

## Notice of Meeting

### Health and Wellbeing Board

Councillor Dale Birch (Chairman)

Councillor Dr Gareth Barnard

Philip Bell, Involve

Alex Gild, Berkshire Healthcare NHS Foundation Trust

Jane Hogg, Frimley Health NHS Foundation Trust

Megan Horwood, Healthwatch

Sonia Johnson, Bracknell Forest Council

Dr Martin Kittel, East Berkshire CCG

Tessa Lindfield, Strategic Director of Public Health

Dr Jackie McGlynn, East Berkshire CCG

Rachel Morgan, Bracknell Forest Council

Melanie O'Rourke, Bracknell Forest Council

Charlotte Pavitt, Bracknell Forest Council Public Health

Dave Phillips, Bracknell Forest Safeguarding Board

Jonathan Picken, Bracknell Forest Safeguarding Board

David Radbourne, South Central Sub Region NHS

Heema Shukla, Bracknell Forest Council Public Health

Fiona Slevin-Brown, East Berkshire Clinical Commissioning Group

Rachel Stanton, Healthwatch

Fidelma Tinneney, Berkshire Care Association

Timothy Wheadon, Bracknell Forest Council

**Thursday 25 February 2021, 2.00 - 4.00 pm**

**Online Only**



### Agenda

Item	Description	Page
1.	<b>Apologies</b>	
	To receive apologies for absence and to note the attendance of any substitute members.	
i)	<b>Appointment of Vice-Chairman</b>	
2.	<b>Declarations of Interest</b>	
	<p>Members are asked to declare any disclosable pecuniary or affected interests in respect of any matter to be considered at this meeting.</p> <p>Any Member with a Disclosable Pecuniary Interest in a matter should withdraw from the meeting when the matter is under consideration and should notify the Democratic Services Officer in attendance that they are withdrawing as they have such an interest. If the Disclosable Pecuniary Interest is not entered on the register of Members interests the Monitoring Officer must be notified of the interest within 28 days.</p> <p>Any Member with an affected Interest in a matter must disclose the interest to the meeting. There is no requirement to withdraw from the meeting when the interest is only an affected interest, but the Monitoring Officer should be notified of the interest, if not previously notified of it, within 28 days of the meeting.</p>	

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3.	<b>Urgent Items of Business</b>	
	Any other items which the chairman decides are urgent.	
4.	<b>Minutes from Previous Meeting</b>	5 - 6
	To approve as a correct record the minutes of the meeting of the Board held on	
5.	<b>Matters Arising</b>	
6.	<b>Agency Updates</b>	
7.	<b>Public Participation</b>	
	<p><b>QUESTIONS:</b> If you would like to ask a question you must arrive 15 minutes before the start of the meeting to provide the clerk with your name, address and the question you would like to ask. Alternatively, you can provide this information by email to the clerk at <a href="mailto:committee@bracknell-forest.gov.uk">committee@bracknell-forest.gov.uk</a> at least two hours ahead of a meeting. The subject matter of questions must relate to an item on the Board's agenda for that particular meeting. The clerk can provide advice on this where requested.</p> <p><b>PETITIONS:</b> A petition must be submitted a minimum of seven working days before a Board meeting and must be given to the clerk by this deadline. There must be a minimum of ten signatures for a petition to be submitted to the Board. The subject matter of a petition must be about something that is within the Board's responsibilities. This includes matters of interest to the Board as a key stakeholder in improving the health and wellbeing of communities.</p> <p><b>Reporting:</b></p>	
8.	<b>Update on change in Children and Adolescent Mental Health Service (CAMHS) Tier 4 service model</b> <b>Reporting:</b> Louise Noble	7 - 12
9.	<b>Introduction to Healthwatch</b> <b>Reporting:</b> Megan Horwood	
10.	<b>COVID response update</b> <b>Reporting:</b> All to update	
11.	<b>Integrated Care System roadmap update</b> <b>Reporting:</b> Timothy Wheadon	
12.	<b>Review of the Health and Wellbeing Board Terms of Reference</b> <b>Reporting:</b> Councillor Dale Birch, Charlotte Pavitt	

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Published: 24 February 2021

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**HEALTH AND WELLBEING BOARD  
3 DECEMBER 2020  
3.00 - 3.30 PM**

