

Slough Wellbeing Board – Meeting held on Tuesday, 31st May, 2022.

Present:- Councillors Pantelic (Chair), Hulme, Dr Jim O'Donnell (Vice-Chair), Supt. Lee Barnham, Marc Gadsby and Ramesh Kukar

Apologies for Absence:- Councillor Neil Bolton-Heaton, Adrian Davies, Andrew Fraser, Chris Holland, Caroline Hutton and Sangeeta Saran

PART 1

27. Declarations of Interest

No declarations were made.

28. Minutes of the last meeting held on 14 March 2022

Resolved – That the minutes of the meeting held on 14 March 2022 be approved as a correct record.

29. Better Care Fund Programme 2021/22 - Annual Report

The Integrated Delivery Lead at Frimley CCG (Clinical Commissioning Group) provided a brief overview of the BCF (Better Care Fund) Plan 2021/22.

In response to a question about funds being carried over and how they would be used, the Integrated Delivery Lead advised that these funds were a non-recurring spend. In accordance with the funding framework, if targets set out in the metrics were met then there was a reward element which comprised funds being rolled over as a contingency and could only be used on transitional, transformation projects. The CCG had agreed to roll these contingency funds forward. Using these funds to invest in Children and young people's and SEND services and partnership work were under discussion.

The Chair stated that she would like the Board to be involved in any future discussions about how these BCF contingency funds would be best spent. The Associate Director of Adult Social Care concurred that Board was an appropriate platform to discuss the best use of this resource to transform health and social care provision.

He added that the re-ablement rate was deemed to be good and had focussed on enabling as many residents as possible. For some clients, small improvements could have significant impact on their daily life and on the re-ablement budget. He added that there had been changes to how care packages were commissioned following Covid admissions to residential and nursing care, with the emphasis on keeping as many clients at home as possible.

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Following a question about improved outcomes for Mental health it was advised that the BCF did not provide much funding for this and most mental health investment came through other routes. A new dementia care coordinator had been appointed and the appointment of a dementia care adviser was being explored. The team were working closely with the CVS (community and voluntary sector) to promote wellbeing and mental health through community settings.

The SBC Group Manager, People Strategy stated that there was additional investment from the ICS (integrated care system) and substantial transformation funds for mental health. This investment was for local and mixed projects with the PCN (primary care network), local cafes and Children's services.

The Integrated Delivery Lead stated that the mental health transformation fund was funding the CVS to carry out research looking at the low take up of mental health support in some communities the results of which would help commission future services. There was also intensive support to the homeless, the appointment of a dual diagnosis worker who was involved in a pilot project with the homeless alongside GPs.

Following a question, The Integrated Delivery Lead stated that the rate of hospital discharges at Wexham Park, in comparison to other hospitals, had been good despite challenges. Although there had been a critical incident recently where ambulances had to be diverted to other hospital but this situation had since been resolved.

The representative from Slough CVS stated that the CVS were working to build resilience in the community through initiatives such as carers' meetings, developing social networks, supporting the young carers' programme, ensuring peer and professional support, funding a range of workshops and activities eg, yoga classes and information and advice services such as debt advice. He added that the poverty forum had identified that there was insufficient support for young men and this was being looked at.

The Vice Chair stated that ICS & ICB grants to CVS should increase and that less than 3% of the BCF grant was spent on children and young people's services. Support and funding for these young people from deprived backgrounds and children's mental health needed to be prioritised.

Following a question, the SBC Group Manager, People Strategy advised that the recent SEND inspection had identified a key gap in provision for soft services, particularly dysphasia. One of BCF's key metrics was to improve health outcomes for residents and create independence by reducing hospital admissions. There was two-year plan to increase BCF funding to speech and language services, occupational therapy services and to provide a dysphasia service. The SEND statement had highlighted that 220 children were awaiting these services. Her team were working with providers, schools and families to implement a timeline to provide these vital services, however, there was a significant backlog which would take time to work through. There was an East

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Berkshire-wide children and young people's integrated therapies project which would bring together all SEND provision, ensure equity in provision and reciprocal services for pupils attending out of borough schools. There was a recruitment strategy for the therapy services eg recruitment fairs, apprenticeships, career grade progression, training and competitive salaries. The recruitment drive would emphasize the many benefits of working in Slough.

