

HEALTH AND WELLBEING BOARD
GREY ROOM - YORK HOUSE AT 3.00 PM

18 October 2022

PRESENT: Councillor Sayonara Luxton, Huw Thomas (Vice-Chair, in the Chair), Councillor David Coppinger, Councillor Donna Stimson, Anna Richards, Tess Scott, Steve Dunn and Kevin McDaniel

Also in attendance: Councillor Simon Bond, Councillor Gurch Singh, Councillor Gurpreet Bhagra, Ruchi Baxi and Sarah Collin

Officers: Mark Beeley, Marc Connor, Tracy Hendren, Charlotte Fox, David Scott, Rebecca Hatch and Prince Obike

PART I

313/15 **APOLOGIES FOR ABSENCE**

An apology for absence was received from Councillor Carroll, Councillor Luxton was attending the meeting as substitute. An apology for absence had also been received from Caroline Farrar.

314/15 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

315/15 **MINUTES AND ACTIONS**

RESOLVED UNANIMOUSLY: That the minutes of the meeting held on 12th July 2022 were approved as a true and accurate record.

The Vice Chairman confirmed that there were no actions that needed to be reviewed or brought forward from the November 2021 meeting, when the priority focus on reducing inequalities was last considered by the Board.

Kevin McDaniel, Executive of Place, said that there was a meeting with OPAF to take place shortly, following the action from the previous meeting of the Board in July 2022.

316/15 **REVIEW OF TERMS OF REFERENCE**

Mark Beeley, Democratic Services Officer, explained that the Health & Wellbeing Board needed to review the Terms of Reference annually. It had been some time since this had been last reviewed and it had been added to the agenda for consideration by the Board. If the Board decided to make any major changes, these would be noted and passed on to the Constitution Working Group. If appropriate, a report would go to Full Council who were the only body which had the power to amend the constitution. Alternatively, if the changes were minor editorial amendments, these could be agreed by the Director of Law and Governance under delegated authority.

Councillor Luxton noted that there were three Conservative Members appointed to the Board, but they were all Maidenhead based. She asked if there could be a geographically spread of representatives from across the borough. Councillor Luxton also suggested that the People Overview & Scrutiny Panel Chairman should be a Member of the Board.

Kevin McDaniel, Executive Director of People, said that the Housing team had supported the Board and provided many useful updates at meetings. He felt that it would be appropriate for the Head of Housing to have a place on the Board.

Steve Dunn, RBWM Place Convenor NHS Frimley, said that NHS Frimley had been established recently and therefore references to the Clinical Commissioning Group needed to be updated.

RESOLVED UNANIMOUSLY: That the Health & Wellbeing Board approved the changes suggested to the Terms of Reference.

317/15 PRIORITY FOCUS - REDUCING INEQUALITY

Joint Strategic Needs Assessment

Marc Connor, Intelligence and Strategy Officer (Covid-19), gave a presentation on the work of the Joint Strategic Needs Assessment (JSNA). The website had recently been launched and Marc Connor gave the Board a detailed overview of the website, how it worked and what information was available to residents on the JSNA. National inequality trends included:

- Emergency admissions to hospital for under 5s increased as affluency decreased.
- Children from minority ethnic backgrounds underachieved at school.
- Manual workers were twice as likely to smoke.
- People residing in less affluent areas died younger.
- Vaccine uptake was lower in the Polish community.

From Hub data, the white European population was not fairly represented in RBWM. Approximately 3,600 were not vaccinated and of this, two thirds were likely to be Polish. The JSNA contained the tools to identify which areas Polish speakers lived and how the Public Health team could start to consider targeted intervention. The website launch had been communicated to all stakeholders and a general introduction, training and demonstration webinar had been delivered. A public demonstration was also planned for later in the year.

Kevin McDaniel commented that the data which was provided on the website was historical, the pandemic had a big impact. He asked what could be done looking forward and understanding how trends had changed over the past few years.

Marc Connor said that the Public Health team was led by the national data, this research would then inform local thinking. The response from RBWM could be tailored using the JSNA data.

