

READING HEALTH & WELLBEING BOARD MINUTES - 17 JANUARY 2020

Present:

Councillor Hoskin (Chair)	Lead Councillor for Health, Wellbeing & Sport, Reading Borough Council (RBC)
Mandeep Bains	Chief Executive, Healthwatch Reading (substituting for David Shepherd)
Councillor Brock Andy Ciecierski	Leader of the Council, RBC North & West Reading Locality Clinical Lead, Berkshire West CCG
Seona Douglas	Director of Adult Care & Health Services, RBC
Deborah Glassbrook	Director of Children's Services, Brighter Futures for Children (BFfC)
Tessa Lindfield	Strategic Director of Public Health for Berkshire
Rachel Spencer	Chief Executive, Reading Voluntary Action
Cathy Winfield	Chief Officer, Berkshire West CCG

Also in attendance:

Poppy Barnard	National Management Trainee & Time to Change Champion, RBC
Ramona Bridgman	Reading Families Forum
Gurmit Dhendsa	Trustee, Healthwatch Reading
Clare French	Joint Legal Team & Time to Change Champion, RBC
Sarah Hunneman	Neighbourhood Facilitator, Public Health & Wellbeing Team, RBC
Deb Hunter	Head of SEND & Principal Educational & Child Psychologist, BFfC
Gail Muirhead	Prevention Manager, Royal Berkshire Fire & Rescue Service (RBFfRS)
David Munday	Consultant in Public Health, RBC
Janette Searle	Preventative Services Manager, RBC
Nicky Simpson	Committee Services, RBC
Kate Stockdale	Senior Drug & Alcohol Commissioning Manager, RBC
Lewis Willing	Integration Project Manager, RBC & Berkshire West CCG

Apologies:

Neil Carter	RBFfRS
David Shepherd	Chair, Healthwatch Reading
Councillor Terry	Lead Councillor for Children, RBC

1. DECLARATIONS OF INTEREST

Andy Ciecierski declared an interest in Item 6 on the Reading Walk In Centre Update, as he was on the panel for the procurement exercise.

Cathy Winfield declared an interest in Item 7 on Future CCG Management Arrangements, as this item involved her post.

2. MINUTES

The Minutes of the meeting held on 11 October 2019 were confirmed as a correct record and signed by the Chair.

3. QUESTIONS IN ACCORDANCE WITH STANDING ORDER 36

The following question was asked by Francis Brown on behalf of Tom Lake in accordance with Standing Order 36:

a) Health Improvement Through Leisure:

“It is widely agreed that the determinants of health go far beyond the field of medicine and that work, housing, leisure and transport influence our health.

Some of these influencing factors are in the hands or in the purview of the local authority. In so far as this is true, should it not be this board at which these influences are considered and improvements sought? Do we just pay lip service to the wider determinants of health or are we trying to work with them?

The present Reading Borough draft budget contains 43 million pounds of capital spend on leisure improvement. What public health and NHS input has there been in the planning of the proposed facilities?

Will there be any joint NHS/borough facilities? Will there be opportunities for the borough, public health and the NHS to work together to further the improvement of health through leisure?”

REPLY by Councillor Hoskin (Chair of the Health and Wellbeing Board):

“The Council is committed to tackling the wider determinants of health which, as is rightly pointed out, is about much more than just medicine.

The leisure procurement process to develop the specification and evaluate the bids was supported by an in-house team, which included Public Health, to ensure the contract delivers wider public health outcomes. In addition to the facilities specification, there is a detailed service specification, which sets out the type and level of service to be delivered by the provider

In addition, the provider will be required to contribute towards the achievement of the nine Authority Outcomes, the three most relevant to this topic are the Council’s commitment to:

1. Improving health and wellbeing and reducing health inequalities.
2. Educating, protecting and providing opportunities for young people
3. Supporting and caring for vulnerable adults and older people

The provider is proposing to undertake the following activities that will contribute to health and wellbeing in Reading. The implementation of these activities will be supported by the RBC Public Health Team to ensure they meet the needs of the local Reading population. The proposed activities are:

- provide a room available weekly within each leisure centre to enable an accredited provider to deliver Public Health-commissioned interventions.

