Notice of Meeting

Health Scrutiny Panel

Tuesday, 19 June, 2012 at 6.30pm in Council Chamber Council Offices Market Street Newbury

Date of despatch of Agenda: Monday, 11 June 2012

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Jenny Legge on (01635) 519695 e-mail: ilegge@westberks.gov.uk

Further information and Minutes are also available on the Council's website at www.westberks.gov.uk



Agenda - Health Scrutiny Panel to be held on Tuesday, 19 June 2012 (continued)

Councillors Howard Bairstow, Dominic Boeck, Sheila Ellison, Carol Jackson-Doerge, Tony Linden, Alan Macro, Gwen Mason (Vice-Chairman) and Quentin Webb (Chairman)

Also to: Jan Evans, Jenny Legge and Kate Phipps (Policy Officer)

Substitutes: Councillors George Chandler, Roger Hunneman, Andrew Rowles and

Julian Swift-Hook

Agenda

Part I Page No. 1 **Apologies for Absence** 2 1 - 6 **Minutes of Previous Meeting** To approve as a correct record the Minutes of the meeting of the Health Scrutiny Panel held on 27 March 2012. To approve as a correct record the Minutes of the meeting of the Health Scrutiny Panel held on 10 May 2012. 3 **Declarations of Interest** To receive any Declarations of Interest from Members. **Actions from Previous Minutes** 7 - 8 4 Purpose: To receive an update on actions from the previous meeting of the Panel. 5 **Urgent Items** Purpose: For the Chairman to draw to the Panel's attention any urgent items for consideration. 9 - 10 6 **Dignity and Nutrition - Hospitals** Purpose: To receive information regarding the Royal Bekshire Hospital's involvement in the review. 7 11 - 34 **Anti-Child Poverty Strategy** Purpose: To receive an update on the anti-child poverty strategy. 35 - 388 **Health and Wellbeing Board Update** Purpose: To receive an update on the Health and Wellbeing Board.



Agenda - Health Scrutiny Panel to be held on Tuesday, 19 June 2012 (continued)

9 Health Scrutiny Panel Work Programme

39 - 42

Purpose: To consider items for, and prioritise the work programme of the Health Scrutiny Panel for 2012/13.

Andy Day Head of Strategic Support

West Berkshire Council is committed to equality of opportunity. We will treat everyone with respect, regardless of race, disability, gender, age, religion or sexual orientation.

If you require this information in a different format, such as audio tape, or in another language, please ask an English speaker to contact Moira Fraser on telephone (01635) 519045, who will be able to help.





Public Dockment Pack Agenda Item 2

Note: These Minutes will remain DRAFT until approved at the next meeting of the Committee

HEALTH SCRUTINY PANEL

MINUTES OF THE MEETING HELD ON TUESDAY, 27 MARCH 2012

Councillors Present: Howard Bairstow, Dominic Boeck, Carol Jackson-Doerge, Tony Linden, Gwen Mason (Vice-Chairman) and Quentin Webb (Chairman)

Also Present: Jan Evans (Head of Adult Social Care), Councillor Adrian Edwards, Kate Green (Public), Tony Lloyd (Chairman of the West Berkshire Local Involvement Network (LINk)), Sam Otorepec (PCT) and Kate Phipps (Policy Officer)

Apologies for inability to attend the meeting: Councillor Sheila Ellison

Councillor(s) Absent: Councillor Alan Macro

PARTI

1. Apologies for Absence

An apology for inability to attend the meeting was received from Councillor Sheila Ellison.

2. Minutes of Previous Meeting

The minutes of the meeting held on 17th January, 2012 were agreed as a true and correct record and signed by the Chairman.

3. Declarations of Interest

Councillor Gwen Mason declared an interest in Agenda Items 5 and 6, but reported that, as her interest was personal and not prejudicial she determined to remain to take part in the debate and vote on the matter..

4. Actions from Previous Minutes

5. Update on Progress of NHS Continuing Health Care Programme

(Councillor Gwen mason declared a personal interest in Agenda item 5 by virtue of the fact that she was a member of the West Berkshire Disability Alliance. As her interest was personal and not prejudicial she determined to take part in the debate and vote on the matter).

Jan Evans (Head of Adult Social Care) presented an update report on NHS Continuing Health Care (CHC) which was attached as Appendix A to the agenda

Ms Evans stated that following the previous Health Scrutiny Panel meeting where the Chief Executive and Deputy Chief Executives of NHS Berkshire had attended and answered questions, West Berkshire Council was continuing to review the processes being undertaken and where necessary identify where changes needed to take place.

This work was being led by Janet Golder, the CHC specialist worker who had undertaken a number of training and awareness raising sessions with staff and managers; identified and supported individual reviews and successfully challenged a number of cases to change payment from the local authority to the NHS. Janet had produced a review of where the NHS CHC process and operations were not adhering to CHC Direction and

HEALTH SCRUTINY PANEL - 27 MARCH 2012 - MINUTES

Guidance and this review had been discussed with South Central Health Authority (SCHA).

The Council and SCHA had agreed that the SCHA should commission an independent review of CHC by two senior managers with significant experience in this area. The other five Berkshire Local Authorities had also expressed concerns at the approach of the NHS and had agreed for WBC to take the lead in the review process. The review was aimed at looking at the application of CHC policies across the six local authority areas by NHS Berkshire; the implementation of Direction, National Framework and Practical Guidance and the compliance of the same; the application of eligibility criteria and the work of the CHC Panels. The review was expected to start in Apri2 2012 and the report should be available within two months of the review being completed.

The Chairman said that the Health Scrutiny Panel would await the outcome of the review and its recommendations.

Councillor Linden asked if the other local authorities had agreed to contribute to the costs of the CHC specialist worker and how long they would be employed for. Ms Evans stated that no contribution had been sought but that the post was classed in the 'invest to save' process and that savings had already been achieved. Ms Evans also confirmed that the employment contract was short term and was expected to end by end of financial year 2013-2014.

Ms Evans also reiterated that although GPs would hold future budgets they would still need to deliver the same CHC functions but there would be National Commissioning Boards in place to oversee specific areas of budgets and to performance manage the GPs. It was hoped that they would resolve disputes in operational policy in a timely fashion.