**Present:**

Councillor Dale Birch, Bracknell Forest Council (Chairman)  
Philip Cook, Involve (Vice-Chairman)  
Councillor Dr Gareth Barnard, Bracknell Forest Council  
Jane Hogg, Frimley Health NHS Foundation Trust  
Sonia Johnson, Bracknell Forest Council  
Martin Kittel, East Berkshire CCG  
Tessa Lindfield, Strategic Director of Public Health  
Melanie O'Rourke, Bracknell Forest Council  
Charlotte Pavitt, Public Health  
Dave Phillips, Bracknell Forest Safeguarding Board  
Fiona Slevin-Brown, East Berkshire Clinical Commissioning Group  
Timothy Wheadon, Bracknell Forest Council

**Apologies for absence were received from:**

Alex Gild  
Jonathan Picken  
Mark Sanders  
Fidelma Tinneney

**53. Declarations of Interest**

There were no declarations of interest.

**54. Urgent Items of Business**

There were no Urgent Items of Business.

**55. Minutes from Previous Meeting**

The minutes of the last meeting held on 10 September 2020 were approved as a correct record.

**56. Matters Arising**

There were no matters arising from the previous minutes.

**57. Public Participation**

There were no items for public participation.

**58. Agency Updates**

**Jane Hogg, Frimley Healthcare Foundation Trust** advised that the Trust had been successful in a bid to the national NHS Charities Together fund, including around £100k to support the community and voluntary sector in Bracknell.

**59. Health and Wellbeing Board Workshop output**

Fiona Slevin-Brown, Managing Director for Bracknell Forest reported on the output of a recent Health and Wellbeing workshop which had arisen from the last meeting in order to consider the current JSNA and Health and Wellbeing priorities in light of COVID.

The workshop, held in October, had come up with a shortlist of areas of focus with nuances for particular population groups.

The workshop had highlighted children and young people and mental health as two key areas of focus, and partners were discussing a third priority. Obesity and loneliness and isolation had both been proposed as potential priorities and there was support for both.

In response to questions, the following points were noted:

- Partners expressed their support for obesity and loneliness and isolation respectively as the third priority.
- It was noted that Bracknell Forest's Overview and Scrutiny work included a programme on loneliness and isolation, and the Board could support any scrutiny work in this regard.
- Partners were reminded of the interconnectivity of loneliness and obesity.

**60. Integrated Care System Roadmap**

Timothy Wheadon presented on the ICS Roadmap. The Frimley ICS had been recognised nationally as a successful ICS, due to the strong relationships between partner organisations.

Partners had reviewed the performance of the ICS, and had developed a 6 point strategy of priorities which were likely to be reflected across partners' own plans including Starting Well and Focussing on Community.

Arising from the review, partners had recognised the importance of system-wide working, collaboration, strategic commissioning, a shared financial framework, governance, and a Place-based approach to working. It was noted that a Place-based approach was easier to achieve in small Unitary Authorities.

It was suggested that the Health and Wellbeing Board could be a key link between system and local practices. Councillor Birch asked all Board members to feed their comments on the Board practices and connection to the ICS to himself.

**CHAIRMAN**



### Update on change in Children and Adolescent Mental Health Service (CAMHS) Tier 4 service model

#### Purpose of paper/action required

This paper provides a briefing on the change to the commissioned service model for the CAMHS Tier 4 service provided by Berkshire Healthcare.

An outline of the new service is provided with the timescale for implementation and impact on children, young people, and families.

The purpose of the paper is for discussion and to hear views, thoughts, and positive suggestions about how we can improve the ways that we work across multi-agencies to support this cohort of young people and their families.

#### Background

Willow House commenced operation as a nine bedded CAMHS Tier 4 General Adolescent Unit (GAU) in August 2015 following a review of service provision at the then Berkshire Adolescent Unit (BAU) by NHS Specialist Commissioning.

The fabric and layout of this building is no longer suitable, and we are not able to develop the building to meet current standards for inpatient provision so we have, for some time, been working with NHS England on plans to develop a new facility at Prospect Park Hospital in Reading. However, learning from the national New Models of Care programme and a review of bed use and needs across the country, has indicated that there is not a need for more general adolescent beds in the South East region and our Commissioners have changed their focus to develop and deliver a new enhanced community care model for the majority of children and young people who are currently being admitted to this type of inpatient bed, in line with the ambitions set out in the NHS Long Term Plan.