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- increase participation for certain target groups including GP referral customers and clinical and high-risk referrals, pre-diabetes, rehabilitation management and the least physically active.
- deliver weight management courses for the local population.
- increase the current Exercise Referral Scheme (ERS) which supports a physical activity and behaviour change intervention for those with a Long Term Medical Condition.
- deliver cardiac and cancer rehabilitation and a falls prevention scheme.

Once the provider has commenced delivery of the service, they will report on its performance of the delivery of services in accordance with the agreed specification and against the performance standards. A report will be produced regularly providing qualitative and quantitative evidence of how the provider has performed to the Council's requirements. This mechanism will create opportunities for the borough, public health and the NHS to work together to further the improvement of health through leisure.”

The following question was asked by Francis Brown in accordance with Standing Order 36:

b) The future arrangement for the NHS commissioning in your area

“The claim of this recent marketing document is that the proposed merger will lead to a more efficient organisational structure. This proposed structure will in turn be even more capable of reducing costs through transformed ways of working involving 14 local authorities and parts of the NHS. Further benefit will arise from new ways of working within different parts of the NHS.

The actual headcount savings, less redundancies, are likely to be tiny in the context of the transformational saving from better integrated methods.

Is the Reading Borough Council satisfied that the merger will really lead onto even better ways of working together? Or is there a risk that increasing the gap between the 14 local authorities and a super CCG is a step in the wrong direction?

Are you concerned that there is no financial information to support a radical and potentially damaging re-organisation?”

REPLY by Councillor Hoskin (Chair of the Health and Wellbeing Board):

“Thank you for your question Mr Brown. In our formal response to the official NHS engagement on these plans myself and Councillor Ruth McEwan, as Chair of the committee responsible for Health Scrutiny, outlined our concerns about the proposed moves towards a larger NHS planning and administrative area and the potential merging of CCGs.

I shall arrange for you to have a copy but our concerns were summarised as this, “In principle we are opposed to moving towards the planning and commissioning of NHS to a larger geographical area. We believe this could lead to decision making becoming more distant from local communities, that planning is increasingly centralised and more closely controlled by NHS

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England, and that local action to deliver integrated care and address health inequalities may be weakened.”

That said we are aware that these moves are being driven by national government and NHS national headquarters and that, despite our local concerns, these changes may well happen regardless. Reading Borough Council therefore believes it is important to continue our strong record of working closely with local NHS organisations and the membership of this Health and Wellbeing Board is testament to that.

Partnership working with the NHS is currently happening in increasing measure through the local Berkshire West Integrated Care Partnership (ICP). Councillors and Officers from RBC are part of the formal structure of this ICP and are able to ensure that the voice and needs of the population of Reading are heard and understood within this.

With regard to the proposed changes to Clinical Commissioning Group (CCG) structures that you make reference to, RBC has engaged closely with the Berkshire West CCG and the wider Buckinghamshire, Oxfordshire and Berkshire West system (BOB), about these plans. This has been via this Health and Wellbeing Board, the RBC Adult Social Care, Children’s Services and Education Committee and also through joint scrutiny meetings with colleagues from neighbouring Local Authorities within the BOB footprint. Indeed, we have an update on these proposed changes on the agenda of our meeting today. Councillors and Officers have also provided detailed responses to the CCG during the consultation phase at the end of last year to ensure the Reading perspective was fed into decision making.

Although there may be some considerable challenges to ensuring local Reading-specific issues are not lost within the proposed change to having one larger CCG, we are pleased to see that the local new Berks West ICP will remain in the new structure. The CCG is also committed to ensuring it maintains a local presence here in Reading, even if it formally becomes one regional organisation. As I have described, the ICP is the primary mechanism through which we connect with the NHS and we already commission some services at this ICP level which ensures economies of scale and joined up approaches to services exist, which benefits the population of Reading.

The rationale for the proposed change isn’t specifically a reduction in head count but creating an infrastructure that will support strategic change across a bigger geography. There is no specific financial detail included because this continues to be worked on by BOB as it develops its Long Term Plan submission. With this in mind, RBC are committed to continue to work in partnership with the NHS and through local democratic structures such as this Health and Wellbeing Board, and will continue to use all the powers and influence at its disposal to push for the adequate funding of NHS services for the residents of Reading.”