Councillor Boeck asked what the cost of the process review had been and what commitment had been given to continuing this service. Ms Evans said that this had been funded from the spend to save budget and it was imperative that West Berkshire Council had its own knowledge base to raise awareness and offer mentor support and training in CHC.

Sam Otorepec (NHS Berkshire PCT) said that the PCT was aware the adoption of the CHC framework differed across local authorities but that the PCT hoped for consistency across all areas. Councillor Bairstow said he was aware that other local authorities were in a comparable position. Jan Evans said that Margaret Goldie, Corporate Director-Communities was aware of these similarities across the SCHA and that Oxfordshire County Council and Hampshire County Council had also commissioned independent reviews of CHC.

Councillor Bairstow asked if the outcome for clients was better if the Council or the PCT made the decision and what the process for decisions was. Ms Evans said that it was not who provided the CHC but who paid for the service that was the issue. The decision to fund CHC was made through a set framework of actions; through Doctor and other NHS clinician reports, the Continuing Health Care Team and then a recommendation to the CHC panel.

The Chairman said that as previous minutes had shown the primary issue was whether the PCT considered the CHC should be funded through them.

HEALTH SCRUTINY PANEL - 27 MARCH 2012 - MINUTES

The Chairman proposed that the panel should agree to await the results of the Independent CHC Review and take forward any recommendations made. This was agreed by Members.

6. Interim Report on Dignity and Nutrition at the Royal Berkshire Hospital

(Councillor Gwen mason declared a personal interest in Agenda item 5 by virtue of the fact that she was a member of the West Berkshire Disability Alliance. As her interest was personal and not prejudicial she determined to take part in the debate and vote on the matter).

Tony Lloyd (Chair of West Berkshire Local Involvement Networks (LINKs)) presented a review of an interim report on Dignity and Nutrition at the Royal Berkshire Hospital (RBH). Mr Lloyd said that the review had been undertaken as concern had been expressed by the Health Scrutiny Panel in July 2011 that there was a lack of information about the levels of dignity and nutrition at the RBH. In addition, the Care Quality Commission (CQC) had undertaken a series of visits to 100 hospitals across England looking at these topics and the RBH was not included in these.

West Berkshire LINKs undertook to investigate these topics and provide an interim report in January 2012. The report had been brought forward from the previous HSP meeting as there had not been enough time to adequately review its findings.

Mr Lloyd stated that there had been an attempt to set up focus groups but as these had been poorly attended a questionnaire was designed in conjunction with the Princess Royal Trust and Crossroads and 250 copies were despatched. 51 completed questionnaires were returned. The majority of responses related to RBH (32), with the remainder related to Basingstoke (7), Swindon (4) and Oxford (2) and a variety of other hospitals. Mr Lloyd summarised the review findings saying that relatively few responses were highly critical of RBH and four out of five respondents thought care there was good. He also reported that between 5 and ten percent were not pleased with the quality of care. When respondents were asked if they would recommend RBH to others 85% stated they were likely or definitely prepared to do this. This matched with a RBH internal poll which was taken in January 2012 which showed a 95% satisfaction rate.

Mr Lloyd stated that the two main areas of concern at RBH were nutrition and information given to patients, this was repeated across the other hospitals but the RBH scoring was slightly better.

The Chairman asked if RBH had been asked for input for the questionnaire. Mr Lloyd said that the questionnaire had been put together by LINKs and the Princess Royal Trust and Nigel Owen of West Berkshire Council. He said that he had been in touch with RBH on six occasions to ask is they would be prepared to circulate anonymous questionnaires to patients on discharge but he had not had a reply. The Chairman suggested that the request should go to the decision makers at the hospital.

Mr Lloyd asked that Members should treat the results with caution as it represented a small sample of views and that the respondents were those discharged prior to December 2010, so any issues might have changed. The Chairman asked if there were plans to extend the survey and how this could be done.

HEALTH SCRUTINY PANEL - 27 MARCH 2012 - MINUTES

Mr Lloyd said that to gain a higher level of assurance future surveys could be targeted at those patients over 65 years discharged from RBH only. He added that the report had already been sent to the CQC. The Chairman said that the Panel would support any extension of the survey. Councillor Boeck said that further investigation would be useful. Councillor Mason noted that the report showed that respondents who had been to Swindon hospital had made adverse comments about not being asked if they were carers and if there was a care package plan in place.

Ms Evans said that hospitals discharge process asked about carers but not the admission process. Mr Lloyd added that only half the respondents had been asked if they were carers and about appropriate care.

Councillor Boeck commented that this was good work but it was difficult to be subjective about the issues, RBH own surveys might be more objective.

Councillor Linden asked where the survey was completed by those over 65 years of age if the results could be correlated with any previous CQC findings. Mr Lloyd said that the ages were not specified but the respondents were predominantly elderly and male. There had been a CQC review done previously but because of changes in leadership, recognition of cognitive problems and establishment of a mental health team for elderly patients the two reports were not comparable.

Councillor Jackson-Doerge asked whether the administration section of the questionnaires covered issues such as care packages and impact of discharge on care, also whether patients were affected by illnesses such as Parkinson's. The Chairman said that the brief for the panel was Dignity and Nutrition and that it was important not to look too widely at other issues that were not subjects for scrutiny.

Councillor Mason said that it would be useful if RBH agreed to hand out questionnaires on discharge. Mr Lloyd agreed that if RBH would cooperate then a future survey could be completed on selected discharged patients aged over 60/65 years over a six month period.

The Chairman suggested that an invitation be made for RBH representative to attend the next HSP and that a copy of the report accompany the invitation. This was agreed

The Chairman thanked Mr Lloyd for his work in producing and presenting the report.

7. Health Scrutiny Panel Work Programme

The Chairman drew the meetings attention to the updated work programme with item reference OSMC/11/102 still awaiting an update.