Following this change of approach, the build at Prospect Park Hospital will no longer go ahead and Willow House will close as an inpatient unit at the end of April 2021. However, working closely with NHSE and partners in the Thames Valley CAMHS Tier 4 Provider Collaborative, as well as our clinical staff, patients and their families, we have developed a new 'out of hospital' clinical model that will ultimately ensure better care and outcomes for our children and young people in Berkshire. There are precedents already set for this in other parts of the country, which we are learning from, that are showing excellent results.

NHSE/I is currently transferring responsibility for commissioning of CAMHS Tier 4 services to local Provider Collaboratives under the national New Care Models programme. We are partners in the Thames Valley Tier 4 CAMHS Provider Collaborative which is led by Oxford Health NHS Foundation Trust (OHFT). Under this arrangement, OHFT will be taking over responsibility for commissioning CAMHS Tier 4 services for the Thames Valley from NHSE/I.

OHFT have confirmed their commitment to commission the new service and NHSE/I have confirmed additional funding for 2021/22 to enable smooth transition.



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Willow House will close to inpatients on 30 April 2021, with transition to the new service starting from March 2021.

### How are we considering service user views?

We have spoken to some of our service users about their experiences of crisis and Tier 4 care, including asking them what they felt would have been better (note that comments are not specific to Willow House, but experiences in general):

- The unit was too far away from where we live
- (the unit was a) poorly maintained, crumbling old house
- The unit felt like a lock up place for over medicated teenagers

### What would have been better?

- Intensive community support - therapy, regular check in phone calls to get advice/support
- Support from the specialist staff from the inpatient unit before becoming an inpatient- e.g. day patient/ intensive daily support offered when needed
- Home visits/other support within the home setting – mental health carers supporting in the home
- Specialist education provision to support young people with mental health needs – small classes, safe space, quiet space, trained mental health professionals working alongside teaching staff- something like Willow House hospital school available in the community
- Community programme combining therapy, education, peer support all in one place
- Community provision at weekends/evenings
- A drop-in centre that could be open to people who have been into an inpatient environment several times
- Virtual/ telephone support available
- Short term stays in a local safe house

We have taken these views into consideration, both in the development of this new service and in the programme of work to develop mental health crisis services for children and young people as per requirements in the NHS Long Term Plan. We are currently developing a programme of service user engagement and on-going involvement with the development, evaluation, and monitoring of the new service.

### New service model

The new service will still meet the current specification for Children and Adolescent Mental Health Services Tier 4 (CAMHS Tier 4): General Adolescent Services including specialist eating disorders services (service specification no: 1723). It will provide assessment, formulation and treatment for young people under the age of 18 who have developed complex and persistent emotional and psychological difficulties that require intensive interventions above the level that can typically be provided by Tier 3 CAMHS and which would currently be provided through inpatient care. The service will provide a structured and comprehensive therapy programme, education, and wide-ranging activities that guide the development and recovery of the young person in an holistic way.

Treatment will be delivered through day care and intensive home treatment programmes that will be offered over extended hours 7 days per week, 365 days per year. Clinical care will be in line with relevant NICE guidelines and part of an integrated care pathway which includes 24/365 crisis/home treatment services (currently in development), all Tier 3 CAMH services, specialist neurodiversity services as well as adult mental health, acute physical healthcare, social care, education and voluntary sector provision. It will



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also function as an integrated partner in the Thames Valley Tier 4 Provider Collaborative with learning utilised to develop community-based models across the collaborative.

