

## HEALTHIER READING PARTNERSHIP BOARD MINUTES - 5 OCTOBER 2010

### Present:

Bev Searle (Chair)	NHS Berkshire West
Councillor Benson	Reading Borough Council
Councillor Ralph	Reading Borough Council
Sarah Gee	Reading Borough Council
Anne Laing	Reading Voluntary Action
Melani Oliver	Reading Borough Council
Sam Otorepec	NHS Berkshire West
Nina Sethi	Reading LINK
Grant Thornton	Reading Borough Council
Chris Turner	Reading Citizens' Advice Bureau

### Also in Attendance:

Debra Cole	Reading Borough Council
Janette Searle	Reading Borough Council
Nicky Simpson	Reading Borough Council

### Apologies:

Councillor T Harris	Reading Borough Council
Councillor Lockett	Reading Borough Council
Councillor Orton	Reading Borough Council
Kim Wilkins	NHS Berkshire West

## 1. MINUTES

The Minutes of the meeting held on 8 July 2010 were confirmed as a correct record and signed by the Chair.

## 2. MATTERS ARISING

Further to Minute 3 (2) of the last meeting, Sam Otorepec reported that she had circulated information on the Choose Well national campaign.

Further to Minute 3 (3) of the last meeting, Sam Otorepec reported that the Sexual Health Team were investigating the situation with regard to HIV testing. She said that it was true that the one-hour "Quicktest" was not currently offered in Berkshire, but there had been discussions about the efficacy of the test, and it was possible that pilot funding around the Quicktest would be available later in the year, so the Public Health team was doing further research on this matter.

Further to Minute 3 (4) of the last meeting, Sam Otorepec reported that she had spoken to Nick Buchanan, Commissioning Manager for Mental Health, who had said that there had been an extensive public relations process around Talking Therapies in the previous year and that, due to the high numbers of referrals already received, no formal launch was currently planned, as staff were working at full capacity dealing with the existing referrals. The meeting noted that, whilst the programme was welcome, there had been a gap in this area for a long time, and it was important that the IAPT (Improving Access to Psychological Therapies) teams were not so swamped that those in need were missed. The meeting discussed the importance of

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coordinating partnership working to provide psychological support to people with long term health problems, in order to free up the IAPT teams to better target their resources, such as Talking Therapies, and maximise their benefit. Areas for investigation were suggested such as using the Children's Action Teams for facilitation, more involvement of the voluntary sector, and also the importance of providing advice to people coming out of Talking Therapies about what support was then available. It was suggested that discussions be held with Judith Williams and Nick Buchanan and then a task and finish group be set up to look at opportunities and develop recommendations.

Further to Minute 7 of the last meeting, Councillor Ralph said that, although as a result of funding cuts the core objectives for the Directorate of Education and Children's Services (DECS) had had to be revised and reduced from thirteen to eight as he had reported, he had been assured by officers that those objectives not in the key eight had not been deleted and progress was still being made in those areas. The Children & Young People's Plan still remained the same, although this might need to be reviewed once the results of the forthcoming Spending Review were known.

Further to Minute 8 of the last meeting, regarding alcohol harm reduction, Bev Searle reported that she was chasing the outstanding information requested at the last meeting, and that the providers had been asked to secure two detox beds at Prospect Park Hospital.

Further to Minute 9 of the last meeting, Sam Otorepec said that she had circulated information on the existing Practice Based Commissioning (PBC) Consortia and that three PBC Leads had agreed to come to the January 2011 HRP meeting.

Further to Minute 10 (2) of the last meeting, Sam Otorepec reported that she was making contact with Sally Swift, Head of Communications at the Council, regarding liaising with the NHS Berkshire West Communications Team. Bev Searle reported that there was to be a national Self Care week on 8-14 November 2010, which could provide partners with opportunities to publicise what they were doing - the PCT were planning to use it to advertise Choose Well further.

### **AGREED:**

- (1) That the position be noted;
- (2) That Sam Otorepec talk to Judith Williams and Nick Buchanan and then set up a task and finish group to look at opportunities and develop recommendations for coordinating partnership working to provide psychological support to people with long term health problems, in order to free up the IAPT teams to better target their resources;
- (3) That Bev Searle chase the outstanding information on alcohol harm reduction requested at the last meeting;
- (4) That partners consider using the national Self Care week on 8-14 November 2010 to publicise their activities.