(ıne	meeting	commencea	at 6.30	pm and	ciosea	at /	.29	pm)

CHAIRMAN	
Date of Signature	

HEALTH SCRUTINY PANEL

MINUTES OF THE MEETING HELD ON THURSDAY, 10 MAY 2012

Councillors Present: Dominic Boeck, George Chandler (Substitute) (In place of Howard Bairstow), Sheila Ellison, Carol Jackson-Doerge, Tony Linden, Gwen Mason and Quentin Webb

Apologies for inability to attend the meeting: Councillor Howard Bairstow, Councillor Roger Hunneman and Councillor Alan Macro

PARTI

1. Election of Chairman

RESOLVED that Councillor Quentin Webb be elected Chairman of the Health Scrutiny Panel for the 2012/13 Municipal Year.

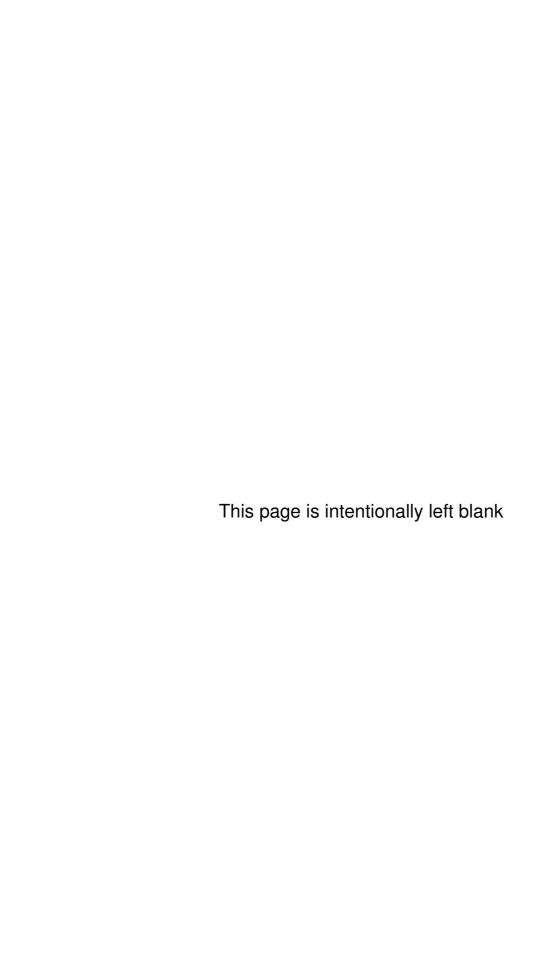
2. Appointment of Vice-Chairman

RESOLVED that Councillor Gwen Mason be appointed Vice-Chairman of the Health Scrutiny Panel for the 2012/13 Municipal Year.

CHAIRMAN

Date of Signature

(The meeting commenced at 8.20 pm and closed at 8.21 pm)



Agenda Item 4

Title of Report: Actions from previous meetings

Report to be considered by:

Health Scrutiny Panel

Date of Meeting: 19 June 2012

Purpose of Report: To advise the Health Scrutiny Panel of the actions

arising from previous meetings

Recommended Action: To note the report

Overview and Scrutiny Management Commission Chairman			
Name & Telephone No.:	Councillor Quentin Webb – Tel (01635) 202646		
E-mail Address:	qwebb@westberks.gov.uk		

Contact Officer Details			
Name:	Kate Phipps		
Job Title:	Policy Officer		
Tel. No.:	01635 519695		
E-mail Address:	kphipps@westberks.gov.uk		

Executive Report

1. Introduction

1.1 This report provides the Health Scrutiny Panel with an update on the actions arising from its previous meeting.

2. Resolutions

2.1 **Resolution**: NHS Continuing Health Care Programme: The Chairman proposed that the panel should agree to await the results of the Independent CHC Review and take forward any recommendations made. This was agreed by members

Action / response: The results of the CHC Review are still awaited.

2.2 **Resolution**: Interim Report on Dignity and Nutrition at the Royal Berkshire Hospital: The Chairman suggested that an invitation be made for RBH representative to attend the next HSP and that a copy of the report accompany the invitation. This was agreed.

Action / response: Complete.

Appendices

There no appendices to this report.

Agenda Item 6

Title of Report: Dignity and Nutrition in Hospitals

Report to be considered by:

Health Scrutiny Panel

Date of Meeting: 19 June 2012

Purpose of Report: To receive further information regarding the dignity

and nutrition in hospitals review.

Recommended Action: To consider any further action as appropriate.

Health Scrutiny Panel Chairman				
Name & Telephone No.:	Councillor Quentin Webb – Tel (01635) 202646			
E-mail Address:	qwebb@westberks.gov.uk			

Contact Officer Details				
Name:	Kate Phipps			
Job Title:	Policy Officer			
Tel. No.:	01635 519695			
E-mail Address:	kphipps@westberks.gov.uk			

Executive Report

1. Introduction

- 1.1 At its meeting of 27 March 2012 the Health Scrutiny Panel received an interim report on dignity and nutrition at the Royal Berkshire Hospital.
- 1.2 The Panel agreed to invite Edward Donald (Chief Executive of the Royal Berkshire NHS Trust) to the meeting to discuss how the Royal Berkshire Hospital might be involved in the review in the future.

2. Recommendation

2.1 It is recommended that Members of the Panel consider any further action as appropriate.

Appendices

There are no appendices to this report.

Agenda Item 7

Anti-child Poverty Action Plan Progress Title of Report: update 2012 Report to be **Health Scrutiny Panel** considered by: **Date of Meeting:** 19/6/12 Forward Plan Ref: To inform HSP of progress in relation to the anti-child **Purpose of Report:** poverty strategy action plan To note the report and to recommend to specific services **Recommended Action:** any actions required to maintain a focus on tackling child poverty Reason for decision to be n/a taken: Other options considered: n/a Key background anti child poverty strategy 2011-20 and needs assessment documentation: The proposals contained in this report will help to achieve the following Council Strategy

priority(ies):				
 CSP1 – Caring for and protecting the vulnerable CSP2 – Promoting a vibrant district CSP3 – Improving education CSP4 – Protecting the environment 				
The proposals will also help achieve the following Council Strategy principle(s):				
Putting people first				
Living within our means				
Empowering people and communities				
Transforming our services to remain affordable and effective				
☐ Doing what's important well				
The proposals contained in this report will help to achieve the above Council Strategy priorities and principles by:				
Ensuring that the presence and impacts of child poverty are recognised and necessary				
actions taken to enable the needs of the some of the most vulnerable to be addressed.				
The risk factors associated with familial social and economic deprivation in relation to				
physical and mental well being, life chances and outcomes are well evidenced.				