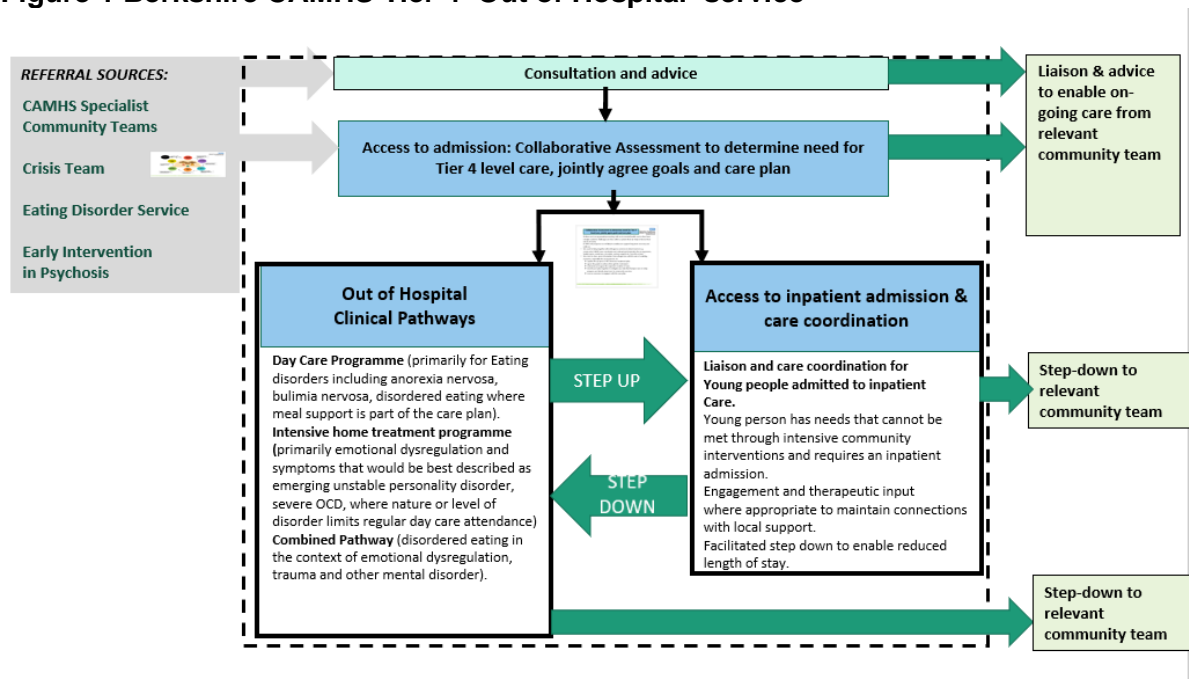
The existing education provision will continue, and we are working with Wokingham Borough Council to review/develop this provision as the new service is embedded.

Figure 1 below gives a pictorial description of the proposed clinical model, which has four core components:

1. Liaison and consultation to Tier 3/crisis CAMHS to prevent escalation of need to Tier 4 level.
2. Access Assessment to Tier 4 services, working in partnership with Tier 3 CAMHS and relevant system partners to build on existing assessments and information and enable shared agreement and responsibility for care.
3. Intensive day care, community and home treatment care pathways based on NICE guidelines/clinical evidence and aligned with Tier 3 and inpatient pathways, delivered via individual, group and digital modalities.
4. Admission coordination and centralised bed-finding, liaison, and supported step down from inpatient care to reduce length of stay where a period of inpatient care is needed.

Acceptance and exclusion criteria for the service will be as per the national service specification.

**Figure 1 Berkshire CAMHS Tier 4 'Out of Hospital' service**



### What does this mean for Berkshire young people?

Provision of services closer to home and increased engagement of community systems and support in acute care will bring improvements in patient experience and long-term outcomes.

Willow House is a General Adolescent Unit (GAU) so young people needing more specialist care currently go to another unit such as an Eating Disorders Unit (EDU), Psychiatric Intensive Care Unit (PICU), Secure Unit etc. In 2020, 56 Berkshire young people needed an admission to Tier 4 care. 50% (28) of these were admitted to Willow House, but the other 50% to another unit. Most went to other Units in the Thames



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Valley Provider Collaborative e.g. Huntercombe near Maidenhead or Highfield in Oxford. But some were admitted to units that are outside of the Thames Valley e.g. Hertfordshire, London, and Kent.

For Bracknell Forrest specifically, 14 young people were admitted to Tier 4 inpatient units in 2020; 8 of these were to Willow House, 4 to other units in the Thames Valley and 2 to specialist units out of area.

The new clinical service has been designed to meet the needs of young people who would currently be admitted to a GAU or an EDU. It will have capacity to support 16 young people at any one point in time.

