

READING HEALTH & WELLBEING BOARD MINUTES – 14 JULY 2023

Present:

Councillor Ruth McEwan (Chair)	Lead Councillor for Education and Public Health, Reading Borough Council (RBC)
Councillor Jason Brock	Leader of the Council, RBC
Andy Ciecierski (Vice-Chair)	Clinical Director for Caversham Primary Care Network
John Ashton	Interim Director of Public Health for Reading and West Berkshire
Councillor Paul Gittings	Lead Councillor for Adult Social Care, RBC
Councillor Graeme Hoskin	Lead Councillor for Children, RBC
Alice Kunjappy-Clifton	Lead Officer, Healthwatch Reading
Steve Leonard	West Hub Group Manager, Royal Berkshire Fire & Rescue Service
Rachel Spencer	Chief Executive, Reading Voluntary Action
Sarah Webster	Executive Place Director - Berkshire West, Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB)
Melissa Wise	Acting Executive Director of Adult Social Care & Health, RBC

Also in attendance:

Tariq Gomma	Community Participatory Action Researcher
Chris Greenway	Assistant Director for Commissioning and Transformation, RBC
Eva Karanja	Community Participatory Action Researcher
Councillor Alice Mpfu-Coles	Chair of the Adult Social Care, Children's Services and Education Committee, RBC
Sunny Mehmi	Assistant Director for Operations, Adult Social Care, RBC
Cecily Mwaniki	Community Engagement Lead, Berkshire Healthcare NHS Foundation Trust (BHFT)
Krishna Neupane	Community Participatory Action Researcher
Bev Nicholson	Integration Programme Manager, RBC
Amanda Nyeke	Public Health & Wellbeing Manager, RBC
Esther Oenga	Postdoctoral Research Assistant in Participatory Action Research, University of Reading
Martin White	Consultant in Public Health, RBC

Apologies:

Tehmeena Ajmal	Chief Operating Officer, BHFT
Caroline Lynch	Trust Secretary, Royal Berkshire NHS Foundation Trust (RBFT)
Lara Patel	Executive Director of Children's Services, Brighter Futures for Children (BFfC)
Eamonn Sullivan	Chief Nurse, RBFT

2. MINUTES

The Minutes of the meetings held on 17 March and 23 June 2023 were confirmed as a correct record and signed by the Chair.

3. TACKLING HEALTH INEQUALITIES IN READING - COMMUNITY PARTICIPATORY ACTION RESEARCH 2021-22

Rachel Spencer submitted a report outlining the key findings and recommendations of Community Participatory Action Research (CPAR) carried out between February 2021 and May 2022 to research and evidence the inequalities facing minority ethnic communities in accessing healthcare in Reading. Esther Oenga, who had facilitated the research, and Tariq Gomma, Eva Karanja and Krishna Neupane, who had been involved as community researchers, gave a presentation on the research focus, findings, recommendations and where the CPAR had led so far for the projects.

The report explained that, throughout the Covid-19 pandemic, inequalities in health, especially mental health, had become magnified amongst some Black, Asian and minority ethnic (BAME) groups which were disproportionately affected. Public Health England's report, *Beyond the data: Understanding the impact of Covid-19 on BAME groups (2020)*, had demonstrated the widening of existing health inequalities and as a result Health Education England South East had implemented a programme of work to support CPAR, in which researchers and community stakeholders engaged as equal partners.

A partnership involving Reading Borough Council, Reading Voluntary Action, the Alliance for Cohesion and Racial Equality, Reading Community Learning Centre and the University of Reading's Participation Lab had been successful in gaining a grant to train and support five local researchers in Reading to co-produce and carry out research with the support of a part-time facilitator, Dr Esther Oenga. Over the previous year, they had worked tirelessly to research and evidence the striking inequalities facing minority ethnic communities in accessing healthcare in Reading and the report outlined the key findings and recommendations on the following research projects:

- Access to maternal healthcare services for ethnic minority communities
- Access to healthcare services for ethnic minority women
- Impact of Covid-19 on the mental health of ethnic minority men
- Impact of Covid-19 on the Nepalese Community in Reading

It was reported that there had already been some action on the recommendations within the report, including receiving funding for the Reading Maternity Voices inequalities project with Royal Berkshire NHS Foundation Trust for a two-year pilot project to focus on:

- Listening to feedback from Black and Asian women, and women from minority ethnic groups, or considered to be living in deprived areas
- Working with the hospital to improve outcomes for women in these communities and their babies

The research had resulted in new opportunities, projects and jobs for the community researchers and a toolkit for carrying out Community Participatory Action Research had been produced, copies of which were handed out at the meeting. Further work was being carried out on a "CPAR 2", with some of the CPAR 1 researchers acting as community peer mentors.