Portfolio Member Details		
Name & Telephone No.:	Councillor Irene Neill - Tel (0118) 971 2671	
E-mail Address:	ineill@westberks.gov.uk	
Date Portfolio Member	8/6/12	
agreed report:	0/0/12	

Contact Officer Details				
Julia Waldman				
Commissioning, Strategy and Partnerships Manager				
01635 519810				
JWaldman@westberks.gov.uk				

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Polic	cy:	
Fina	ncial·	

If there are any financial implications contained within this report this section must be signed off by a West Berkshire Finance Manager. Please note that the report cannot be accepted by Strategic Support unless this action has been

undertaken.

Personnel	:
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Legal/Procurement:

Property:

Risk Management:

Equalities Impact

Where a decision is required, Strategic Support are not able to accept your Assessment:

report without an EIA Stage 1 being completed (Appendix A to this report).

Further information and an EIA Stage 2 form can be found at:

www.westberks.gov.uk/eia. For advice please contact Principal Policy Officer

(Equality & Diversity) on Ext. 2441.

Corporate Board's

To be completed after the Corporate Board meeting. Recommendation:

NOTE: The section below does not need to be completed if your report will not progress beyond Corporate or Management Board.

Is this item subject to call-in?	Yes:	No:	
If not subject to call-in please put a	cross in the appropriate box:		
The item is due to be referred to Council for final approval Delays in implementation could have serious financial implications for the Council			
Delays in implementation could compromise the Council's position Considered or reviewed by Overview and Scrutiny Management Commission or associated Task Groups within preceding six months			
Item is Urgent Key Decision			
Report is to note only			

Executive Summary

1. Introduction

1.1 The Health Scrutiny Panel has requested an information update on the West Berkshire Anti-Child Poverty Strategy, which was published alongside a needs assessment in March 2012 to meet the duties of the Child Poverty Act 2010. This report provides an update with relevant local and national information.

2. Proposals

2.1 None.

3. Equalities Impact Assessment Outcomes

3.1 There is no decision to be made and therefore no Equality Impact Assessment has been undertaken.

4. Conclusion

4.1 Significant work has been undertaken to progress the anti-child poverty strategy action plan targets. National and local changes have resulted in a refocusing of some of the emphasis on change priorities.

Executive Report

1. Introduction

1.1 The Health Scrutiny Panel has requested an information update on the West Berkshire Anti-Child Poverty Strategy, which was published alongside a needs assessment in March 2012 to meet the duties of the Child Poverty Act 2010. This report provides a summary of some of the national and local changes related to child poverty reduction. Appendix B provides a highlights summary table showing work that has been undertaken in relation to each of the target areas in the action plan. Inevitably there will be a great deal of other local work contributing to reducing child poverty that has not been represented. This is not a data summary report as data is reported through a range of routes and it has no been possible to collate this in time for this meeting. However a data set has been included as Appendix C for local indicators derived from national sources.

The key indicator for child poverty is the Local Child Poverty Measure (formerly known as NI116). This measure calculates child poverty at a local level by the number of children living in families in receipt of Child Tax Credit whose reported income is less than 60 per cent of the median income or in receipt of Income support or (Income-Based) Job Seekers Allowance, divided by the total number of children in the area (determined by Child Benefit data). Percentages are shown in Table 1 next for West Berkshire.

Table 1

	2006	2007	2008	2009	2010	2011
0-15 years	10.8%	10.9%	10.8%	11.8% 10.8% (proxy measure*)	n/a 11% (proxy measure)	Due late summer
Dependent children under 20 years	10.1%	10.3%	10.2%	11.2%	n/a	

^{*} Proportion of children living in families in receipt of out of work benefits

- 1.2 The strategy recognised the long term view needed to tackle and 'turn the curve' on some of the deep-rooted issues associated with child and family poverty. The strategy's action plan reflected both the requirements of the national child poverty agenda and the recommendation to address the building blocks for tackling child poverty identified by the Child Poverty Unit. These include:
 - (1) Employment and adult skills
 - (2) Financial support
 - (3) Services for children, young people and families, particularly education, health and family support
 - (4) Housing and neighbourhoods
 - (5) (Ending Child Poverty, Making it Happen, 2009, Child Poverty Unit)

- 1.3 These remind us that child poverty is complex, multi-faceted and that it remains 'everybody's business' to end it. The above report, however, questioned whether the building blocks were the right ones to use and the Coalition Government, in producing its Child Poverty Strategy in April 2011 (A New Approach to Child Poverty: Tackling the Causes of Disadvantage and Transforming Families' Lives), used this opportunity to reframe some of the emphasis on tackling child poverty. It moves away from narrow income targets towards 'strengthening families, encouraging responsibility, promoting work, guaranteeing fairness and providing support to the most vulnerable'. (p.8) and tackling 'head-on the causes of poverty which underpin low achievement, aspiration and opportunity across generations'.
- 1.4 The strategy, informed by evidence from a range of sources, including the Marmot Review (Fair Society, Healthy Lives, 2010) includes an exploration of the interrelationship between health inequalities, poor physical and mental health and poverty and their contribution to inter-generational poverty and worklessness, for example.
- 1.5 There is also a focus on social mobility as a route out of poverty and of the need for widespread reform to achieve the necessary change. Reducing child poverty is seen as one outcome of a range of reforms aimed at improving children's live chances and lives. So the revised building blocks are:
 - (1) Supporting families to achieve financial independence, including through changes to the benefits system
 - (2) Supporting family life and life chances, including through early help for families both in relation to early years and before problems develop, and schools and education reform
 - (3) The role of place in transforming lives
 - (4) Measurement and accountability including the development of a national and local (Appendix C) set of indicators with latest data available. The latter needs further analysis to determine its relevance and use locally but does give some possible direction for the need for further work to improve our chances of reaching our 2020 target. The breadth of the indicators and benchmarking against national levels is helpful, though statistical neighbours may be more relevant.
- 1.6 Whilst there has been a national shift in emphasis our local approach that sees anti-child poverty work as a golden thread weaving across a wide cross-section of service provision for our vulnerable families remains valid. This is in part because our work locally has shifted in accordance with national policy agendas, for example related to wide-scale changes to health provision and commissioning, the recommendations arising out of the Munro review of child protection, provision of the Early Intervention Grant, changes to welfare benefits and the implementation of the Troubled Families Programme.

