

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

### Present:

Councillor Hoskin (Chair)	Lead Councillor for Health, Wellbeing & Sport, Reading Borough Council (RBC)
Seona Douglas	Director of Adult Care & Health Services, RBC
Councillor Jones	Lead Councillor for Adult Social Care, RBC
Councillor McEwan	RBC (substituting for Councillor Lovelock)
Sarah Morland	Partnership Manager, Reading Voluntary Action
Kajal Patel	South Reading Locality Clinical Lead, Berkshire West Clinical Commissioning Group (CCG) (substituting for Andy Ciecierski)
David Shepherd	Chair, Healthwatch Reading
Cathy Winfield	Chief Officer, Berkshire West CCG

### Also in attendance:

Michael Beakhouse	Integration Programme Manager, RBC & Berkshire West CCG
Gwen Bonner	Clinical Director, Berkshire Healthcare NHS Foundation Trust (BHFT)
Alice Carter	Reading Families Forum
Pauline Hamilton	Reading Families Forum
Verena Hutcheson	Homeless & Housing Pathways Manager, RBC
Jo Jefferies	Consultant in Public Health, Bracknell Forest Council
Kim McCall	Health Intelligence, Wellbeing Team, RBC
Clare Muir	Policy & Voluntary Sector Manager, RBC
Janette Searle	Preventative Services Manager, RBC
Nicky Simpson	Committee Services, RBC
Mandeep Sira	Chief Executive, Healthwatch Reading
Paul Wagstaff	Head of Education, RBC

### Apologies:

Andy Ciecierski	North & West Reading Locality Clinical Lead, Berkshire West CCG
Marion Gibbon	Consultant in Public Health, RBC
Stan Gilmour	LPA Commander for Reading, Thames Valley Police
Tessa Lindfield	Strategic Director of Public Health for Berkshire
Councillor Lovelock	Leader of the Council, RBC
Bev Searle	Director of Transformation, BHFT
Councillor Terry	Lead Councillor for Children, RBC

## 1. MINUTES

The Minutes of the meeting held on 16 March 2018 were confirmed as a correct record and signed by the Chair.

## 2. PROGRESS REPORT ON THE DELIVERY OF THE SPECIAL EDUCATIONAL NEEDS & DISABILITY (SEND) STRATEGY

Paul Wagstaff submitted a report providing a summary of progress made in delivering the SEND Strategy and the steps that had been taken to improve the transition between children's and adults' services.

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

The report stated that the Special Educational Needs & Disability (SEND) Strategy, which had been approved by ACE Committee in July 2017, had been discussed at the Health and Wellbeing Board on 19 January 2018 and the Board had agreed to support its delivery. The Board had requested an update on progress within six months, and that the update report include an update on progress on the issues around transition from children's to adults' services.

The report stated that the SEND Strategy provided a framework for SEND improvement, and the delivery of the provision and support required across key agencies to deliver the SEND Code of Practice (2015) in a coordinated way, ensuring that children and young people's needs were met at the right time, making best use of the resources available.

The SEND Strategy consisted of the following four strands, and the report gave details of progress to date in each strand of work:

- Analysis of data and information to inform future provision and joint commissioning;
- Early identification of needs and early intervention;
- Using specialist services and identified best practice to increase local capacity;
- Transition to adulthood.

The report stated that it was anticipated that Strand 1 would be closed in September 2018, as a comprehensive data report had been produced, which would be updated annually, once national and statistical neighbour comparisons were published, and would be used by the SEND Strategy Board and the Board Leads to inform actions for the next academic year.

The report explained that joint working with partner agencies, the voluntary sector and families was integral to the delivery of the Strand 4 action plan, and the views of young people and their families were being sought on a range of their experiences, including the transition process, information, the annual review process, and where the gaps and barriers existed to achieving independence. The report proposed that the learning from this work in Strand 4 should be brought back to a future meeting of the Board and the Board agreed that this should be in six months' time.