### 3. CULTURAL PARTNERSHIP BOARD REPRESENTATIVE

Bev Searle, Director of Partnerships and Joint Commissioning, NHS Berkshire West, explained that, in August 2010, she had been invited to nominate a representative from the Healthier Reading Partnership to the Cultural Partnership Board for Reading, an initiative set up to unite stakeholders from across sectors to support the delivery of the ambitious aims of the Cultural Strategy for Reading.

Due to the timescales involved, with the first meeting of the Cultural Partnership Board due to be held on 13 September 2010, members of the Board had been consulted about the nomination by email and it had been agreed that Kim Wilkins, Locality Public Health Lead - Reading, NHS Berkshire West, would be the HRP Board's representative, subject to formal ratification at the HRP Board's next meeting.

Bev said that Kim unexpectedly had had to send her apologies for tonight's HRP Board meeting, but would provide some information on the Cultural Partnership Board for circulation and give an update at the next meeting.

#### AGREED:

- (1) That Kim Wilkins be confirmed as the HRP Board's representative on the Cultural Partnership Board;
- (2) That Kim Wilkins provide some information on the Cultural Partnership Board for circulation and give an update at the next meeting.

### 4. EQUITY & EXCELLENCE - LIBERATING THE NHS

Bev Searle, Director of Partnerships & Joint Commissioning, NHS Berkshire West, gave a presentation on the proposals for healthcare reform in the recent White Paper "Equity & Excellence - Liberating the NHS". Copies of the presentation slides had been circulated with the agenda.

Some of the key proposals in the White Paper and points highlighted in the presentation were:

- Putting patients first and extending patient choice over providers and treatment
- Replacing LINKs with HealthWatch
- Reducing inequalities and improving health outcomes, focusing on outcomes rather than targets and using NICE (National Institute of Clinical Excellence) to inform commissioning
- Establishing an independent national NHS Commissioning Board by April 2011 to allocate resources and commission primary care, and appointment of National and Regional Directors of Commissioning and Provider
- All NHS Trusts to become Foundation Trusts by 2013 and to be given greater freedoms
- All GPs to be part of consortia and to be responsible for local commissioning (some consortia to be selected to be early adopters to help inform the shape of future systems)
- The abolition of Strategic Health Authorities in 2012 and Primary Care Trusts in 2013

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- The creation of a new Public Health Service and the transfer of the responsibility and a ring-fenced budget for public health to local authorities, including the responsibility to lead on Joint Strategic Needs Assessments and local health improvement and prevention activity
- Monitor to become the economic regulator of providers and promote competition
- The Care Quality Commission to be the inspectorate for Health and Social Care

Bev gave details of some of the potential risks involved in the proposals and the processes being put in place to mitigate them. She said that NHS Berkshire West had not had budget cuts, but had flat costs and increasing demand, so needed to find around £60m savings over three years. She gave details of the existing and some possible future partnership structures, noting that partnership structures would need to be reviewed as it would become increasingly difficult for the PCT to keep doing things three times, once for each of the local authority areas covered. For example, there was some interest in having a common Health & Wellbeing Board across the three areas, but it was not yet clear if this would work.

Bev said that a further White Paper on Public Health was expected in December 2010. She said that, in Berkshire, relationships with the Practice Based Commissioners (PBCs) were good and they were working with the PCTs on plans for the transition to PBC. In Reading, there were currently four GP consortia, and this was likely to change to two consortia, but these were unlikely to be co-terminous with Local Authority boundaries as there was an area around Theale and Pangbourne which had historically been included in a Reading consortium. It was expected that the two GP consortia in the Berkshire West area likely to be nominated as early adopters would probably be in the Wokingham area, as the consortia there had been established for longer.

She also reported that Charles Waddicor had been appointed on secondment as the Regional Director of Commissioning at the Strategic Health Authority, and Helen McKenzie was acting up as Interim Chief Executive at NHS Berkshire West.

Bev said that work was ongoing with GPs in engaging them in clinical issues and in creating a development plan to prepare them for their commissioning role. The meeting noted that a need for increased education of GPs in their clinical role about various issues had also been identified in a number of separate strategies, eg alcohol harm reduction (referred to at the last meeting - Minute 8 refers), and there might be an opportunity to achieve joined-up multi-disciplinary training on such issues in the development of PBC.

