandemic so far. The switch to remote working had proved to be a balance of efficiency and adaptability. A number of volunteers had been lost, with a number also living alone and it was important to ensure their health and wellbeing. There had been a general increase in demand for the service, with debt, housing, employment and benefits being the key areas which people had requested support on. Mental health and domestic violence were other important issues that had really come to the fore and Bill Feeney said that the CAB had seen a trend of these different issues being interconnected more than before. It was anticipated that there would be further problems once the furlough scheme came to an end, with many people likely to be out of a job and in financial difficulty. The Citizens Advice Bureau had not lost a day of service throughout the



pandemic and had arguably been more efficient moving away from face to face and utilising digital solutions.

The Chairman said that mental health was at the centre of everyone's concerns and he hoped that the government would be more ambitious with their mental health strategy.

Councillor Stimson said it was important to talk about mental health, she shared her own experience of using the service. From a climate change/sustainability viewpoint, it would rely on the community being involved and Councillor Stimson was keen to help the CAB in any way she could.

Tessa Lindfield, Director of Public Health, thanked Bill Feeny for the presentation. She said that the CAB helped residents with really important issues and it was good to continue the support of the service. The surge in demand meant that the CAB needed to think about moving forward and ensuring that it was still able to cope.

Bill Feeny mentioned the proposed merger with CAB Bracknell for financial reasons, even though the decision was taken before the pandemic. There was always a focus on the people being served, things could easily change in the future and therefore it was vital that CAB was able to bridge that gap.

Hilary Hall, Director of Adults, Health and Commissioning, asked if the CAB would be able to recruit the same number of volunteers going forward.

Bill Feeny said that each year there was a big recruitment drive, the volunteers that had been lost in this year's cohort had been on the training pathway. There would be lots of potential volunteers during lockdown and Bill Feeny suggested that he could provide another update at a future meeting.

The Chairman said that it would be great to have another update soon.

At the conclusion of the item, Bill Feeny left the meeting.

## 241/15 COVID-19 UPDATE

Tessa Lindfield gave a presentation to the Board on the current Covid situation in RBWM. She talked through the recent local data, which had shown a drop off in the number of positive cases over recent weeks. At the time of the meeting on 19<sup>th</sup> January 2021, the rate was 457.8 per 100,000 people and there was particularly high levels of positive cases for those in the 60+ age category. However, young adults were most likely to test positive for the virus. There was currently double the number of in patients across the South East than there was during the first wave. The Berkshire Public Health website was updated daily and provided the latest data for the pandemic across Berkshire. In summary, Tessa Lindfield said that the second peak had been higher than the first, there were some signs that showed that the rate of infection was slowing, but household to household transmission was still the main route of infection.

The Chairman said that it was concerning to see the number of cases and deaths. He stressed the importance of complying with the guidance and making sure that it was being communicated to the public effectively. Masks needed to be worn where appropriate and it was important to note that a face shield did not meet the requirements of the guidance. The mask needed to cover the nose and mouth which a face shield on its own did not do. Play areas could currently remain open, with the benefit and cost calculation of closing them being taken into account. However, the Chairman said that he was not entirely comfortable with this guidance and had asked for it to be reviewed.

The Board took a question from the member of the public. The question was: "As there is still

a high prevalence of COVID19 in the Borough, will more testing be done to try and detect people that are asymptomatic? If this is going to happen, who will be approached for testing and will RBWM be producing literature for residents that explains the process and why it is necessary?"

In response, Tessa Lindfield said that 1 in 3 people were asymptomatic and it was therefore important to find these people and make sure that they were self-isolating if needed. The focus for community lateral flow testing was on those that needed to work and could not work from home. RBWM would be receiving assistance from military planners and proposals would be sent to the Department of Health with a view of setting this up as soon as possible. The process would be supported by literature and communication giving residents information about the testing.

Huw Thomas said that rapid testing had been started for primary care staff and had been working well.

Kevin McDaniel, Director of Children's Services, said that all schools in the borough had now set up rapid lateral testing. Primary schools would have test kits sent home over the next week.

Councillor Hunt asked how long the virus stayed on playground equipment. The Chairman said that it was not clear at this stage how long it could survive as it could stay on surfaces for a long period of time. However, playgrounds were outdoors and therefore transmission was less likely. SAGE had been investigating the issue and the Chairman believed that a more cautious approach needed to be adopted.

Tessa Lindfield said that contacts were asked by NHS Test and Trace where they had recently been which would cover things like playgrounds.

Duncan Sharkey, Managing Director, said that it was about balancing risks. There was a need to focus on the areas that would help to protect residents from the pandemic.

## 242/15 UPDATE FROM CARE HOMES AROUND COVID-19 AND WINTER PRESSURES

Fidelma Tinneney, from the Berkshire Care Association, gave an update on care homes during the pandemic. She explained that the care association was the representative voice of the care sector locally and nationally. The association offered support, information, learning and skills to providers and staff. It was made up of a board of volunteer care providers and managers and was funded by constituents and occasional projects.