The report also gave details of progress made on the issues around transition from children's to adults' social services, as requested at the 19 January 2018 Board meeting.

Pauline Hamilton and Alice Carter, from Reading Families Forum, addressed the Board, noting that it had taken some time for the SEND Strategy work to get going and that it would be important for the funding obtained to be used wisely, in order to make the best use of resources available. It was suggested, for example, that it could be used to increase awareness of the help that was already available but where young people were not aware of it. Alice Carter said that there was still a lot of work to do to implement the strategy and in some areas urgent action was needed to improve children's outcomes, as she thought that some legal requirements might not be being met. Councillor Jones agreed that further progress was required and noted that, prior to the development of the strategy, the funding available had not always all been spent, but he encouraged people to give officers details of any areas of specific concern so that they could be investigated further.

**Resolved -**

- (1) That the progress made on delivery of the SEND Strategy 2017-2022 be noted;
- (2) That the progress made on improving the transition between children's and adult's social care be noted;
- (3) That a further report back on progress on delivery of the SEND Strategy be submitted to the Board in six months' time, and this report include the learning from the work in Strand 4 of the Strategy on transition to adulthood.

**3. BERKSHIRE WEST INTEGRATED CARE SYSTEM (ICS) OPERATING PLAN 2018/19**

Cathy Winfield submitted a copy of the Berkshire West Integrated Care System (ICS) Operating Plan for 2018/19. The ICS was a partnership between Berkshire West CCG (BWCCG), Berkshire Healthcare NHS Foundation Trust (BHFT) and Royal Berkshire NHS Foundation Trust (RBFT) and GP Alliances.

This was the first joint single operating plan for the new ICS, which was a collaboration between health organisations to improve services for the local Berkshire West population, delivering consistent high quality and safe care, ensuring the best possible outcome and experience for patients, whilst delivering financial stability across the health system. The ICS comprised RBFT, BHFT and BWCCG, as well as the Primary Care Provider Alliances covering four distinct localities - the Newbury, North & West Reading, South Reading and Wokingham GP Alliances. The ICS worked closely in partnership with local authorities in what had been the 'Berkshire West 10', and was now the 'Berkshire West 7' following merger of the CCGs, and the ICS was also a member of the Berkshire West, Oxfordshire and Buckinghamshire ('BOB') Sustainability and Transformation Partnership (STP).

The Operating Plan outlined the key goals, requirements and deliverables for the ICS in 2018/19 and detailed progress made in 2017/18. It gave details of the following five domains against which the ICS would deliver:

- Domain 1 - Deliver the 5 Year Forward View (along with national priorities of cancer, mental health, urgent care, primary care, maternity and learning disabilities)
- Domain 2 - Deliver local transformation priorities
- Domain 3 - Deliver financial sustainability
- Domain 4 - Embed a population health approach
- Domain 5 - ICS Governance and Leadership

It stated that the following six key clinical areas of transformation had been developed for implementation in 2018-20:

- Outpatient transformation
- Development of an integrated Respiratory Service
- High Intensity Users programme
- Design and development of an integrated MSK (Musculoskeletal) service.
- Maternity transformation
- Diabetes transformation

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

These, along with other programmes of work, would be supported by key enablers, including a review of back office function and estates, understanding and modelling the collective bed base, exploring opportunities for a streamlined approach to medicines management, digital transformation and workforce development.

**Resolved** - That the Berkshire West ICS Operating Plan 2018/19 be noted.

#### **4. BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST - MENTAL HEALTH STRATEGY 2016-21 - PROGRESS UPDATE**

Further to Minute 5 of the meeting held on 6 October 2017, Gwen Bonner submitted a report giving an update on progress on the Berkshire Healthcare NHS Foundation Trust's (BHFT's) Mental Health Strategy 2016-21.