Kevin McDaniel suggested that the Public Health team could influence the future research programme on a national basis to allow RBWM to make strategic decisions going forward.

Councillor Coppinger said that when the first JSNA had been created, he was surprised about the areas of inequality in the borough. The JSNA allowed this information to be shown to the council and parish councils, Councillor Coppinger felt that it was important that Councillors worked closely with GPs.

The Vice Chairman said that the JSNA data had been particularly useful to allow the health service to understand the hidden areas of deprivation.

Councillor Stimson suggested that communication with targeted communities could be more cost effective as a result of the JSNA.

Steve Dunn asked if it was possible to influence the focus of the data in the JSNA. The 2021 census data would be available shortly and could provide some actionable insights, Steve Dunn asked if this was planned.

Marc Connor said that the national data was useful and could be used on different projects at a local level. There were a number of projects that were reliant on the census data, once it had been made available.

Anna Richards, Deputy Director of Public Health for East Berkshire, said the JSNA was a great resource and helped inform commissioning and understanding of the needs of the local population. The JSNA should be used by colleagues, if the Board had any suggestions on how the JSNA could be developed they would be considered.

Introduction to the inequalities programme and emerging themes

Anna Richards outlined the inequalities project to the Board. RBWM was one of the most affluent areas of the country, but there were pockets of deprivation. Over half of neighbourhoods were in the least deprived deciles, no neighbourhoods were in the most deprived deciles but there were some neighbourhoods in some lower deciles. The cost of living crisis meant that the number of families who would be living in deprivation would increase. The main aim of the project was to support all residents and communities to achieve their ambitions and fulfil their potential, with a focus on those who were at risk of poor outcomes. This would therefore reduce demand for high cost services. This aim would be supplemented by three objectives:

- To improve the council's collective understanding of inequalities and disadvantage in the borough.
- To reduce inequalities in the borough, through developing a shared approach, based on evidence.
- To reduce demand on high cost services, through improved prevention and early intervention.

Rebecca Hatch, Head of Strategy, explained that the scope of the project was to consider inequalities in the broadest term and outcomes could be seen across a number of areas. A two phase approach was planned; phase 1 was about understanding the issues and developing an evidence base, phase 2 was focused on developing a shared approach of reducing inequalities. Phase 1 was close to being complete, with most of the data having been collected in an evidence pack. Outputs from the first phase would include the refresh of the Corporate Plan, the development of equality objectives, an evidence base of equality impact assessments and the design of a shared approach to reducing inequalities. This shared approach could include new policies or approaches and the design of more effective strength-based support for communities and families experiencing inequalities. There was also some alignment with other work, for example the Frimley ICS Place and health inequalities work, the JSNA and the Health and Wellbeing Strategy. The methodology for the project would consist of three sources: data analysis, frontline engagement and insights, and community engagement.

Councillor Luxton said that she had been pushing for community engagement to come to the south of the borough but she was not aware of any engagement with the local community that she represented.

Rebecca Hatch said that the world cafes were moving between wards across the borough, she would check with Jesal Dhokia, who was leading the world cafes, and confirm with

Councillor Luxton after the meeting.

ACTION – Rebecca Hatch to confirm the engagement work which was planned for residents in Ascot, Sunningdale and Cheapside.

Kevin McDaniel was interested to see what barriers to health and access to services there were for some families in the borough, he asked if there was any early feedback on clustering.

Rebecca Hatch outlined one key cluster being around financial stress, impact on mental health, impact on relationships and impact on parenting. Another cluster was social isolation, particularly with the elderly age group. Social isolation was also coming through in younger ages groups too.

Kevin McDaniel highlighted that these people were needing support from the public and community sector, the work could be used to see how the council could work better with groups to avoid some of the stresses which many families currently faced.

Councillor Coppinger was pleased to see the progress of the project, he felt that it was long overdue. He appealed to officers to make sure that they involved local Councillors in the project.

Anna Richards confirmed that Councillors had been included in the conversations that had taken place with frontline staff.