Once the new service model is fully operational, we will be able to provide appropriate care and treatment for approximately 70% of young people needing Tier 4 level services. In other words, the new service will support more young people than are currently able to be admitted to Willow House.

The biggest benefit will be for young people needing intensive treatment for an eating disorder, which is the cohort who are most often admitted to units out of area.

Learning from other areas, as well as the evidence informing the principles of new care models for Tier 4 CAMHS, suggests that earlier access to day care and home treatment service would improve family and wider system resilience and support positive risk management in these young people. The service has therefore been modelled on the basis that once embedded, we will receive and accept a higher number of referrals. We believe that as we move into Year 2 (2022/23) we will also be able to prevent more admissions, including some to PICU and that we will reduce the length of stay for young people who do need an admission.

### **What if a young person does need inpatient care?**

There are a number of units across the Thames Valley region which provide inpatient care, including some which are able to treat young people who require specialist inpatient eating disorder support or psychiatric intensive care, something we were not commissioned to offer at Willow House. National work across the network of Provider Collaboratives to realign the commissioning of beds has increased the number of General Adolescent beds that are available to the Thames Valley and programmes are underway to develop a new PICU unit and to build a specialist LD/ASD unit, something which is currently a gap in the South East region. Where a young person does need a period of inpatient care, the Berkshire service will retain responsibility for working with the Provider Collaborative Single Point of Access (SPA) to access an appropriate admission and will work closely with the inpatient team throughout any admission, to ensure that young people remain connected with their home systems and that length of stay is minimised.

There will be a need for additional beds in year 1 (2021/22) as we transition from the inpatient to 'Out of Hospital' model. Double running funding has been obtained from NHSEI to cover this period. From April 2022 we anticipate that the reduction in number of admissions to GAU and EDU combined will exceed the nine beds lost from Willow House.

The new service will therefore fully replace the capacity lost through the closure of Willow House and further reduce the number of inpatient admissions, keeping pace with the predicted rise in demand.



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Sonia Johnson  
Interim Director of Children's Services  
Bracknell Forest Council  
Berkshire

**11/01/2021**

## **CAMHS Tier 4 in Berkshire**

**Dear Sonia**

Following our recent conversation, I wanted to formally write to you about the changes to the commissioning approach for Berkshire's Children and Adolescent Mental Health Services (CAMHS) Tier 4.

We currently provide nine in-patient beds for CAMHS Tier 4 at our Willow House unit in Wokingham. We had planned to build and develop a brand new facility at Prospect Park Hospital in Reading, however our commissioners (currently NHS England), want to deliver a new enhanced community care model for the majority of children and young people who are currently being admitted to inpatient units, in line with the ambitions set out in the NHS Long Term Plan.

With this change of approach, the build at Prospect Park Hospital will no longer go ahead and Willow House will close at the end of April 2020.

Instead, we will now work closely with our commissioners, the new Provider Collaborative Network, Clinical Commissioning Groups, as well as staff, patients and their families, to create and deliver a new 'out of hospital' clinical model that will ultimately ensure better care and outcomes for our children and young people in Berkshire. There are precedents already set for this in other parts of the country, which are showing excellent results.



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Our commissioners recognise there will always be a need for specialist, high-level inpatient care for a small number of young people and there are a number of units across the Thames Valley region which can provide these - including a large CAMHS unit near Maidenhead. This unit is also able to treat young people who require specialist inpatient eating disorder support or psychiatric intensive care, something we were not commissioned to offer at Willow House.

Our commissioners are also currently working across the network of Provider Collaboratives on a demand and capacity review to make sure there is the correct configuration of CAMHS Tier 4 services both now and in the future across the South East.

We hope you will recognise the benefits this transformation will bring, and we will continue to keep you fully informed about the development and implementation of this new model over the coming weeks and months.

We will also be pleased to present this new approach to your Health and Wellbeing Board so please do let us know when it would be convenient to do this.

I appreciate the additional pressures that you and your colleagues are already under dealing with Covid-19, and recognise that the timing of these changes may add to this, but I would like to thank you for your continued support and please don't hesitate to get in touch if you have any questions or would like any further information.

Kind regards

*Karen Cridland.*

**Karen Cridland**

Director CYPF and BEDS



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