The report gave an overview of changes since November 2017, including:

- Developments in national policy and the local operating context:
  - Mental Health Strategy
  - System working, including both Berkshire-wide initiatives and work in Berkshire East and Berkshire West
- What had been done in terms of:
  - Ensuring effective governance
  - Taking forward key initiatives and strategic intentions
  - Progress against national targets

It also set out the next steps planned in terms of activities to deliver the strategy.

**Resolved** - That the report be noted.

#### **5. OUR TOP THREE PRIORITIES - BY PEOPLE FROM GROUPS AND COMMUNITIES THAT ARE SELDOM HEARD, AND THE CHARITIES THAT SUPPORT THEM - HEALTHWATCH READING REPORT**

Mandeep Sira submitted a report giving a voice to 'seldom heard' people on their top three priorities, which had appended reports by charities who supported those people: Reading Mencap, Talkback, Reading Community Learning Centre, Reading Refugee Support Group and Launchpad, as well as a guide to involving local people in planning and designing NHS services.

The Healthwatch Reading Team had spoken to people in Reading whose experiences, feedback and suggestions might be overlooked or not sought by local services because of various barriers. These might include having a disability, not being able to speak English, or not understanding their right to have their say to help influence the quality of local health and social care services. The team had worked in partnership with charities who supported these people to arrange listening sessions where people could share their 'top three priorities'.

The report explained that Healthwatch had previously published five reports on the work with Reading Mencap, Talkback, Reading Community Learning Centre, Reading Refugee Support Group and Launchpad on their clients' priorities. The current summary report brought those priorities together to share with organisations

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

responsible for providing, funding or planning health or social care for those groups of people.

The report drew out the themes from the individual reports and concluded what mattered to people was:

- Rights - knowing your individual rights in health and social care, and having your rights respected
- Information - having enough information, at the right time, in a form that was right for the individual
- Enough good quality and culturally sensitive care to meet the needs of the individual

The themes that the report concluded that the conversations with the charities had added to what had been heard from the clients were:

- Inclusivity matters - people themselves had valuable information about their needs that could inform how services were designed and provided. Charities that worked directly with particular groups could provide valuable additional insights
- Mental health services needed to be sensitive to cultural issues and individual needs (in services day-to-day & when involving people in service improvement work)
- Unpaid carers had a vital role, and their needs must be addressed when planning services and thinking about when, where and how service users would have their needs assessed and met

The report stated that, having reflected on the project, Healthwatch had produced a short guide to involving local people in planning and designing NHS services, which was attached to the report.

The Board discussed the reports, noting that, whilst there was a lot of useful information within them, which helped in understanding people's individual needs and circumstances, they were also snapshots reflecting the current situations of those individuals involved. It was noted that the project could be developed into bigger pieces of work as needed and Sarah Morland said that RVA was planning to work with Healthwatch Reading to gather wider data across different groups on a number of issues.

### **Resolved -**

- (1) That the report be noted;
- (2) That health and social care officers review the information within the report and bring a response back to a future meeting of the Board.

**6. WORKING WITH SERVICE USERS WITH MENTAL HEALTH NEEDS - HEALTHWATCH READING & READING ADVICE NETWORK REPORT - A REPORT OF THE 2ND READING ADVICE NETWORK FORUM ON 30 MAY 2017**

Mandeep Sira submitted a report which was the outcome of a Reading Advice Network (RAN) forum held on 30 May 2017 which had brought together 14 different information, advice or support organisations to share experiences of working with local people with mental health needs.

The report gave details of the event, noting that the contribution of an invited service user, about their lived experience of mental health needs, had been valued, and the Forum had also heard findings of a local survey of service users about their perceptions of the availability and quality of support. Professionals from the local NHS community mental health trust had also attended the forum and taken an active role in discussions.

The report set out the findings of the forum and a summary table set out five main themes which the forum had identified as affecting the voluntary sector's ability to support clients with mental health needs, along with a series of proposed solutions.