Reviewing the previous year in care, Fidelma Tinneney said that the pandemic had hit care hard with well recognised care services struggling and often working in isolation. Ever changing guidance and requirements from the government and various other organisations had proved to be challenging. Video calls for the association were continuing weekly and were well attended. A follow up newsletter was sent out after meetings and recordings of meetings were shared with staff. An on call support line for providers was available along with links to training and specialist advice and information. There had been many 'soft' outcomes, including building links, support and reality, sector improvements and sharing best practice. The local picture was diverse with requirements and demands on providers being heavy. Hard outcomes included deaths being lower than other regions, hospital admissions from care homes significantly reduced and recruitment being hard hit for all care services.

The Berkshire Care Association would continue to provide support as long as it was needed. There was a plan to recruit a development officer if funding allowed while a united inclusion would break down barriers and create more cohesive working.

Lynne Lidster joined the meeting.

Councillor Stimson left the meeting.

Hilary Hall said that recruitment was an issue going forward and work would be done in partnership with the Berkshire Care Association as a priority.

Duncan Sharkey asked if there was anything RBWM could do to help care homes to make sure that they felt like they 'were in the room' when decisions concerning them were being discussed.

Fidelma Tinneney said that communication had improved a lot and RBWM had been great. However, sometimes it was inconsistent.

#### 243/15 VACCINE UPDATE

Huw Thomas gave an update on the vaccination programme in RBWM. The focus was on care homes and the 80+ age group, with the ambition being to offer vaccinations to the most vulnerable 15 million people by mid-February. There was a vaccine centre in Maidenhead, Windsor and Bracknell – which covered residents living in Ascot. Those who were eligible would be invited by the NHS to book an appointment for their vaccine but it was important to wait for an invite. Huw Thomas asked resident not to call their local surgeries asking about the vaccine so that they could take calls on other important medical issues.

Fidelma Tinneney left the meeting.

The Chairman underlined that it was important for residents not to contact the NHS about the vaccine. It was important to give the service time and space to deliver the roll out.

Tessa Lindfield said it was an amazing achievement to roll out the vaccine programme so quickly. She asked if there was anything that could be done to help increase the uptake amongst care home staff.

Huw Thomas said that there was lot of fake news around which was creating unfounded fear, it was important to get a true and positive message out about the vaccine to encourage uptake.

The Chairman said that he had admiration of the work of all NHS staff and that it was a great achievement on the amount progress that had been made so far.

Councillor Coppinger left the meeting.

#### 244/15 DEVELOPMENT OF THE HEALTH AND WELLBEING STRATEGY

Hilary Hall explained that the strategy was in the process of being created and once it was completed it would be circulated to members of the Board. The strategy would be more streamlined than the previous strategy, based around four priorities:

- Coordinated integrated services for vulnerable residents
- Championing mental wellbeing and reducing social isolation
- Early intervention to promote wellbeing
- Investing in place to reduce health inequalities

The Chairman said that mental health was a very important consideration and it was right that it was one of the four priorities of the strategy.

Tessa Lindfield said that the strategy was really important and that it fitted in well with the Frimley care strategy. It could sometimes be confusing if there were too many strategies so Tessa Lindfield recommended that there was cohesion between the two strategies.

Kevin McDaniel said that he was keen that families knew the strategy and what support was available to them to help support their children.

245/15 BETTER CARE FUND UPDATE

Lynne Lidster, Head of Commissioning – People, gave an update on the Better Care Fund. The plans for 2021 were published in December 2020 by the Department of Health which meant there was no requirement for the Board to come up with a formal plan. Instead, the guidance suggested that the Board would submit a reconciliation at the end of March. There had also been no requirement for routine monitoring back to the Department of Health but performance indicators had been monitored locally and reported back to the Health and Wellbeing Board each quarter.

For planning in 2021/22, the improved better care fund and disabled facilities grants would continue at their current levels. There were currently three metrics which could be considered, the 'delayed transfer of care' metric had been suspended nationally. Un elective admissions were well below so was on target, effectiveness of reablement was very close to target and admission to residential and care homes was on target too.

The Better Care Fund for 2021 was £13.7 million, with £114,000 remaining unallocated. Reserves from previous years had been allocated and the Fund would be brought back to the Health and Wellbeing Board to be signed off in due course.

246/15 FUTURE MEETING DATES

The Chairman said that the next scheduled meeting of the Health and Wellbeing Board would take place in April 2021, with the date being confirmed in due course. If it was needed, an additional meeting of the Board could be arranged.

The meeting, which began at 3.00 pm, ended at 5.00 pm

CHAIRMAN.....

DATE.....