Resolved –

That the report be noted and welcomed and members of the Board take the recommendations back to their relevant organisations.

4. HEALTHWATCH READING ANNUAL REPORT 2022/23

Alice Kunjappy-Clifton submitted the 2022/23 Annual Report for Healthwatch Reading, which gave details of the work carried out by Healthwatch Reading in 2022/23.

The report explained who Healthwatch Reading were and set out highlights from the year, and from ten years of Healthwatch.

It also detailed how Healthwatch Reading had listened to the experiences of people in the community, including the following projects:

- Laying the foundations – making Healthwatch Reading visible
- Asylum seekers living in Reading
- Maternal mental health – carrying out a survey of the experiences of mental health care of mothers and birthing parents.

The report gave details of working in partnership, including:

- Working in the new Integrated Care System
- Working with BOB Integrated Care Board on transforming continuing healthcare
- Ensuring language is accessible and easy to understand

It gave details of how Healthwatch Reading had provided people with advice and information, giving an example in a case study.

The report also acknowledged the work of Healthwatch Reading's volunteers, gave details of its finances, and set out its priorities for 2023/24:

- GP access and quality – looking at people's understanding of how GP-led services were structured and self-care options.
- Maternal mental health – to see how the NHS England plan for improving experiences for mothers and birthing parents was rolled out and impacted locally and asking questions of decision makers if there were concerns from local people.
- Dentistry – focusing on young people, pregnant women, women who had had a baby in the last 12 months and people with learning disabilities.

The meeting discussed ongoing concerns around access to dentistry. Alice Kunjappy-Clifton reported that Healthwatch England had presented to the Health Select Committee regarding dentistry which had fed into the current national conversation and the changes happening in dentistry. She noted, however, that if individuals in Reading had problems with access to dentistry they could get in touch with Healthwatch Reading who would help them find solutions.

The meeting also discussed concerns regarding the provision of maternity services, the negative impacts on mental health caused by the care received during labour and childbirth and the problems experienced in receiving maternity services by those from ethnic minority communities (referred to in the CPAR report - see Minute 3 above), which in some areas could even result in above average numbers of maternal deaths. Examples were given of inadequate translation services, literature and awareness of cultural traditions and of the importance of providing maternity services in culturally appropriate ways. It was important that stereotypes, prejudices and assumptions were not made about people in "hard to reach/seldom heard" groups, so that these people were listened to and catered for both in the community and in hospital, with adequate translation and information available. It was noted that capacity of translators was limited

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and this was an area where Healthwatch might be able to work with Community Champions.

It was suggested that either the Health & Wellbeing Board or the Adult Social Care, Children's Services and Education (ACE) Committee should look further at the work being done and the ways to improve the offers regarding access to dentistry and the provision of maternity services, in particular the provision of maternity services in culturally-appropriate ways.

Resolved -

- (1) That the report be noted;
- (2) That either the Health and Wellbeing Board or the ACE Committee receive reports to future meetings on access to dentistry and the provision of maternity services.

5. HEALTH AND WELLBEING STRATEGY QUARTERLY IMPLEMENTATION PLAN NARRATIVE AND DASHBOARD REPORT

Amanda Nyeke submitted a report that provided an overview of the implementation of the Berkshire West Health and Wellbeing Strategy 2021-2030 in Reading and gave detailed information on performance and progress towards achieving local goals and actions set out in both the overarching strategy and the locally agreed implementation plans.

The Health and Wellbeing Implementation Plans and Dashboard Update was attached at Appendix A and contained detailed narrative updates on the actions agreed for each of the implementation plans and included the most recent update of key information in each of the five priority areas:

- Priority 1 - Reduce the differences in health between different groups of people;
- Priority 2 - Support individuals at high risk of bad health outcomes to live healthy lives.
- Priority 3 - Help families and children in early years;
- Priority 4 - Promote good mental health and wellbeing for all children and young people;
- Priority 5 - Promote good mental health and wellbeing for all adults.

The report set out details of updates to the data and performance indicators which had been included since the last report.

Resolved – That the report be noted.