- 1.7 The pace and scale of local reform has also, however, resulted in reductions in opportunities to monitor and collate progress as a collaborative activity, including due to reduced staffing capacity and changes to services. The local Children's Trust had oversight of the Child Poverty Strategy but in changing to become the Children and Young People's Partnership there has been a gap of nine months between the final meeting of the Trust and the first meeting of the Partnership scheduled for June 20th. This group will convene time limited task groups and it may be helpful to convene bi-annually a group to review child poverty plans and progress towards the target. Given the flux in the economic situation and the lag in much of the data associated with the indicators annual reporting may be unnecessary.
- 1.8 In addition the Council's new Strategic Review Board would like to revisit the strategy and identify the need for and availability of further resources and integration to support child poverty reduction. The move by Public Health to the local authority may also provide an opportunity to better link the Joint Strategic Needs Assessment for children; further child poverty needs assessment work and preventative work.

Appendices

Appendix A – Equality Impact Assessment – Stage 1

Appendix B - Summary of action plan progress

Appendix C - Local indicators

Consultees

Local Stakeholders: JobCentre Plus

Officers Consulted: various

Trade Union: n/a

APPENDIX A

Equality Impact Assessment – Stage One

Nam	lame of item being assessed: Update to health scrutiny panel			scrutiny panel	
Version and release date of item (if applicable):					
Own	er of item	being assessed:	Julia waldman		
Nam	e of asses	sor:	Julia waldman		
Date	of assess	ment:	8/6/12		
	38 <i>1</i> 1 4		, .		
1.		the main aims of t		a place	
TO up	date on pro	ogress with the anti-	child poverty action	1 pian	
2.	2. Note which groups may be affected by the item, consider how they may be affected and what sources of information have been used to determine this. (Please demonstrate consideration of all strands – age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation)				
Group Affected What might be the ef		e effect?	Information to support this.		
Furti	Further comments relating to the item:				
As an update the item has no equality impact issues. Identification of further work lead to need for further consideration of equalities issues.					
2 Peoult (places tick by elicking on relevant hav)					
3. Result (please tick by clicking on relevant box)					
High Relevance - This needs to undergo a Stage 2 Equality Impact Assessment Medium Relevance - This needs to undergo a Stage 2 Equality Impact					
	Assessment				
	Low Relevance - This needs to undergo a Stage 2 Equality Impact Assessment				
\boxtimes	No Relevance - This does not need to undergo a Stage 2 Equality Impact Assessment				

For items requiring a Stage 2 equality impact assessment, begin the planning of this now, referring to the equality impact assessment guidance and Stage 2 template.

4. Identify next steps as appropriate:	
Stage Two required	
Owner of Stage Two assessment:	
Timescale for Stage Two assessment:	
Stage Two not required:	х

Name: Julia Waldman Date: 7/6/12

Anti-child Poverty Action Plan Progress Update 2012

This table summaries a range of work that is underway against each of the targets. It does not report on specific outcomes as these would need to be collated from a further range of sources.

Note:

The statutory requirement to have a CYP Plan was removed by the current Government. Locally the CYP Trust has become the CYP Partnership. The decision was made to determine a set of core strategic priorities for children's outcomes – tackling and reducing child poverty and early identification and intervention have been agreed as core cross-cutting themes across all priorities. A priorities statement will be ratified at the first meeting of the new Partnership on June 20th 2012.

Target	Update			
	Increase the take up and impact of schemes that support income-deprived young people and parents to find and hold on to jobs			
that reduce benefits dependency.				
For schools and related educational services to implement strategies to eradicate attainments gaps. Service Plan and targets in LSCB Business Plan under the shared CYPP and LSCB theme of maximising individual potential	This remains a high priority within the Education Business Plan. A Free School Meals Action Research Project is being implemented in 2012-13 to quicken the progress towards reducing the attainment gap, which can impact on employment opportunities and choices post school. A boost to this area of work is the local implementation of the government's Troubled Families Programme. This will focus on families who have a history of worklessness and are struggling to engage in EET. It is likely many of these will be income-deprived and we will understand this better when we have completed the data collation exercise required by Department for Communities and Local Government.			
For all children to be ready to learn in school Target for early WBC CYP Early Help strategy currently in draft status and linked to Munro Board group	This continues to be a core purpose of Children's Centres and early years providers and further work is being undertaken at national level on the Early Years Foundation Stage to more clearly direct local work. Further prioritisation of targeted work will better ensure that <i>all</i> children access early years provision. Extension of the 2-year old child care subsidy funded by Department of Education and being managed by Education Services contributes to this. Take up is being monitored and contributes to the cohort tracking target (see later in this document).			
West Berkshire Partnership members to commit as employers to eradicating in-work poverty of their	The West Berkshire Partnership (WBP) has been working to address anti-poverty issues through a variety of measures, the most notable being the Greater Greenham Project which was set up in October 2009 to focus multi-agency working and resources in the most deprived ward within West			