4. SPECIAL EDUCATIONAL NEEDS AND DISABILITY STRATEGY - ANNUAL UPDATE

Further to Minute 3 of the meeting held on 18 January 2019, Debs Hunter submitted a report on progress made in delivering the SEND (Special Educational Needs and Disability) Strategy since January 2019.

The report explained that work on SEND had continued and set out the following specific key achievements which had been secured:

- Continued close working with Reading Families Forum to ensure co-production of materials and service delivery
- Views of children and young people in Special United and in schools had informed coproduction of services and materials, such as the mental health work and development of the Education Health and Care Plans.
- A SEND free school with places for Reading children and young people with SEMH and ASC was in process.
- Two new primary resources for children with Social Communication Difficulties had been agreed and scoping exercises were under way re location - it was intended that there would be one in the west and one in the north.
- Preparing for Adulthood: an information guide for parents and carers - a joint co-produced publication for young people moving into adulthood
- The Therapeutic Thinking Schools approach was well embedded in schools
- The Mental Health Support Team trailblazer was established and was going live in January 2020
- The Graduated Response Guidance was being more consistently used by schools with the number of pupils at SEN Support increasing.
- A communication plan was also being developed which would support greater engagement with the strategy

The report had appended the following:

Appendix 1: SEND strategy on a page

Appendix 2: SEND strategy refresh from October 2019 - refreshed following a workshop with all key stakeholders and co-produced with Reading Families Forum and other key partners.

Appendix 3: Co-production and how we work together

Appendix 4: Equality Impact Assessment

The SEND strategy on a page set out the following five priorities, detailing what would be done and the outcomes required:

- Making SEND everybody's business
- Embedding co-production at every level
- Working together to identify and assess needs
- Working together to deliver support in the right place at the right time
- Resources would be allocated fairly, transparently and with evidence that they supported improving outcomes

Debs Hunter explained that the 'plan on a page' was being developed, in order to be able to take this to each of the teams and every school, for example, asking schools

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to look at their own development plans and to see how they could ensure that they were aligned with the SEND strategy.

Ramona Bridgman from Reading Families Forum attended the meeting and addressed the Board, noting that, with the move to BFfC, it was hard to make sure that carers assessments were working for everyone and that there was still some work to be done to get this right for carers for children. There were also still some issues in getting meaningful pathways for adult social care for 18-25 year olds, with some young people waiting over a year to get a plan agreed and in place, so this needed improvement. Ramona also reported on a national campaign to ensure that disabled women had access to the same health checks as others and queried what Reading's policy was on this. For example, if someone was in a wheelchair and there was no hoist at their GP surgery, they might not have access to cervical smears.

David Munday and Seona Douglas said they would pick up these issues outside the meeting, with David noting that he had already met with Ramona Bridgman and Debs Hunter to see how Public Health could help with early identification and assessment of needs and saying that he would investigate the campaign on access to health checks for disabled women.

Deborah Glassbrook said that, if families were struggling to get assessments, they could escalate the problem to her as Director of Children's Services to ensure that families got the services they needed, and she would take this up outside the meeting.

Resolved -

- (1) That the progress made on delivery of the SEND Strategy be noted and Ramona Bridgman be thanked for attending the meeting;
- (2) That the members of the Health and Wellbeing Board continue to support the work of the SEND team and particularly the work with stakeholders to embed co-production in all services and all service delivery;
- (3) That David Munday, Seona Douglas and Deborah Glassbrook pick up the specific issues raised by Ramona Bridgman outside the meeting.

5. TIME TO CHANGE: RBC EMPLOYER ACTION PLAN REFRESH

Janette Searle submitted a report outlining Reading Borough Council's progress to date in delivering on a 'Time to Change' Employer Pledge to end mental health discrimination, and setting out the ambitions of a refreshed Action Plan (attached at Appendix 1) which had been approved by the Council's Corporate Management Team in November 2019, within the adoption of a new Employee Wellbeing Action Plan.

The report explained that, in 2017, the Council had developed a proposal for how the authority could deliver on a Time to Change Employer Pledge, which had been approved by the national Time to Change team, and at the 6 October 2017 Health and Wellbeing Board, Councillor Hoskin had signed the Time to Change Employer Pledge on behalf of the Council (Minute 3 (4) refers).