Councillor Stimson said that she had attended the world café held in her ward, there had been a huge attendance from local residents. It was a health and wellbeing exercise, understanding how people were coping was key and the engagement was pleasing to see. Councillor Stimson felt that there had been good representation attending the world cafes.

Steve Dunn said that this was an exciting project and had the full support of NHS Frimley. It was well known that residents from the poorer wards of the borough were higher users of health and public services, this underlined the importance of the piece of work and the need for intervention.

Rebecca Hatch said that world cafes had been successful in attracting a wide range of people but there would always be a slight selection basis. There had been focus groups and targeted interviews to ensure that specific groups of people were reached.

Young Carer support in RBWM

Sarah Collin, Family Action Young Carers Project Manager, gave the Board a presentation on the work of Family Action. A young carer was someone under the age of 18 who helped to look after someone in their family who was ill, disabled or misused drugs or alcohol. Research showed that 1 in 5 young people had taken on some form of caring responsibility at home. The UK was rated as advanced internationally, when considering the rights of young carers. It was important to step away from the number of young carers and instead look to understand the prevalence of caring by young people in society and to make sure that they were identified. The pandemic had made unpaid care more visible than before. Emerging research was considering the health and wellbeing of young carers but there was limited research on the long term impact. There needed to be a shift from caring responsibilities to emotional burden of caring and the long term implications. In the UK, approximately 40% of young carers self-reported mental health issues of their own.

Family Action received referrals through a number of different routes and undertook a young carers assessment to understand the situation. It was important that the tasks a young carer was doing were both age and gender appropriate. The impact of caring was also considered

as part of the assessment. Sarah Collin outlined some data on the impact of caring from the past three years in RBWM. Family Action was committed to making sure that caring was a positive experience, they provided a 4-6 month intervention. Families were able to re-refer to the service at any point if there continued to be a support need for a caring role within the family. Considering next steps, it was important that as a society there was a collective responsibility to identify gaps in the service provision. It was also recommended that professionals were educated about the long term impact of care on young carers future mental health.

Sarah Collin concluded by appealing to Members of the Board to identify young carer champions within staff teams, while also identifying suitable referral pathways for young carers.

Berkshire Public Health Annual Report 2021/22

Anna Richards said that each year, the Director of Public Health put together an annual report which could cover a range of topics. This year, the Director of Public Health for East Berkshire had worked in collaboration with the Director of Public Health for West Berkshire to produce a joint annual report. The report had a focus on food: its production, distribution and consumption and what could be done at each stage to reduce its environmental impact.

318/15 UPDATE ON ROUTINE IMMUNISATION PERFORMANCE

Ruchi Baxi, Consultant in Public Health, provided an update on immunisation. There were over 30 programmes which were run by NHS England. Measles was highly infectious and it was therefore important to maintain sustained coverage of 95% to prevent outbreaks. Uptake in RBWM for Measles, Mumps and Rubella (MMR) vaccination had been steadily declining over the past three years. Uptake of the second MMR vaccine had improved from 2017/18 but recent data showed that this increase had plateaued, there had also been a decline in MMR uptake nationally. Work had been undertaken by the immunisation uptake team to collaborate with GP practices across RBWM with a focus on improving the uptake of the second MMR vaccine. A workplan was being developed with Frimley ICS around health inequalities, while there was a national campaign designed to raise awareness of the MMR vaccine, which had been launched in February 2022.

The Human Papilloma Virus (HPV) vaccine helped to protect individuals from being infected by the human papillomavirus. The vaccine had been offered to all pupils in school year 8 since September 2008, since September 2019 it had also been offered to all year 8 boys. Research showed that as a result of the vaccine, there had been an 87% relative reduction in cervical cancer. Comparisons could be made with other Berkshire local authorities.

Ruchi Baxi discussed the flu vaccine and outlined the eligible cohorts who could receive a vaccine. The NHS had worked closely with partners to produce a programme evaluation for 2021/22, to inform delivery and improve uptake. A number of recommendations had been made as part of the evaluation.