It was noted that the number of service users with mental health needs was increasing, which had an impact on the individuals and on the network of support services.

The five themes were:

- Poor interaction between the statutory and 3<sup>rd</sup> sectors
- Inadequate 3<sup>rd</sup> sector funding
- Perception that some frontline statutory staff did not provide adequate or appropriate support at the client's first point of contact
- Clients did not know where to go for help, particularly at times of crisis
- Little resource for professional development within the 3<sup>rd</sup> sector

The report urged local decision-makers - Reading's NHS Clinical Commissioning Groups, and Reading Borough Council officers responsible for commissioning services from the voluntary sector via the 'Narrowing the Gap' framework - to respond to the proposals and state how they would use the report to inform the way they planned, designed and funded local services to best meet the needs of people with mental health needs.

**Resolved -**

- (1) That the report be noted;
- (2) That RBC & CCG officers responsible for commissioning services from the voluntary sector bring a report to a future meeting of the Board responding to the proposals in the report and stating how they would use the report to inform the way they planned, designed & funded local services to meet the needs of people with mental health needs.

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

### 7. HEALTHWATCH READING ANNUAL REPORT 2017/18

Mandeep Sira submitted the 2017/18 Annual Report for Healthwatch Reading, which gave details of the work carried out by Healthwatch Reading in 2017/18.

The report set out highlights from the year, explained who Healthwatch Reading were, and detailed how Healthwatch had:

- listened to people's views on health and care
- helped people to find answers
- made a difference together with other organisations, the public, delivering advocacy and involving local people in its work, including work around the Council's consultation on the closure of Focus House, a care home for people with mental health needs

The report listed Healthwatch's plans for the next year, gave details of its finances, and set out its priorities for 2018/19 as follows:

- Visiting care homes to find out about the daily lives of residents
- Understanding the experience of drug and alcohol users
- Checking the quality of primary care at various GP services
- Delivering a top-class advocacy service
- Collecting experiences of university and college students

**Resolved -**

- (1) That the report be noted;
- (2) That the Health and Wellbeing Board's thanks to the Healthwatch Reading team for their hard work be recorded and passed to the team.

### 8. READING HEALTH AND WELLBEING ACTION PLAN 2017-20 AND HEALTH AND WELLBEING DASHBOARD - JULY 2018 UPDATE

Kim McCall and Janette Searle submitted a report giving an update on delivery against the Health and Wellbeing Action Plan (attached at Appendix A) and the Health and Wellbeing Dashboard (attached at Appendix B), populated with the latest published data in relation to the Board's agreed strategic priorities. Taken together, these documents provided an overview of performance and progress towards achieving local goals as set out in the 2017-20 Health and Wellbeing Strategy for Reading.

The report summarised the position with regard to progress on each of the eight priorities in the Health and Wellbeing Strategy and paragraphs 2.2 to 2.4 set out details of updates to the data and performance indicators, which had now been included in the Health and Wellbeing dashboard, and listed where updated data was expected to be available for the next update to the Board in October 2018.

**Resolved -**

- (1) That the progress to date against the 2017-20 Reading Health and Wellbeing Strategy Action Plan, as set out in Appendix A, be noted;

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

- (2) That the updates and the expected updates to the Health and Wellbeing Dashboard at Appendix B and in paragraphs 2.2 to 2.4 be noted.

### 9. CHILDREN'S ORAL HEALTH IN READING

Marion Gibbon submitted a report presenting an analysis of the 2015 children's dental health survey data for Reading (published in 2017) and making the case for the development of an oral health strategy for Reading to complement the Healthy Weight Strategy and provide a framework for raising the profile of oral health across other relevant policies and service specifications.

The report explained that oral health was important for general health and wellbeing and that the level of dental decay in five-year-old children was a useful indicator of the success of programmes and services that aimed to improve the general health and wellbeing of young children. It also stated that there was a strong relationship between deprivation and both obesity and dental caries in children.