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The Council's Time to Change Action Plan was owned by a group of Champions who had been recruited from across the authority, supported through training, peer mentoring and access to Time to Change resources. There were over 60 Champions, representing each Directorate and most services, with meetings and Champion-led events taking place across the various Council sites and the report gave examples of the events held promoting staff mental wellbeing.

The report gave details of how the Action Plan had been refreshed in 2019 and had appended the refreshed Action Plan which listed activities, people responsible, timescales and performance measures.

Poppy Barnard, Clare French attended the meeting as Time to Change Champions, explaining their involvement and the activities in which they had taken part and Sarah Hunneman addressed the Board as the coordinator of the Champions, emphasising the value of the Champions in disseminating information and raising awareness. It was noted that the refreshed plan recognised the need to mainstream and normalise mental health conversations and so there was an increased emphasis on embedding mental health awareness within the organisation's day to day business.

Resolved - That the report be noted and the actions which the Council had committed to as a Time to Change employer, and how these supported and promoted wellbeing in the Borough, be noted.

6. READING WALK-IN CENTRE UPDATE

Cathy Winfield submitted a report which explained that the Alternative Provider Medical Services (APMS) contract for Reading Walk-in Centre would come to an end on 30 June 2020. The service was being re-procured and the CCG intended to have a new contract in place from 1 July 2020.

The report stated that the services provided at the Reading Walk-in Centre were currently provided by Virgin Care, whose contract ended on 30 June 2020. Following the review of the service specification by a multi-agency group including health, local authority and Healthwatch Reading representatives, the CCG was currently running a procurement exercise. The intention was to let a contract for the next four years, coinciding with the length of the current lease on the Broad Street Mall premises.

10,168 patients were currently registered with the Walk-in Centre. Under the new contract, the provider would be required to continue to care for these patients and to grow the registered list further. In addition, the service would continue to offer walk-in access 8am-8pm, seven days a week for patients registered with other practices. Prospective providers would be required to demonstrate how they would gear the service to meet the needs of specific population groups that currently accessed the centre, including homeless patients and children.

As currently, and in accordance with the Berkshire West Integrated Care Partnership's emerging Urgent Care Strategy, patients would be encouraged to routinely access their own GP practice to ensure continuity and full access to notes. Patients who frequently attended the walk-in element of the service might be asked to consider registering there as was currently the case. It was anticipated that access to primary care would change over the coming years with practices increasingly working together through their Primary Care Networks to improve same day care provision. As such, the contracting model anticipated that walk-in activity would decline over the life of

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the contract and encouraged the provider to work with Primary Care Networks to optimise access to primary care for Reading patients. In future patients who attended Emergency Departments with minor illness might also be re-directed to this service.

Resolved - That the report be noted.

(Andy Ciecierski declared an interest in this item, as he was on the panel for the procurement exercise).

7. FUTURE CCG MANAGEMENT ARRANGEMENTS

Cathy Winfield submitted a report which had been considered by the Berkshire West CCG Governing Body on 14 January 2020 on future CCG management arrangements. The report had appended:

- Appendix 1: Table of mitigating actions in response to themes identified from engagement report
- Appendix 2: Summary of local engagement activities during the engagement period
- Appendix 3: Proposed Job Description for single Accountable Officer role

The report explained that the NHS Long-Term Plan stated that “Every ICS will need streamlined commissioning arrangements to enable a single set of commissioning decisions at system level... This will typically involve a single CCG for each ICS area. CCGs will become leaner, more strategic organisations that support providers to partner with local government and other community organisations on population health, service redesign and Long-Term Plan implementation”.

As a result of this policy statement, the CCGs within the BOB (Buckinghamshire, Oxfordshire and Berkshire West) ICS (Integrated Care System) had established an ‘Architecture Oversight Group’ comprising the CCG Chairs and Chief Officers, ICS Leaders and lay members from each Place, to co-ordinate the work in this area and design a proposal which reflected the areas of mutual agreement between the parties. In October to December 2019, the three CCGs had carried out a period of engagement with stakeholders on a document setting out the proposal “The future arrangements for NHS commissioning in your area”.