Grant Thornton said that he would circulate a copy of a recent Local Government Information Unit briefing on the British Medical Association's response to the White Paper.

### AGREED:

- (1) That the position be noted;
- (2) That Grant Thornton circulate a copy of the recent Local Government Information Unit briefing on the British Medical Association's response to the White Paper.

## 5. HEALTH & WELLBEING ACTION PLAN

Further to Minute 7 of the last meeting, Bev Searle, Director of Partnerships and Joint Commissioning, NHS Berkshire West, submitted the latest draft of the Reading Health & Wellbeing Action Plan.

It was suggested that the Priority 4 section of the plan regarding children and young people should be updated by adding in appropriate objectives from the results of the Children's Health Scrutiny (see Minute 11 below), and that the plan should be used to inform the Board's forward plan.

Nina Sethi reported that this would be her last meeting of the HRP Board, as she was stepping down from the LINK Board and her replacement would be elected in November 2010, but said that she was willing to continue to be involved in working on the BME part of the Priority 1 section of the plan on reducing health inequalities, and to be used as a resource by the Board as needed.

### AGREED:

- (1) That Sam Otorespec circulate by email the latest draft of the Reading Health & Wellbeing Action Plan to all members of the Board for comments;
- (2) That the Management Group look at the recommendations from the Children's Health Scrutiny and add in appropriate objectives to the Action Plan;
- (3) That the Management Group use the updated Action Plan to inform the forward plan for the HRP Board meetings;
- (4) That Nina Sethi be thanked for her hard work for the Partnership and for her offer of continued availability to the Board for advice.

## 6. DRAFT SUSTAINABLE COMMUNITY STRATEGY

Grant Thornton, Head of Community Planning, submitted a report giving an update on the development by the Local Strategic Partnership (LSP) of the new Vision and Sustainable Community Strategy (SCS) for Reading, to be published by April 2011 when the current strategy expired, and seeking input from the HRP Board.

The report had appended the first draft of the new SCS (Appendix A), an outline of the proposed mechanisms for taking forward the fairly raw current draft to a version suitable for broader public consultation, including a request for initial feedback from thematic partnerships by 22 October 2010 on key areas and principles (Appendix B), and a draft list of key "levers for change" around which broader consultation could crystallise (Appendix C).

The report stated that the LSP Board would approve a draft for further consultation at its meeting on 3 November 2010 and wider public consultation would be carried out between 8 November and 17 December 2010, including the LSP Forum on 16 November 2010. The SCS would then need to go through sign-off processes in each of

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the main stakeholder organisations in time for publication and implementation from April 2011.

It was reported that the latest draft of the Local Transport Plan for Reading (2011-2026) was also out for consultation and available on the LSP website.

### AGREED:

- (1) That any comments on the draft Sustainable Community Strategy be submitted to Grant Thornton, for consideration by the HRP Management Group and submission by the 22 October 2010 deadline;
- (2) That it be noted that the LSP Board would approve a draft for further consultation at its meeting on 3 November 2010.

### 7. JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Further to Minute 5 of the last meeting, Bev Searle, Director of Partnerships & Joint Commissioning, NHS Berkshire West, updated the Board on the development of the Joint Strategic Needs Assessment (JSNA).

She said that the JSNA chapters on Dementia, Diabetes, Chronic Obstructive Pulmonary Disease, Cardio Vascular Disease and Stroke were about to be uploaded to the Local Strategic Partnership (LSP) website for comments and feedback and for other groups such as the Older People's Partnership to consider them and check that they described their needs. Work was continuing on the chapters on Children & Young People and Mental Health & Wellbeing and on refreshing the current core data sets. Final details of the JSNA publication had yet to be decided.

**AGREED:** That the progress on the JSNA process to date be noted.

### 8. SOUTH READING SURVEY - VOLUNTARY & COMMUNITY SECTOR

Anne Laing, Partnership Development Manager, Reading Voluntary Action (RVA), submitted a table showing the results of a survey of Voluntary and Community Sector organisations working in South Reading which had recently been carried out.