The Chair stated that she would like to see a holistic approach to the spending of grants and budgets and hoped they would address all the issues raised above by partners. The Council would be reviewing its mental health commissioning and provision to ensure it targeted those most in need.

Action 1: She added that she would like discussions to take place outside the meeting about how ICS grants could support the above discussed topics.

Resolved: That the report be noted.

30. Update - ICS & Place

The Vice Chair provided a verbal update on the Integrated Care System (ICS) and Place. He advised that the legal structure for the ICS would change radically from July 2022 onwards and did a slide presentation regarding the changes. The new structures would comprise the ICP (integrated care partnership) and the ICB (integrated Care Board). The ICP would be a broad alliance of different organisations from the health & care and wellbeing settings and be jointly convened by the NHS and the local authority. Its purpose would be to develop an integrated care strategy while the ICB would be responsible for governance and coordinate with the NHS to improve population health. The four main constituents were the ICS, the ICP, ICB and the provider collaborative. The ICB was the new statutory authority leading on integration. The provider collaborative would set specific priorities and targets, and define the working relationships. NHS England had approved Frimley's plan.

The ICB would be accountable for the use of NHS resources and it would be responsible for approving funding plans proposed by the ICP and the Place based partnership. Each ICB would set out the roles of the place based leaders within its governance plans. He added that the Wellbeing Board would have a key role in which partnerships would be relevant for Slough. Training and promotion of staff would also be undertaken.

The Chair stated that the informal Board meeting planned for September would explore this topic in greater depth. She was keen that the Board should play a bigger role at Place.

Following a question, the Vice Chair stated that the voice of the child, health inequalities and deprivation among children would be prioritised and the ICB would be encouraged to recognise this in funding. There was a pilot project at some local primary schools to support those children, primary care would

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consult parents about what areas should be prioritised. Funding would be sought from the BCF and ICS.

Resolved: That the update be noted.

31. Update - Priority One, Starting Well. Children and Young People Partnership Board

This item was deferred to the following meeting.

32. Future Plans - Priority Four, Workplace Health Task and Finish Group

The SBC Public Health Programme Manager provided a brief overview of the Future Plans – Priority Four, Workplace Health Task and Finish Group. Following a question, she responded that the previous taskforce had taken a partnership approach and had included the ICS, which had a workstream around workforce issues. Frimley health had also been represented. The previous taskforce had intended that there should be a dedicated pot of funding that would be available to community groups, ensuring a partnership approach. Trade associations would also be involved and workplace resources arising from the action plan and strategy would be implemented.

The Chair advised that she would be meeting with the Chair of the Slough Business Community partnership to discuss its involvement in the work of the Board.

Following questions, the Public Health Programme Manager replied that targets for reducing sickness absence had not yet been set and would be detailed in the forthcoming strategy paper, which had been delayed due to capacity issues in the HR department.

She added that involvement with the workforce in the ICS began with the BAME (Black and Minority Ethnic) pilot project in response to covid and was aimed at mitigating risks for the local population. The project officer sat on the task and finish group. However, this project had not proactively engaged staff and there was scope for robust partnership building in the future.

Resolved: That the report be noted.

33. Strong, Healthy and Attractive Neighbourhoods Update

The SBC Community Development officer provided a brief overview of the Strong, Healthy and Attractive Neighbourhoods update. Following questions and comments regarding the comms strategy about how to reach those who had English as a second language or hard to reach groups, she advised that the community directory would contain links to other information and advice portals. She added that in terms of communications, community leaders would be helping to relay the messages to their communities and provide feedback about this.

Resolved: That the report be noted.

34. Forward Work Programme

The Board considered the forward work programme for 2022-23. The highlighted that the first informal Board meeting would look at the Board's role in supporting the health and wellbeing of the local population. The informal meetings would support partners to better understand the work of the Board and its priorities.

Resolved: That the work programme be noted.

35. Date of Next Meeting

20 July 2022.

36. Vote of Thanks

The Board was informed that this was the final meeting attended by the Strategic Partnership Lead. A vote of thanks was agreed in recognition of her contribution to the work of the Board.

Chair

(Note: The Meeting opened at 5.10 pm and closed at 6.28 pm)

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