The engagement exercise had sought the views of stakeholders on the following three proposals:

- a. The appointment of a single Accountable Officer and Shared Management Team for the three CCGs
- b. The design principles for the creation of stronger Integrated Care Partnerships for each of the three places
- c. The creation of a single commissioning organisation across the BOB geography (ie a merger of the three existing CCGs)

The report gave information on the outputs of the engagement exercise and detailed quantitative and thematic analysis and explained how the proposal design had been changed as a result of the responses. It recommended to the CCG Board that it agreed to commence the process for appointing a shared Accountable Officer for the

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three CCGs in the BOB area and stated that decisions on the design of ICPs and the potential CCG merger were not yet required. The report set out recommended design principles as a basis from which a proposal for a single management team could be produced and recommended proposed mandatory roles and functions to be incorporated in any future management team structure.

Cathy Winfield reported that the CCG Governing Body had agreed all three recommendations. She noted that the proposals maintained the emphasis on place-based working, with a Managing Director for each of the three places, with a seat on the Board, and with retention of certain management responsibilities and functions at that place level. She said she was still expecting the majority of commissioning and service redesign decisions to be made locally in Berkshire West, which was the most advanced of the ICPs across BOB, and the most embedded.

In response to concerns expressed about possible future moves towards a single control total for the ICS and the potential impact on being able to keep appropriate focus on health inequalities, Cathy Winfield confirmed that Berkshire West CCG would remain a statutory body with its own separate budget.

Resolved - That the report and situation be noted.

(Cathy Winfield declared an interest in this item, as it involved her post.)

8. SUPPORTING OUR FUTURE: ADULT SOCIAL CARE STRATEGY 2019 - 2022

Seona Douglas submitted a report presenting the Adult Social Care Strategy for the period 2019-2022, as revised and refined following a two month public consultation, and as approved by the Adult Social Care, Children's Services and Education Committee on 21 October 2019. A copy of the Strategy was appended to the report.

The report explained that the Strategy focused on reducing the need for long term health and social care services by putting in place more self-enabling support. This meant developing a whole system approach which encouraged people to take responsibility for their own health and wellbeing, so that healthier choices were accessible to everyone, and people got the support they needed to stay active and felt they were part of a community. Family and unpaid carers were a vital part of this.

Putting the Strategy in place would provide the Council with a framework for placing prevention and early intervention at the core of care and support in the Borough. This had started with Public Health's role in analysing the local population and its health needs, and putting in place support, a strong focus would then be needed on individual and community assets to improve outcomes and manage demand on the formal care system. When people needed Adult Social Care, on a short or long term basis, that support needed to be empowering, re-abling and good value as part of a sustainable care system.

'Supporting Our Future' had identified five priority outcomes for the local care system, as follows:

- An approach which drove wellness and independence;
- Clear information and advice about local services, which facilitated access and self-care;

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- A supportive and sustainable local market, offering choice and value;
- A skilled workforce which empowered and enabled people;
- A sustainable system which offered good value.

Resolved - That the 'Supporting Our Future' Reading Borough Council Adult Social Care Strategy 2019-2022 be noted.

9. READING DRUG AND ALCOHOL COMMISSIONING STRATEGY FOR YOUNG PEOPLE AND ADULTS 2018 - 2022 AND ACTION PLAN - UPDATE

David Munday submitted a report giving an update on the Reading Drug and Alcohol Commissioning Strategy and Action Plan for Young People and Adults from 2018 to 2022. The report had appended:

- Appendix 1 - Reading Drug and Alcohol Commissioning Strategy for Young People and Adults 2018-2022
- Appendix 2 - Reading Drug and Alcohol Strategy Action Plan 2018-2022.

The report explained that the Strategy had been written in line with the Government Drug Strategy 2017, the Governments' Alcohol Strategy 2012 and Reading Health and Wellbeing Strategy 2017-2020 and had been agreed by Policy Committee on 24 September 2018.

The Public Health Team had carried out a procurement exercise from October 2018 to March 2019 to re-procure a new drug and alcohol treatment service and the new Drug and Alcohol Behaviour Change, Treatment Recovery System contract had been awarded to Change, Grow, Live (CGL), and had commenced on 1 October 2019.

The Action Plan had been developed with partners and had three priority areas, of Prevention, Treatment, and Enforcement and Regulation. It had been approved by the Adult Social Care, Children's Services and Education Committee on 21 October 2019, but was being used as a 'live' document and would be regularly updated.