A ten-yearly dental health survey had been carried out in 2015 into the dental health of 5, 8, 12 and 15 year old children and had been published in March 2017. There had been a trend showing a reduction in dental caries in the South East and Reading had shown the greatest reduction in the proportion of five-year-old children with decayed, missing or filled teeth, but Reading remained third highest in the South East.

The report gave further details of data on children's oral health indicators and stated that the National Institute for Clinical Excellence (NICE) had published a series of recommendations for local authorities on undertaking oral health needs assessments, developing a local strategy on oral health and delivering community-based interventions and activities. The report gave details of Reading's progress against these and noted that Reading already had a good foundation for the development of an oral health strategy, with its existing Health and Wellbeing and Healthy Weight Strategies.

It recommended that the logical next step would be for Reading Borough Council to take the lead on developing a partnership strategy for oral health to address:

- incorporating the importance of oral health into all relevant policies and service specifications
- developing training for frontline staff that emphasised the importance of oral health and enabled them to give appropriate advice
- promoting good oral health in the workplace
- deciding on priorities for schools and how services might be most effectively targeted to those that needed them the most

**Resolved** - That the proposal for the Council to take the lead on developing an oral health strategy for Reading be supported, and Marion Gibbon report back on progress to a future meeting of the Board.



**10. RBC & CCG RESPONSE TO HEALTHWATCH REPORT ON ANALYSIS OF TUBERCULOSIS (TB) CAMPAIGN & TB ACTION PLAN**

Janette Searle submitted a report giving an update on activities to understand and improve upon the knowledge and understanding of the local community in regard to active and latent tuberculosis (TB) and of local services that were available to identify and treat latent TB. It also presented a TB action plan. The report had appended:

Appendix 1- Healthwatch Reading TB Survey Report

Appendix 2- Berkshire TB Action Plan May 2018

The report explained that South Reading Clinical Commissioning Group (CCG) (now Berkshire West CCG) had worked with the Council, local GP practices and the New Entrant Screening Service at Royal Berkshire Hospital (RBH) to successfully implement and embed a referral pathway for new registrants who had entered the UK in the previous five years from countries with a high incidence of TB. The success of this pathway was dependent on patients taking up the offer of latent TB screening. TB was considered to be stigmatising in some communities and a lack of knowledge about latent TB and the availability of free screening and treatment for latent and active TB, regardless of immigration status, could prevent people from accessing services.

In order to better understand knowledge, attitudes and behaviours of local people in regard to TB and TB services and to inform future engagement work, Healthwatch Reading had been commissioned to undertake a survey, delivered to over 300 people living in Reading and particularly reaching out to people and communities at increased risk of latent TB.

The Healthwatch TB survey result, which had been reported to the 16 March 2018 Health and Wellbeing Board, had provided a better understanding of how local people thought about TB during the first phase of a communication and engagement campaign focussing on latent TB. It had identified that, while referrals were starting to be made effectively, a substantial proportion of people invited chose not to attend their screening appointment, so there was still work to do to tailor the TB campaign so that people were better informed about the reason they were being asked to attend the appointment. The survey had also identified that stigma around TB was still an issue for some communities and those in the system recognised that further work with affected communities was needed.

The report stated that recent data from Public Health England showed that, in 2016, 27 cases of TB had been reported in Reading, with an incidence rate of 17 per 100,000 people. The TB rate in Reading had sharply decreased since 2014 but remained above South East and England rates. The age group with the highest number of cases was 40-49 years old, followed by 60-69, and the most common countries of birth for those notified in 2016 were India and Pakistan.

The results of the Healthwatch Reading survey had been discussed at a Berkshire-wide TB workshop on 5 December 2017, with the aim of reflecting on progress so far and setting priorities and activities for 2018/19. The outputs from the workshop had informed the production of an action plan which was being managed and implemented by Berkshire TB Operational Group, a Berkshire-wide group that ensured the delivery of Latent TB Infection (LTBI) objectives through collaborative working across providers, CCG, primary care & local authority public health partners.