Target	Update
employees and to extend employment opportunities for vulnerable and workless young people and adults WB Partnership's Sustainable Communities Strategy	Berkshire. A range of measures were introduced including working with JobCentre Plus to improve residents employment prospects, establishing regular work clubs, providing debt counselling advice, supplying community based training and improving activities for young people in this area. Many of these activities have given opportunities for residents to volunteer which have given them the confidence to move to paid work. The Berkshire Community Savings and Loans service has also been set up in West Berkshire to support those who need to borrow money and allow them to do so in a safe way.
Communities offacegy	Although in its infancy it's hoped to replicate a similar project in the Calcot ward with a particular focus on young people Not in Employment, Education or Training (NEETS). The demand for work clubs is currently being explored and a Jobs Fair is being run on 26th June 2012. Advice and guidance on local apprenticeship schemes will also be provided for those who attend the work information sessions. Equally, as part of awarding planning permission for the IKEA development in Calcot, West Berkshire Councillors ensured that jobs would be created for local people in both the building of the new store and when it opens.
	Initial survey work conducted by Sovereign Housing Association within Calcot shows a need for greater community involvement of young mothers living on local estates, along with better access to community facilities and health services. All the relevant agencies are co-operating to explore solutions to these immediate problems.
	In addition, the Skills and Enterprise Partnership is a Sub-Partnership of the WBP that is responsible achieving the "Prosperous West Berkshire" theme as described within the Sustainable Community Strategy. The following objectives, which equally align to anti-poverty objectives, are at the core of this:
	 Increasing knowledge and skills in local businesses (through training and support) Increasing the number of residents employed locally Increasing the skills of local people Ensuring children and young people can maximise their individual potential Increasing the economic prosperity of our Market Towns Supporting and encouraging the provision of appropriate, decent and sufficient housing.
	The current progress towards achieving these targets will be reported to the WBP Management Board on 21 st June. After this meeting the Principal Policy Officer (Communities and Partnerships) will be able to share the most up to date progress with Members of the Health Scrutiny Panel.

Target	Update		
	WBC has implemented an Apprenticeship scheme to provide employment and skills opportunities for local young people.		
Ensure all families at risk of or living	g in poverty can access information and advice at the times and in ways that they need it most.		
Extend partnership and outreach work between key providers in all sectors to target and ensure information and advice reaches those parents and young people who may have difficulties in accessing information, for example due to rural	Jobcentre Plus communicates with the Children's' Centres and other organisations to advise them of latest vacancies in the form of a weekly list of vacancies for display; we also advise of "hot vacancies" or vacancies where an employer is struggling to fill. Advice is disseminated on national campaigns especially around apprenticeships. We also produce a monthly labour market newsletter which advises of the register sizes and which are the most sought after vacancies compared to vacancies notified so partners can advise where the gaps are for residents.		
isolation, digital exclusion, literacy or communication issues.	The children centres are kept stocked with the most up to date leaflets on the different benefits by JCP.		
JobCentre Plus	JCP also advises these organisations of all the benefit reform changes which will affect their residents by sending out our newsletters.		
	JCP is currently working with partners on a locality campaign in Calcot where it is looking to join up organisations to host a jobs fair in June, and is also looking into the feasibility of holding some group sessions for 18-24 year olds in the area.		
	JCP has also liaised in Lambourn with the racing welfare and in particular helped out a customers benefit claim as well as all the labour market information above. Regular outreach is not undertaken in any location, due to low turn out, but ad hoc sessions are provided on request.		
	The current Connexions contract ends in August 2012. It has been re-tendered and the new supplier will announced in late June. Savings associated with this service has resulted in a focusing of activity on the most vulnerable young people and those at risk of NEET.		
	Children's Centres have extended their partnership working, which has helped to compensate for the further savings taken from this service.		
	Information provision for families more broadly has been identified as an area that required further attention and action by the Communities Directorate, to be addressed before the end of the financial year.		

Target	Update			
Raise aspirations and improve life c	hances of the most vulnerable children and young people, with an emphasis on education and			
	employment and supporting good parenting.			
Provide effective early targeted intervention and work intensively with our families with complex needs. WB CYP Partnership Children and Young People's Plan	 Early identification and intervention is a cross cutting theme within the CYPP's strategic priorities. It remains a high priority of both health services and the Council. A range of activity has been undertaken to better asses the effectiveness of early targeted early intervention and intensive support. This has included: Focusing the first peer challenge undertaken by the Children's Improvement Board on this area in June 2011 Developing a peer approach to parent consultation model and testing this through an action research project in 2012 Developing an early help commissioning framework to implement a more systematic approach to commissioning decisions Maintaining provision that supports families in need in disadvantage for example short breaks provision for disabled children and the Family Intervention Partnership for high need families, extending this to work with children on the edge of care Including early help as one of the five core projects of the Munro Implementation Board. 			
Implement or develop a life chances indicator broader than NI116. West Berkshire Council to be monitored by WB CYP Partnership	The focus has shifted towards a core set of outcomes for the CYP Partnership and WBC CYP services and with the Government's wider shift away from NI116 to a broader definition of poverty to include an emphasis on social mobility and the underlying causes of poverty this no longer appeared to be required.			
Identify a baseline cohort currently aged 2, 11 and 16 to provide a sample to measure change in 2014. 2017, 2020 by the life chances indicator.	Since September 2009, funding has been made available to priority parents on a low income - to provide free child care places for their 2 year olds. These children have been identified on the education database (EMS) in order that their future progress can be tracked. From April 2012, parents in receipt of this funding have being asked for consent to access the future records for their children. This will allow performance for this cohort of 2 year olds to be compared against the wider cohort in respect of e.g. future SATS, GCSE results, attendance etc. For those aged 11 and 16 the attainment and progress gap will be tracked via free school meals provision. Identifying a group within those in Year 11 at the end of the 10-11 academic year has been more challenging with the re-tendering of the Connexions contract. This is an area that can be explored with the successful provider who has the contract from September 2012.			