She explained that the information had been gathered on the basis of sharing between agencies to support cross-sector working, initially in health, and it was hoped that this would be a useful tool for workers in the area and for the HRP and others to use the information to help fulfil their strategic targets.

The meeting discussed the survey, noting that it provided two useful strands of information - a directory giving information on services provided and a list of existing and potential partners to work with and from whom work might be commissioned in the future. The HRP would also need to consider how the work contained in the list could contribute to the HRP Action Plan.

It was noted that the information was useful but it would be important for it to be shared appropriately and kept up to date to retain its usefulness. It also needed to be reconfigured for each audience, and information on the capacity of the services listed would be helpful. It was noted that resource directories for adult and

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children's social care had been developed and it was suggested that the Council needed to carry out a corporate review of information and advice services and develop different resource directories to capture information on services available, whilst ensuring that there was not duplication of effort.

It was noted that the information would also be useful for Councillors, particularly those involved in South Reading.

### AGREED:

That the Management Group consider the two strands of information provided by the survey and come up with proposals for using, circulating and maintaining the information to make the best use of both strands.

### 9. PROGRESS REPORT ON DELIVERY OF "A BIG VOICE IN OUR LIVES" - THE READING LEARNING DISABILITY PARTNERSHIP'S STRATEGY 2009/14

Janette Searle, Partnership & Service Development Manager and Debra Cole, Learning Disability Partnership Manager, submitted a report giving an update on progress against the Reading Learning Disability Partnership's Strategy 2009/14.

The report explained that the Reading Learning Disability Partnership (LDP) was formally accountable to the Local Strategic Partnership via the Healthier Reading Partnership, with parallel reporting lines into the two commissioning bodies represented on the LDP, the Council and NHS Berkshire West.

The LDP had published its first strategy "A Big Voice in Our Lives" in June 2009 (an easy-read summary was attached at Appendix 1), which had localised the priorities identified in the national learning disability strategy "Valuing People Now". In March 2010, the LDP had published an annual report as required by the national Valuing People Team (an easy-read summary was attached at Appendix 2). The report supplemented the annual report by offering further commentary on progress in relation to the most significant local priorities for Reading, of housing, health, employment and transport.

It was reported that, although most of the Reading GP surgeries had now signed up for training for GPs and nurses on learning disability health checks, and at the time of the appointment of the Health Action Plan coordinator there had been an increase in the number of surgeries offering health checks, progress had subsequently stalled and the number of actual health checks completed was disappointing, with a wide variation in how proactive GP surgeries were in following up health checks. Bev Searle said that the development of learning disability health checks was on the Learning Disability Commissioning Group's Action Plan and so any problems in this area should be reported to the Group via Arthi Squires. The Clinical Executive Committee would be receiving a report on learning disability in November 2010.

It was queried whether all the people with learning disabilities who were parents had been identified to the Young Carer leads, in order to ensure that appropriate support was given to any children acting as carers.

### AGREED:

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- (1) That the progress to date in delivering the Reading Learning Disability Partnership's Strategy 2009/14 be noted;
- (2) That Debra Cole tell Sam Otorepec which GP practices were not following up on learning disability health checks so that Sam could liaise with Arthi Squires regarding taking this forward;
- (3) That Janette Searle and Debra Cole check that all parents with learning disabilities had been reported to the Young Carer Leads.

### 10. NICE GUIDANCE

Further to Minute 6 of the last meeting, Bev Searle, Director of Partnerships and Joint Commissioning, NHS Berkshire West, submitted a response to the two sets of guidance from the National Institute of Clinical Excellence (NICE) in relation to School-Based Interventions to Prevent the Uptake of Smoking Among Children and Interventions in Schools to Prevent and Reduce Alcohol Use Among Children and Young People.

She also submitted two further sets of recently-published NICE guidance on Social and Emotional Wellbeing in Primary Education and Social and Emotional Wellbeing in Secondary Education.

It was noted that the Healthy Schools programme was not continuing and so meeting the requirements in the NICE guidance would become increasingly challenging, given the resource constraints the programme's removal would bring.

#### AGREED:

- (1) That the response to the NICE guidance in relation to School-Based Interventions to Prevent the Uptake of Smoking Among Children and Interventions in Schools to Prevent and Reduce Alcohol Use Among Children and Young People be noted;
- (2) That Kim Wilkins speak to Karen Reeve to identify an appropriate person to review the two sets of NICE Guidance on Social and Emotional Wellbeing in Primary and Secondary Schools and bring a response back to the Board.