**Resolved -**

- (1) That the report be noted;
- (2) That the plans for further community engagement activities aimed to identify, develop and support local community TB champions set out in the Berkshire TB Action Plan be supported.

**11. A HEALTHY WEIGHT STATEMENT FOR READING - IMPLEMENTATION PLAN UPDATE**

Further to Minute 8 of the meeting on 14 July 2017, Janette Searle submitted a report giving an annual update on the implementation plan for the Healthy Weight Strategy for Reading. A Healthy Weight Strategy Implementation Plan update was attached at Appendix A.

The report stated that Reading's Healthy Weight Strategy had now been used as a model by the local authorities in West Berkshire and Wokingham. With rising need and the recognition of a need to focus on tackling obesity, a Berkshire-wide obesity leads network had been established which would help to facilitate a more consistent approach across the county.

The report explained that setting Reading Borough Council's budget for 2018-19 had been exceptionally challenging in light of other pressures. Unfortunately, this had included a 100% reduction in the budget allocated to deliver the Healthy Weight Strategy, and all public health commissioned Tier 2 weight management programmes for adults and children would cease in September 2018. Work had progressed on the implementation of the Reading Healthy Weight Strategy since the last update to the Board in July 2017, but it had only been possible to take forward many of the planned actions on a skeleton basis. The report summarised work which had been progressed and listed the additional plans which had been put on hold.

**Resolved -**

- (1) That the report be noted;
- (2) That the impact of budget reductions on the delivery of the Reading Healthy Weight Strategy be recognised, and the essential re-evaluation of how the Council could support residents to achieve a healthy weight in light of reduced resources and service decommissioning be acknowledged.

**12. CREATING THE RIGHT ENVIRONMENTS FOR HEALTH - DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2018**

Jo Jefferies submitted a report presenting the Berkshire Director of Public Health's (DPH) Annual Report 2018, on "Creating the Right Environments for Health", which was attached as an Appendix to the report.

The report explained that "Creating the Right Environments for Health" aimed to reconnect professions, communities and landowners and highlight opportunities for them to work together to support the public's health through creating and maintaining accessible high quality green spaces and natural environments. The

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

report provided information and evidence that could support place-based strategies to realise the potential of green and natural spaces for the health and wellbeing of local residents and communities and showcased examples of how local communities were already using the natural environment to stay healthy or improve their health and wellbeing.

The DPH report recommended that:

1. Local authorities and other agencies should continue to encourage community initiatives that made the most of natural space available, with the aim of improving mental health, increasing physical activity and strengthening communities;
2. Existing green space should be improved and any new developments should include high quality green spaces. The use of professional design and arrangements to ensure the ongoing management of natural environments should be considered if spaces were to be sustainable;
3. Opportunities to increase active transport should be considered when designing new green spaces and in the improvement of existing space;
4. Planning guidance for new developments should specifically consider the use of green and blue space to improve the health and wellbeing of residents and others using the space;
5. Local Authorities and their public health teams should foster new relationships with organisations aiming to improve the natural environment and its use.

The report stated that, bearing in mind the DPH report's recommendations, the Council aimed to implement the following more specific recommendations:

- Reading Borough Council would use the massive opportunity it had with regard to its new leisure developments to drive engagement and promote community resilience and cohesiveness into its future plans;
- Reading Borough Council would continue to improve its green spaces and ensure that they were safe for everyone;
- Reading Borough Council would ensure all new developments incorporated consideration of how they would improve the health and wellbeing of residents and others, including provision of and links to green spaces where opportunities allowed.

It also gave examples of ongoing work that was being undertaken by the Council and partners which supported the recommendations made in the DPH Report and encouraged members of the Board to share the report widely within their respective organisations and local communities.