Target	Update
To raise awareness of the links between poverty, deprivation and poor outcomes amongst those working with vulnerable families. Training and promotional resources to be produced by Prevention and Early Intervention Group in 2011 (This group no longer exists)	A Child Poverty perspective was included in Children's Workforce Common Induction course, which was re-shaped in 2011-12 following learning from a pilot delivery. Widespread changes within CYP services and to children's workforce developments and support nationally impacted resources and capacity for development of training locally. New funding through the government's Troubled Families Programme provides an opportunity from 2012-15 to support workforce development, including funding and promotional of common learning. Approaches have been made to NSPCC and other with regard to purchasing of poverty training and resources.
differences.	
Relevant policies of WBP and sub- group partners include a place and poverty dimension WBCYP Partnership	See introductory note citing child poverty as a cross-cutting theme of the CYP Partnership. WBP has developed another place-based initiative at Calcot, learning from the Greater Greenham Project, and focusing on young people not in work or learning and young parents to address their support and inclusion needs in a range of ways. WBC has supported development of community-based partnerships, working with the Clay Hill Residents Association to develop use of the Riverside Community Centre. Clay Hill has the highest child poverty in the district and is one of the highest areas for youth unemployment, as is Calcot.
Public transport providers extend concessionary fares and maintain bus routes that will enable people to access jobs. WBC Transport Services	 Local Transport Plan 2011-26 published, which contains a number of commitments related to children and families: Increasing and promoting bikeability training to encourage children to ride to school An emphasis on sustainable strategies to contribute to obesity reduction, including amongst children Links between transport plans and the CYP Partnership and related strategies Review of road accident data including involving children and young people, to inform remedial actions re safety improvements Review of Home to School Transport policy entitlements (a wider review of home to school transport is underway with an emphasis on savings) Recognition of the importance of accessible transport in relation to jobs and education and the Child Poverty Act 2010 is included in the Plan.

Target	Update
	The Passenger Transport Strategy includes proposals for extending community transport provision.
	With the development of a Young Persons' Forum linked to the CYP Partnership this also opens opportunities for extending consultation involving young people in relation to, for example, services provided by First Great Western services and station accessibility.
	There are other ways in which the Transport group is contributing to the causes and impacts of child poverty including
	- free road safety training
	- Seeking to influence travel planning and travel behaviour through bids for funding to support: work with families and employers in Newbury/Thatcham, to encourage greater levels of cycling and walking to school and work;
	opportunities to improve access to education or training for 16+ in more rural areas, such as a 'Wheels to Work' moped hire scheme ;
	joint bids with Reading and Wokingham for activities that would impact Calcot and Theale, including a London style cycle hire scheme;
	Personalised travel training to allow young people with special educational needs to travel independently.
	- Using opportunities provided by the National Planning Policy Framework to influence travel planning requirements for new developments.
	It is hard to influence and achieve more generous concessionary fares as these are decided upon by local transport providers, however the CYP Partnership has identified this area as its fourth priority as it was a key issue identified by young people.
Community-led solutions to issues of social and economic deprivation are promoted and supported through grant funding opportunities WBP	There are a number of examples of this, although in the longer term is not clear how where the locus of attention is for monitoring and sustaining this across different funding routes. In 2011-12 WBC provided 100k of grant funding through a Community Solutions Fund to support a range of community-led initiatives. Follow up of the impact of this funding has not yet been completed.
****	WBC's Adult and Family learning service provides grants to local providers to promote adult and family learning opportunities, with an emphasis on supporting applications that address social and economic deprivation.

Target	Update
	The WBP grant–making activity is one appropriate route as the Communities Directorate has very limited grant-making activity.
	Commissioning activity is also a used to direct resources to areas and groups experiencing deprivation.
	Greenham Common Trust remains an important local funder of initiatives that tackle and reduce the impacts of deprivation.

Examples of additional activity to support families in poverty:

- Greenham Common Trust has agreed an arrangement with West Berkshire Council social care services to provide extreme hardship support for specific items or activities for families or individuals in severe need, following a pilot period. This is complemented by GCT support to Newbury Furniture Project
- Discussions are underway with Churches All Together and others about the need for development of food bank provision in West Berkshire
- A Council working group has been convened to explore the implications of changes to benefits and moves to a universal credit system.

Health initiatives include

- Commissioning of the Family Nurse Partnership for West of Berkshire from for three years to provide intensive support for expectant and young mothers under 19 years
- Implementation of a range of anti-obesity initiatives, there being an association with obesity and poverty and chronic long term health conditions
- · Continuation of sexual health advice and support for young people
- Growth in health visitor levels to better support mothers of young children.

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Child poverty basket of indicators

summary for: West Berkshire

What does this sheet tell us?

The basket of indicators have been chosen from the current National Indicator Set (NIS) and most closely reflects the drivers of child poverty that can be influenced by local authorities and their partners.

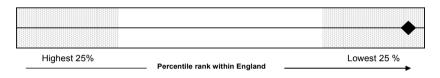
This sheet displays a summary of the latest data for the basket of indicators for West Berkshire. This can be changed by selecting the required local authority from the drop down list above.

NI 116: Proportion of children in poverty

Definition: The proportion of children living in families in receipt of out of work (means-tested) benefits or in families in receipt of tax credits whose reported income is less than 60% of median income

In West Berkshire there were 3470 children living in income deprived families in 2008, this accounted for 10.2% of all the children in the area. The child poverty level in West Berkshire ranks in the lowest 25 percent of local authorities in England.

	Number	Percentage
2006	3,325	10.1
2007	3,455	10.3
2008	3,470	10.2



For more information and definitions please refer to the technical note available at: http://www.hmrc.gov.uk/stats/personal-tax-credits/child_poverty.htm

The child poverty building blocks:

Parental employment and skills

NI number	Description	Value	England	Data point
NI 118	Childcare take-up (low income working families) (%)	18.9	17.8	FY 2007/08
NI 146	Adults with learning disabilities in employment (%)	3.2	6.8	FY 2008/09
NI 150	Working adults seeing mental health services (%)	8.7	3.4	FY 2008/09
NI 151	Overall employment rate (%)	82.0	73.0	CY 2008
NI 151f	Overall employment rate- female (%)	77.5	69.1	CY 2008
NI 151m	Overall employment rate- male (%)	86.0	76.5	CY 2008
NI 161	Learners achieving L1 literacy qualification (no.)	668	320,542	AY 2008/09
NI 162	Learners achieving numeracy L3 qualification (no.)	444	116,248	AY 2008/09
NI 163	Working age population qualified to at least L2 (%)	77.7	69.4	CY 2008
NI 166	Average earnings of employees in the area (no.)	608.8	495.2	FY 2009/10