6. AUTISM STRATEGY: YEAR 1 ACTION PLAN UPDATE

Sunny Mehmi submitted a report on the progress of the Year 1 (2022/23) All Age Autism Strategy Action Plan across Reading. The report had appended:

- Appendix 1 - All Age Autism Strategy for Reading 2022 to 2026
- Appendix 2 - All Age Autism Strategy Action Plan 2022/23
- Appendix 3 - The Equality Impact Assessment

The report stated that the Reading All Age Autism Strategy had been adopted by the ACE Committee on 18 January 2023 and reported to the Health and Wellbeing Board on 20

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January 2023 and that annual updates on the progress of the action plan would be presented to the Board.

The following seven priorities had been developed which had been used as the basis for the Strategy:

1. Improving awareness, understanding and acceptance of autism;
2. Improving support and access to early years, education and supporting positive transitions and preparing for adulthood;
3. Increasing employment, vocation and training opportunities for autistic people;
4. Better lives for autistic people – tackling health and care inequalities and building the right support in the community and supporting people in inpatient care;
5. Housing and supporting independent living;
6. Keeping safe and the criminal justice system;
7. Supporting families and carers of autistic people.

The Action Plan outlined the progress that partner agencies had made in delivering Year 1 of the Strategy, and the report listed some of the key developments in the seven priority areas.

Alice Kunjappy-Clifton said that it was good news that the Thames Valley Autism Alert card had been distributed to all police stations but noted that not many people knew about it yet and autism was still a hidden issue in some communities; more promotion of the card was needed and all partners could help in this. Sunny Mehmi suggested that a representative from Healthwatch Reading should be on the Autism Partnership Board.

The meeting discussed the challenge of addressing the problems of neurodiverse people in employment, such as by adapting work places and changing the culture of employers when dealing with neurodiverse interviewees and employees, perhaps by working with the economic development company, wider business community and partners. Sunny Mehmi noted that this was a priority within the strategy but that he needed to liaise with the Council's senior leadership group to identify who to involve in driving this agenda forward, as he had limited influence in this area.

Resolved –

- (1) That the report be noted;
- (2) That Sunny Mehmi liaise with Alice Kunjappy Clifton to arrange for a Healthwatch Reading representative on the Autism Partnership Board.

7. BERKSHIRE WEST PLACE-BASED PARTNERSHIP – BRIEFING

Sarah Webster submitted a report on revised arrangements for the Unified Executive to be a Place-Based Partnership for Berkshire West.

The report stated that, since January 2023, Unified Executive members, seeking to develop the Berkshire West Place-Based Partnership, had met twice as an extended Unified Executive Group for facilitated workshops and had met as a weekly 'Task and Finish Group' with senior representatives from all the organisations to progress the outputs from the workshops. The discussions had been productive and some specific

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outputs had been agreed covering the following areas, with a commitment to continual review and improvement as necessary:

- **Place Priority Programmes:** A proposed list of eight priority areas of high impact joint work had been scheduled into a work plan, set out in the report. A detailed programme plan would be submitted to a future Board meeting. It was acknowledged that the programmes of work were a starting point and over the next twelve months a longer-term strategic joint programme of work would be developed with clear links into the H&WB Strategy and the ICP Strategy.
- **Revised joint governance arrangements for the Place Partnership:** Improvements to the existing governance structure were proposed, rather than completely reshaping the current arrangements, to avoid destabilising the system. The improvements aimed to ensure an appropriate balance of focus at Local Authority and Place-based level on the needs of any given programme of work, and that all partners were appropriately engaged without it becoming burdensome (proposed governance arrangements were set out in a table in the report).
- **Partnership Commitments:** To set the tone and expectations for the partnership some commitments had been agreed in principle to work towards.
- **Unified Executive workplan:** The Unified Executive would ensure that the joint programme of work delivered improvements for residents and ensured good oversight and assurance over core priority programmes alongside other important partnership subjects.

The report noted that there was an important role for the three Health and Wellbeing Boards within the Place-Based Partnership arrangements in ensuring joint work at Place was delivering on behalf of the specific needs of the residents that each Board represented and contributing towards the delivery of the Joint Health and Wellbeing Strategy. The Boards also included VCSE and Healthwatch colleagues and therefore provided a vital role in ensuring their engagement in the Partnership work. It was therefore sought to strengthen the accountability link between the work of the Unified Executive and the H&WB Boards.