Councillor Coppinger asked if there was a link between areas of deprivation and those that had not taken up the offer of a vaccine.

Ruchi Baxi confirmed that there was a pattern at the Thames Valley level, it would be useful to match the data with RBWM on inequalities to triangulate the data.

Councillor Luxton asked if everyone paid for the flu vaccine, or did some cohorts receive the vaccine for free.

She was informed that there were a number of cohorts who were included on the NHS

programme and they were offered the vaccine free of charge. For children, those up to Year 9 were included in the programme. The programme prioritised those who were likely to spread flu in the community or those who could get seriously ill.

Anna Richards highlighted the point that had been made about vaccinations not being considered in isolation from broader health and wellbeing issues. A children and young people's partnership had recently been set up, Anna Richards suggested that this could be connected by the need for vaccinations.

The Vice Chairman encouraged those eligible who had not yet had their flu or Covid vaccine to come along to their local vaccination centre and get it done.

319/15 COVID-19 UPDATE

David Scott, Head of Communities, gave an update to the Board on the Covid-19 situation. Graphs shared showed the number of tests, with a slight increase in positive test rates when the rolling seven day rate was used to assess the latest position. There was a small downward trend on the number of patients which had been admitted to hospital but the health system was still under considerable pressure, in part due to the abstraction of staff with Covid. On vaccinations, there had been a high take up of doses for care home residents and this remained key to ensuring that cases did not rapidly increase.

Steve Dunn asked if there was anything that the Board could do to help the situation.

David Scott said that the underlying messages on vaccinations were the most important, Board Members could help to spread this message and reinforce to the community that vaccinations were essential in helping keep infection levels down.

Councillor Coppinger said that he was aware of someone who had a bad reaction to their third dose of the Moderna vaccine. He asked if this was the only vaccine being offered.

The Vice Chairman confirmed that boosters of Moderna and Pfizer were being offered nationally. However, there was no patient choice available, as vaccine sites could not choose what they were delivered.

320/15 HOUSING UPDATE

Tracy Hendren, Head of Housing, Environmental Health and Trading Standards, said that a briefing note would be shared with the Board along with the minutes of the meeting. High level data was available through the Citizens Portal, with demand for the housing service remaining consistently high across the year. The team was now almost permanently staffed, there were currently 183 live homelessness cases, with a further 99 in temporary accommodation and 153 cases which the team were working through. The cost of living crisis was having a big impact and the team were starting to see some 'homes for Ukraine' schemes breaking down. The Housing Inclusion Team Leader post had recently been filled, who was responsible for the rough sleeper pathway. There were currently 42 people on the pathway, which was ten less than the last update which the Board had considered in July 2022. Work had been done in collaboration with the RBWM Property Company on refurbishment plans for John West House, the draft plans would be shared with colleagues. There were currently 231 people in temporary accommodation, this was a fairly consistent figure. On Homes for Ukraine, there were currently 143 families in the borough but six of these families were now in temporary accommodation.

ACTION – Mark Beeley to circulate the Housing Update briefing note to Members of the Board with the published minutes.

The Vice Chairman asked Tracy Hendren to pass on his thanks to the team for their work and the great example of partnership working.

321/15 BETTER CARE FUND UPDATE

This item was not considered as officers were waiting for some national data to be received.

Anna Richards mentioned the stop smoking service which had been recently launched.

Charlotte Fox, Public Health Programme Officer, said that the Royal Borough's Stop Smoking Service, Smokefreelife Berkshire, offered a range of options including behavioural support, nicotine replacement therapy and useful self-help digital tools. The service was free for residents of the borough that were over 12 years old. More information was available on the website, www.smokefreelifeberkshire.com, where a self-referral form could also be completed.

322/15 FUTURE MEETING DATES

The next meeting of the Board would take place on Tuesday 24th January 2023 at 3pm.

The meeting, which began at 3.00 pm, ended at 5.10 pm

CHAIRMAN.....

DATE.....