Kate Stockdale addressed the Board giving a summary of activity by CGL since the start of their contract. She said that things had gone well, with new referrals even in the first few weeks, CGL undertaking outreach work in joint operations with Thames Valley Police, providing routes into treatment for hard to reach groups, and that there were further operations planned. CGL were also developing partnerships with local hospitals, GPs and community pharmacies.

David Munday reported that there were more potential opportunities to reduce drug-related harm and partners were looking at developing innovative ways to reduce harm and death related to drug use and increase referrals into treatment services in Reading. He said that he would bring a report to a future meeting of the Board.

Resolved -

- (1) That the report and the Drug and Alcohol Action Plan 2018-2022 be noted;
- (2) That a report on the development of plans for reducing drug-related harm be brought to a future meeting of the Board.

10. BERKSHIRE WEST LOCAL SAFEGUARDING CHILDREN BOARD (LSCB) ANNUAL REPORT 2018/19

Deborah Glassbrook submitted a report presenting the Berkshire West Local Safeguarding Children Board (LSCB) Annual Report for 2018/19 on the work of and achievements of the LSCB for the 2018/2019 financial year, which was appended to the report. The report also described the new partnership arrangements that had replaced the LSCB from April 2019.

The report explained that, until March 2019, the LSCB had been the key statutory partnership whose role was to oversee how the relevant organisations co-operated to safeguard and promote the welfare of children in Reading and to ensure the effectiveness of the arrangements, as outlined in statutory guidance Working Together to Safeguard Children 2015 and 2018.

The LSCB was required to publish an Annual Report on the effectiveness of child safeguarding and promoting welfare of children in Reading. The report had to be presented to the Health and Wellbeing Board in line with statutory guidance.

The report explained that the Annual Report contained information on activities and achievements that demonstrated the partnership working and scrutiny in the LSCB and the impact this had on practice, and listed the achievements and ongoing challenges for the LSCB and partners against the following priorities identified for the 2018/19 year:

- Domestic Abuse
- Exploitation
- Implementation of the new multi-agency safeguarding arrangements
- Locality based priorities

The report stated that, in May 2018, the three separate LSCBs in Berkshire West (Reading, Wokingham and West Berkshire) had begun a trial year operating as a single Board, as part of the transition to new partnership arrangements. In July 2018, a revised Working Together to Safeguard Children had been published, which had removed the statutory requirement to have an LSCB, but required statutory partners to ensure appropriate local safeguarding arrangements were in place. Berkshire West had published its arrangements in March 2019 and they had been implemented in June 2019. However, there remained a requirement for a final LSCB annual report, which was attached for information. This was a Berkshire West report, but information in relation to Reading was specified within it.

The annual report also provided more details of how the new multi-agency partnership, the Berkshire West Safeguarding Children Partnership (BWSCP), would be different to the LSCB and it had appended a structure chart for the new arrangements. The BWSCP would continue to produce an annual report, which would be shared.

Resolved - That the annual report of the Berkshire West Local Safeguarding Children Board 2018/19 and the revised safeguarding children partnership arrangements be noted.

11. INTEGRATION PROGRAMME UPDATE

Lewis Willing 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 for the financial year so far.

The report stated that, of the four national BCF targets, performance against one (limiting the number of new residential placements) was strong, with 49 placements made in eight months and a projected 74 placements for the financial year (against a target of 116 for the financial year). It stated that partners had not met the target for reducing the number of non-elective admissions (NELs) but the performance was close to the target and work against this goal remained a focus for the Berkshire West-wide BCF schemes and the Reading Integration Board work plan.

The target for reducing the number of delayed transfers of care (DTC) had been met for half of the financial year, with improvement in performance in four of the six months of the financial year for DTC attributed to both health and adult social care and improvement in five of six months attributed to health.

Progress against the target for increasing the effectiveness of reablement services remained in line with the decreased performance previously reported, but this was due to revised guidance around the methods of measuring their impact and did not reflect a drop in actual performance. Further activities were planned to align the reablement offer with emerging national best practice.

The report gave further details of BCF performance and gave details of items progressed since September 2019 and the next steps planned for January to March 2020.

Resolved - That the report and progress be noted.

