

**HEALTH AND WELLBEING BOARD  
25 FEBRUARY 2021  
2.00 - 4.00 PM**



**Present:**

Councillor Dale Birch (Chairman)  
Fiona Slevin-Brown, East Berkshire Clinical Commissioning Group (Vice-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  
Andrew Hunter  
Dr Martin Kittel, East Berkshire CCG  
Melanie O'Rourke, Bracknell Forest Council  
Charlotte Pavitt, Bracknell Forest Council Public Health  
Dave Phillips, Bracknell Forest Safeguarding Board  
Heema Shukla, Bracknell Forest Council Public Health  
Rachel Stanton, Healthwatch  
Timothy Wheadon, Bracknell Forest Council

**Apologies for absence were received from:**

Sonia Johnson  
Rachel Morgan  
Fidelma Tinneney

**Also Present:**

**61. Appointment of Vice-Chairman**

**RESOLVED** that Fiona Slevin-Brown, East Berkshire CCG be appointed Vice-Chairman of the Health and Wellbeing Board for the remainder of the municipal year 2020/21.

**62. Declarations of Interest**

There were no declarations of interest.

**63. Urgent Items of Business**

There were no urgent items of business.

**64. Minutes from Previous Meeting**

The minutes from the meeting held on 3 December 2020 were approved as a correct record.

**65. Matters Arising**

There were no matters arising from the minutes.

66. **Agency Updates**

There were no agency updates.

67. **Public Participation**

There were no items for Public Participation.

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

Louise Noble updated partners on planned changes to the CAMHS Tier 4 provision in East Berkshire.

The existing 9 bed unit at Willow House in Wokingham had been in place since August 2015, however the building had not been designed for adolescent use and was increasingly unsuitable for adolescent CAMHS provision. A new unit at Prospect Park had been proposed to provide a 9 bed facility for CAMHS, however this plan had changed in light of NHS England's change of approach to address the national deficit in psychiatric intensive care and secure beds.

The current proposal was to develop an out of hospital service to support the Willow House patients in their homes from 30 April when the unit was due to close. A new clinical service would provide home-based support for CAMHS Tier 4 and Eating Disorder patients, with therapeutic provision from 8am to 8pm, and a crisis provision overnight. The new model would support up to 16 patients across Berkshire and would include specialist education provision. If young people could not be supported in their home setting, they could be cared for at Huntercombe unit in Maidenhead.

The protocols were being developed in collaboration with the existing Tier 4 cohort to take their thoughts into consideration.

Louise noted the opportunities available to CAMHS to develop collaborative working relationships with other partners to support complex young people.

It was noted that Lincolnshire had already implemented a similar model of Tier 4 provision, and the clinical evidence had shown that young people had recovered better if they had a shorter hospital admission period. It was noted that young people often learn unhelpful behaviours once admitted to an in-patient service.

The collaborative approach to the new model was stressed to all partners.

In response to questions, the following points were noted:

- The lasting impact of COVID and lockdown on demand for CAMHS service was not yet clear, particularly at Tier 4. However, it was noted that there had been a significant increase in demand at lower levels, and in Eating Disorders and ARFIDs during the COVID period.
- The service modelling for the first year had been based on the assumption that young people would have long stays, however it was expected that the length of stay would reduce over time.
- The model had been built on feedback from local young people in Tier 4 and crisis service.
- It was noted that mental health would be a key area of focus for the new Health and Wellbeing Strategy.

- Partners stressed the importance of ensuring that preventative and early help work was sufficient to stop young people reaching Tier 4 and crisis care wherever possible.
- There was no research available on the impact of home care on siblings and families of tier 4 young people. Partners expressed concern that caring for these young people at home would put substantial stress on the household.
- There was no specific expectation on primary care for Tier 4 provision or Eating Disorder provision.

#### 69. **Introduction to Healthwatch**

Rachel Stanton and Megan Horwood introduced the new Healthwatch service for Bracknell Forest as part of the new East Berkshire contract with Help and Care.

The new service was in the early stages of development, and the focus was currently on appointing the right staff, communications and building connections with local partners. Partners were asked to consider how the new Healthwatch officers could be best linked into partnership work.

It was noted that Healthwatch were planning a survey to understand the experience of local residents, which would inform a prioritisation project for the service.

Board members welcomed Rachel and Megan to Bracknell Forest and provided various areas for contact. It was stressed that the Board should be kept up to date with the contents and outcome of the survey.

#### 70. **COVID response update**

Charlotte Pavitt updated partners on the latest COVID data.

The rate of infection had decreased to 89.8 per 100,000, which was slightly higher than the South East average but had decreased significantly. The positivity rate had also decreased to 4.3%, which indicated that community transmission was reducing locally. The number of tests had also reduced, which was to be expected with fewer symptomatic patients.

All Berkshire Local Authorities had rates under 100 per 100,000 except Slough.

In Bracknell Forest, the highest infection rates were in the 20-24 and 30-34 age brackets, and it was thought that this could be attributed to a large outbreak at the Royal Military Academy Sandhurst. The rates in both age groups were now reducing.

Hospital admissions across the Frimley Health Foundation Trust had decreased over time. It was noted that critical care units were still over capacity with all care, rather than just COVID patients.

There had been a sustained increase in demand for mental health services.

The local outbreak framework was being updated, and local management plan would be updated on a Berkshire level by the shared public health team.

From 8 March, households and support bubbles with children would be asked to undertake twice weekly testing, with tests accessed through the Community Collect programme.

The vaccination programme continued to be carried out successfully, and 180,000 people had been vaccinated across the Integrated Care System footprint. The penetration into the top 4 tiers had been 86.5%, compared to a government target of 75%. 87% of care home residents had been vaccinated. Work continued on the next phases of the vaccine programme, and it was hoped that more people would be able to be vaccinated more quickly.

Board members congratulated the vaccination programme on its success, and on the fact that all needs had been catered for at vaccination sites.

**71. Integrated Care System roadmap update**

Jane Hogg updated members on the Integrated Care System roadmap.

The roadmap covered 5 key areas of change, including Place-based working which was being led by Timothy Wheadon and the Local Authorities. Other areas of work included developing the ICS workstream and procurement processes, strengthening provider collaboration, financial framework, and governance.

Some work had been suspended to allow for vaccination and NHS capacity for the second wave, and work was due to restart from 1 April.

If the new plans were agreed by September 2021, the new model would be implemented in shadow form from April 2022 with an assumption that the legislation would be as expected.

**72. Review of the Health and Wellbeing Board Terms of Reference**

Councillor Birch reminded partners of the existing Health and Wellbeing terms of reference and Board functions, and asked partners to consider any areas for development or inclusion.

It was noted that the current Terms of Reference did not reference COVID recovery, and did not link to other relevant plans like the Council's Local Plan.

Board members were asked to consider the following points for discussion and feedback any inputs via email:

- What has worked well?
- What needs improving?
- What is not working which needs to stop?
- Is there good practice we could introduce?

**CHAIRMAN**