The Board discussed the DPH report and welcomed the opportunity to use it for more conversations about the use of the natural environment. For example, discussions could be held about how much should be spent on improvements to parks for 'beautification', in balance with increasing multi-functionality, managing the facilities and encouraging more people to be active in these spaces.

## READING HEALTH & WELLBEING BOARD MINUTES - 13 JULY 2018

### Resolved -

- (1) That the report, its conclusions and the work being undertaken and planned, be noted;
- (2) That members of the Board share the report widely within their respective organisations and local communities, and a copy of the DPH Report be sent to all Councillors.

### 13. READING HOMELESS HEALTH NEEDS AUDIT

Verena Hutcheson submitted a report presenting the findings of a Homelessness Forum partnership project into the physical, mental and sexual health needs of Reading's single homeless population. The results of the Homeless Health Needs Audit were appended to the report.

The report explained that, in January and February 2017, over a five week period, partners from Reading's Homelessness Forum had commissioned and undertaken a Homeless Health Needs Audit in Reading. The Audit had included completion of questionnaires with 150 individuals who were single or part of a couple without dependent children and who were homeless - for example those who were rough sleeping, sofa surfing, living within supported accommodation, refuges or in Bed and Breakfast. The aims of the Audit had been to listen to and take account of single homeless people's views on their health; provide an evidence base and fill in any information/evidence gaps; contribute to Reading's Joint Strategic Needs Assessment (JSNA); consider what was currently working well within services, with a view that this could inform improvements; and develop a case for change for homeless people in Reading.

The findings of the Homeless Health Needs Audit were intended to be a research piece that could inform improvement and service development across sectors where key issues from respondents had been highlighted, and management within sector services were invited to set out their responses to these findings and develop subsequent action plans.

Verena reported at the meeting that housing services had used the audit to inform the remodelling and recommissioning of its rough sleeper outreach, floating support and supported accommodation services, and that funding from a Rough Sleeper Initiative had recently been obtained for 2018/19.

### Resolved -

- (1) That the Reading Homeless Health Needs Audit report be noted and partners use the research to inform improvement and service development within their area and across housing, health and social care sectors;
- (2) That management and commissioners within and across health and social care sector services develop responses to the Audit's findings and report back to the Board plans to address highlighted issues and barriers for those who were single, or part of a couple without dependent children experiencing homelessness.

**14. READING'S ARMED FORCES COVENANT AND ACTION PLAN - MONITORING REPORT**

Clare Muir submitted a report presenting an annual update on progress against the actions outlined in the Reading Armed Forces Covenant action plan, in particular the health-related actions, and on the general development of the covenant. The Action plan was appended to the report.

**Resolved** - That the progress against the actions set out in the Armed Forces Covenant action plan be noted.

**15. INTEGRATION PROGRAMME UPDATE**

Michael Beakhouse submitted a report giving an update on the Integration Programme and on progress made against the delivery of the national Better Care Fund (BCF) targets.

The report stated that, of the four national BCF targets, performance against two (limiting the number of new residential placements & increasing the effectiveness of reablement services) was strong, with key targets met.

It stated that partners were not currently reducing the number of delayed transfers of care (DTOCs) in line with targets, but DTOC rates since October 2017 had shown a strong downwards trajectory, which represented very positive progress.

Partners had not met the target for reducing the number of non-elective admissions (NELs) but work against this goal remained a focus for the Berkshire West-wide BCF schemes.

The report gave further details of BCF performance and additional local performance, as well as of items progressed since March 2018 and the next steps planned for the summer. It also explained the current situation regarding likely future BCF targets for 2018/19, noting that the Operating Guidance was due to be published in July 2018.

**Resolved** - That the report and progress be noted.

**16. DATE OF NEXT MEETING**

**Resolved** - That the next meeting be held at 2.00pm on Friday 12 October 2018.

(The meeting started at 2.00pm and closed at 4.32pm)