The Unified Executive (UE) would continue largely as it did currently, with a commitment from all partners to prioritise this meeting so that CEO (or equivalent) attendance was the norm. The UE sub-groups (Place-wide) would fall into one of these categories:

- a formal Programme Board - where 'Place' was agreed as the focal point for the programme of work – the Berkshire West Urgent & Emergency Care Programme Board and the Berkshire West Place Development & Enablers Programme Board;
- a less formal Place Professional Group - A single category of informal Place-level groups had been identified, noting generally the 'centre of gravity' for decision making in these subject areas were not at Place, but a need might arise for these groups to come together to discuss opportunities in common, make recommendations to formal Boards or committees, and/or take decisions within the remits of individual authority. An example might be a Berkshire West Primary Care Place Professionals Group

The 'Locality Integration Boards' and the 'Children and Young People's Partnership Boards' were key integrated forums within each Local Authority. All partners were currently reviewing attendance at these Boards to ensure an appropriate level of seniority to contribute towards decision making.

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It was proposed that each Place Priority Programme would be housed within the appropriate UE sub-group, noting the existing subject matter experts in attendance.

The Partnership Enablers Programme Board would work with the Chairs of each forum to support a review of their Terms of Reference, confirm appropriate representatives from each organisation, and confirm the reporting arrangements to and from the Unified Executive. It would also undertake further engagement with Elected Members, Healthwatch and the VCSE regarding the proposed model.

The report noted that the Unified Executive joint governance structure had previously been branded as the Berkshire West Integrated Care Partnership, but now that this terminology related to the BOB-wide ICP this was creating some confusion locally. The need for a clear shared identity as a Place-Based Partnership was acknowledged and the Partnership Place Enablers Programme Board would lead on development of a new brand identity for the Berkshire West Place.

Resolved – That the report be noted.

8. BOB ICB JOINT CAPITAL RESOURCE USE PLAN

Sarah Webster submitted a report presenting the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) Joint Capital Resource Use Plan, attached at Appendix 1, which set out the planned capital resource use for the ICB and its partner NHS and Foundation Trusts.

The report explained that the National Health Service Act 2006, as amended by the Health and Care Act 2022, set out that an ICB and its partner NHS trusts and foundation trusts had to, before the start of each financial year, prepare a plan setting out their planned capital resource use and had to publish that plan and give a copy to their Integrated Care Partnership, Health & Wellbeing Boards and NHS England. The ICB had to publish these plans before or soon after the start of the financial year and report against them within their annual report.

The Plan stated that the Vision for the Estates workstream across BOB ICB was to work collaboratively to provide an estate that facilitated the delivery of the BOB ICS long term plan, responding to and supporting the delivery of the aims of each of the service workstreams:

- Ensuring the ICS Estate could support the delivery of the Long-Term Plan service aims and objectives.
- Driving efficiency and reducing variation wherever feasible by using information related to utilisation, cost, and efficiency in relation to the healthcare estate in BOB ICS.
- Working across partners to maximise the use of good quality healthcare buildings, where required, and rationalising poor-quality premises.
- Improving the quality and provision of assets across the ICS.
- Ensuring a collaborative approach to use of assets across the full extent of the public estate to support the changing models and locations for delivery of care.

The Plan stated that the Royal Berkshire NHS Foundation Trust (RBFT) had recently been awarded seed funding via the New Hospitals Programme, but that a formal ministerial announcement was awaited relating to associated timeframes for progressing with the project, with the ambition likely for delivery in 2028-2030. It was reported at the

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meeting that the latest announcements on the New Hospitals Programme had indicated that the RBFT was not one of the front runners for the programme and it was not yet known when funding would be received.

Resolved: That the BOB ICB Joint Capital Resource Use Plan be noted.

9. COVID-19 PANDEMIC UPDATE

Martin White gave a presentation on the latest situation on the Covid-19 pandemic. The presentation slides had been included in the agenda papers.

The presentation provided information on the current situation, noting that on 5 May 2023, the Director General of the UN World Health Organisation had declared an end to Covid-19 as a public health emergency but that did not mean that the disease was no longer a global threat, and setting out details of the worldwide and UK situation. It also gave information on the current situation in England and Reading, details of the Vaccine Booster Programme for 2023 and of ongoing concerns, noting that there were an estimated 2 million cases of self-reported Long Covid in the UK (3.1% of the population).

Resolved – That the position be noted.

10. DATE OF NEXT MEETING

Resolved – That it be noted that next meeting would be held at 2.00pm on Friday, 6 October 2023.

(The meeting started at 2.00 pm and closed at 4.29 pm)