12. BETTER CARE FUND PLANNING RETURN 2019/20

Lewis Willing submitted a report seeking retrospective approval for the Better Care Fund (BCF) Funding planning template, which had been completed for the financial year 2019/2020 and submitted in September 2019 in line with required timescales. The report included a table that provided a summary of how the Better Care Fund budget would be spent in 2019/20 and a more comprehensive breakdown of the budget for 2019/20 and the services that it supported was set out in Appendix 1.

The report explained that the return covered details of the plans to utilise the Better Care Fund and how Adult Social Care and Health services planned to use these funds in an integrated way to maximise system impact (pending NHS England agreement). It was reported at the meeting that NHS England had now agreed the Reading Better Care Fund for 2019/20.

The funds had to be used to support the locality to meet the four Better Care Fund targets and the use of the funds had to be jointly agreed. The four targets were:

- Reducing the number of placements made in residential and nursing homes
- Reducing the number of delayed transfers of care (DTC)
- Reducing the number of people that returned to hospital within 90 days of their discharge

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- Reducing non-elective admissions to hospital (NEL)

The report explained that the timing of the return and the Better Care Fund quarterly returns did not align with Health and Wellbeing Board meetings and this was compounded by short timescales to collect and draft the complex responses that were required by NHS England.

The report therefore requested retrospective approval for the BCF submission that had been submitted by the required deadline and reported that the sign off of all future Better Care Fund returns had been delegated by the Adult Social Care, Children's Services and Education Committee to the Executive Director of Social Care and Health and the Clinical Commissioning Group Director of Operations for Reading, in consultation with the Lead Councillor for Health, Wellbeing and Sport and the Lead Councillor for Adult Social Care (Minute 27 refers).

Mandeep Bains noted that, while she accepted that there was probably service user feedback being gathered on the BCF projects, there was no information about this feedback provided at the Reading Integration Board or the Health and Wellbeing Board and it would be useful to see evidence of how these services and improvements were being experienced by users, when considering programmes of work. It was suggested that Lewis Willing should ask the Chair of the Reading Integration Board (RIB) to take on a piece of work for the RIB to look at information on the service user feedback being gathered in the various BCF work programmes and report on this to the Health and Wellbeing Board.

Resolved -

- (1) That the report be noted;
- (2) That retrospective approval be given for the Better Care Fund submission (a summary of which was set out in Appendix 1), which had been submitted in September 2019 in order to comply with national deadlines outside of the Board meeting cycle;
- (3) That it be noted that the Executive Director of Social Care and Health (Reading Borough Council) and the Director of Operations (Clinical Commissioning Group) had been given delegated authority to sign off Better Care Fund returns in future, in consultation with the Lead Councillor for Health, Wellbeing and Sport and Lead Councillor for Adult Social Care;
- (4) That Lewis Willing investigate the pulling together of information on the service user feedback being gathered on BCF work programmes, to be looked at by the RIB and for the RIB to report on this to the Health and Wellbeing Board.

13. HEALTH AND WELLBEING DASHBOARD & ACTION PLAN - JANUARY 2020

Janette Searle submitted a report giving an update on delivery against the Health and Wellbeing Action Plan (Appendix A) and on the Health and Wellbeing Dashboard (Appendix B), which set out local trends. The report therefore gave an overview of performance and progress towards achieving local goals as set out in the 2017-20 Health and Wellbeing Strategy.

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The report summarised the performance against the eight priority areas in the Action Plan and paragraph 2.2 of the report set out details of updates to the data and performance indicators which had been included in the Health and Wellbeing dashboard since the last report.

Resolved - That the report be noted.

14. CARE QUALITY COMMISSION (CQC) REVIEW OF READING HEALTH AND SOCIAL CARE SYSTEM - ACTION PLAN QUARTERLY UPDATE

Lewis Willing submitted a report giving a quarterly update on the Action Plan developed following the Care Quality Commission (CQC) Review of the Reading Health and Social Care System that had been carried out by the CQC in 2018. The report had appended the updated Action Plan, which gave details of progress made on each area for improvement.

Resolved - That the report be noted.

15. DATE OF NEXT MEETING

Resolved - That the next meeting be held at 2.00pm on Friday 13 March 2020.

(The meeting started at 2.00pm and closed at 4.13pm)