### 11. SCRUTINY REVIEW OF CHILDREN'S HEALTH

Melani Oliver, Head of Extended Services, submitted a report setting out the recommendations that had been approved by Cabinet on 12 July 2010 (Minute 34 refers) from a Scrutiny Review of Children's Health.

A joint meeting of the Education and Children's Services and Housing, Health and Community Care Scrutiny Panels had been held on 14 October 2009 to consider the correlations between poverty and deprivation and children's learning and health. The scrutiny process had resulted in a set of recommendations which had been presented to Cabinet on 12 July 2010, along with a response to the recommendations compiled by officers from the Council and NHS Berkshire West. Cabinet had approved the recommendations from the scrutiny review, as amended by the suggestions in the

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officer response. The report summarised the 17 recommendations approved by Cabinet and sought support of the HRP in actioning and taking these forward.

Melani reported that work was being carried out on all the recommendations, and that the Local Strategic Partnership (LSP) would be considering Children's Health issues at its next meeting. She asked the Board to consider which of the areas covered by the recommendations it particularly wished to focus on, where the HRP could "add value" using its strategic role.

It was noted that it had already been decided to update the objectives in Priority 4 of the Health & Wellbeing Action Plan by adding in appropriate objectives from the results of the Scrutiny Review (see Minute 5 above).

The meeting discussed the recommendations, noting that two key issues for HRP to focus on were areas of embedded health inequalities and how early health interventions could add value in children's early years to help to reduce the gap in educational performance across the Borough (whilst not replicating the work of the Children's Trust). It would also be important that the needs of the Black & Minority Ethnic (BME) population were considered in whatever was chosen to focus on.

### AGREED:

- (1) That the approved recommendations from the Scrutiny Review of Children's Health be noted;
- (2) That it be noted that the LSP would be considering Children's Health issues at its next meeting;
- (3) That the Management Group and Melani Oliver consider the recommendations and how they related to the Health and Wellbeing Strategy and Action Plan and identify specific strategic actions for the HRP to take forward, where it could provide "added value" without replicating the work of the Children's Trust.

## 12. FORWARD PLAN

The meeting considered the latest draft forward plan of items to be considered at future meetings of the Board. It was noted that the Management Group would be looking at the forward plan at its next meeting, in order to coordinate the agenda for the next Board meeting.

Bev Searle reported that Jackie Lonsdale would be reporting to the Board's next meeting on Re-ablement.

### AGREED:

That the Management Group consider the Board's forward plan further, including adding an item on Re-ablement for the next meeting.

**13. OTHER BUSINESS**

**a) World Mental Health Day**

Sam Otorepec, Head of Partnerships, NHS Berkshire West, circulated information on activities to be held locally to celebrate World Mental Health Day on 10 October 2010, and said that she could provide an electronic copy if anyone needed it.

**AGREED:** That the position be noted.

**b) Community Engagement Survey Analysis Summary Report**

Nina Sethi, from Reading LINK Board, tabled copies of a summary report analysing a Community Engagement Survey on health and social care services that had been carried out by Reading LINK from February to July 2010. She explained that the results of the survey had not yet been shared with statutory partners, as the LINK Board had only received the report on 4 October 2010 and had also not yet produced its action plan from the report.

The report gave details of the survey and the responses received, and concluded that, whilst many individuals felt that their local health and social care needs were being met, the research suggested that mental health services, access to NHS Dental Services and being seen on time for hospital outpatient and GP appointments were priority issues which cut across different communities and affected individuals of all ages. Many residents would like to see improvements across social care provision, but particularly in respect of helping carers access the services and financial assistance to which they were entitled. Therefore, improved access to information using a range of different media, specifically for social service provision, but also in healthcare services for some elderly, disabled, special needs and non-English speaking communities, were also identified as a priority for action.

**AGREED:**

That the Management Group consider the report and how to address the issues raised.

**14. DATE OF NEXT MEETING**

**AGREED:** That the next scheduled meeting of the Healthier Reading Partnership be held on Wednesday 19 January 2011.

(The meeting started at 6.00pm and closed at 8.30pm)

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