Place

NI number	Description	Value	England Data p	oint
NI 156	Households in temporary accommodation (no.)	22	53,370 Q3 2009	9/10
NI 158	(non) Decent council homes (%)	-	22.0 FY 2008	3/09
NI 172	VAT registered businesses showing growth (%)	14.1	14.2 CY 2008	3
NI 176	Working people with access to public transport (%)	79	- CY 2008	3
NI 187a	People on IB in homes with low energy ratings (%)	15	- FY 2008	3/09
NI 187b	People on IB in homes with high energy ratings (%)	16	- FY 2008	3/09

Notes:

- 1). " " means there are no data available for this indicator
- 2). Clicking in the cell containing the indicator number will bring up further information below:

Life chances

NI number	Description	Value	England	Data point
NI 076	Achievement of KS2 L4 in English & Maths (no.)	6	1,472	AY 2008/09
NI 078	Achievement:5 A*-C GCSEs (English & Math) (no.)	1	-	AY 2008/09
NI 082	Inequality gap in achievement at L2 by 19 (%)	53.3	56.8	AY 2008/09
NI 092	Achievement gap: low. 20% EYFSP & the rest (%)	26.9	33.9	AY 2008/09
NI 101	Children in care achieving 5 A*-C GCSEs (%)	-	9.8	AY 2008/09
NI 102a	FSM/non-FSM achievement gap at KS 2 and 4 (%)	32.2	32.2	AY 2008/09
NI 102b	FSM/non-FSM achievement gap: 5A*-C GCSE (%)	39.0	27.8	AY 2008/09
NI 105	SEN/non-SEN achievement gap (%)	46.2	46.5	AY 2008/09
NI 106	Young people from low incomes entering HE (%)	21	18	AY 2007/08
NI 112	Under 18 conception rate (%)	-17.5	-13.3	CY 2008
NI 117	16-18 yr old NEETs (%)	4.7	6.7	CY 2008

4

Financial support

NI number	Description	Value	England	Data point
NI 153	People claiming out of work benefits (%)	-	31.2	Aug 2009
NI 181	Time to process HB/CTB new claims (no.)	9	-	Q2 2009/10

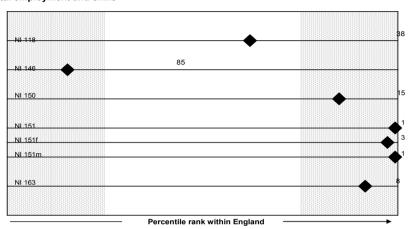
Rankings for: West Berkshire

This sheet displays the distributional analysis for the indicators related to child poverty. The charts below show where West Berkshire fits into the national distribution in England for the basket of indicators for each building block

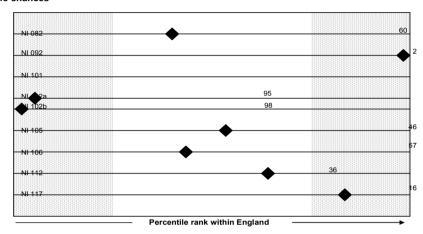
The further to the right (lower percentile rank) on each chart, the better the relative situation for the local authority (e.g. higher employment, lower percentage of non decent council homes) in comparison to other local authorities in England

The child poverty building blocks:

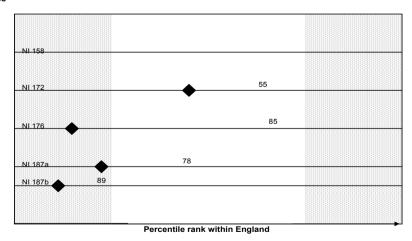
Parental employment and skills



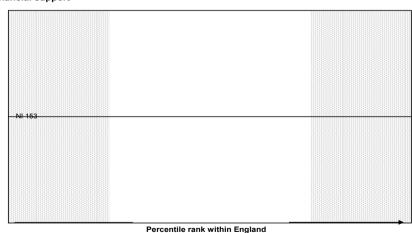
Life chances



Place



Financial support



Notes

- 1). When there is no data available for a particular indicator its ranking will not be plotted
- 2). Indicators presented as numbers, rather than percentages, on the 'Summary' sheet have not been plotted
- 3). Percentile ranks for each indicator shown in the charts are rounded to the nearest whole number

					St	art to End Da	ite	
NI	Boundary Id	Boundary Name	Latest Data	01/09/2004 to 31/08/2005	01/09/2005 to 31/08/2006	01/09/2006 to 31/08/2007	01/09/2007 to 31/08/2008	01/09/2008 to 31/08/2009
076	00MB	West Berkshire UA	6	3	7	4	4	6
078	00MB	West Berkshire UA	1	0	0	1	1	1
082	00MB	West Berkshire UA	53.3	43.3	48.3	48.9	41.1	53.3
092	00MB	West Berkshire UA	26.9	37.5	33.7	32.8	30	26.9
102a	00MB	West Berkshire UA	32.2	30.2	40.5	34.4	36.9	32.2
102b	00MB	West Berkshire UA	39	34.9	33.9	35.5	36.9	39
105	00MB	West Berkshire UA	46.2	45.8	44.8	48.5	47.2	46.2
106	00MB	West Berkshire UA	21		26	22	21	
106a	00MB	West Berkshire UA	13		7	14	13	
106b	00MB	West Berkshire UA	34		34	36	34	
106c	00MB	West Berkshire UA	33		32	35	33	
108b	00MB	West Berkshire UA	-10.1				-4.7	-10.1
108h	00MB	West Berkshire UA	-0.7				-1.8	-0.7

NI	Boundary Name	Latest Data	01/01/1998 To 31/12/1998	01/01/1999 to 31/12/1999	01/01/2000 To 31/12/2000	01/01/2001 to 31/12/1001	01/01/2002 to 31/12/2002	01/01/2003 To 31/12/2003	01/01/2004 To 31/12/2004	01/01/2005 to 31/12/2005	01/01/2006 to 31/12/2006	01/01/2007 to 31/12/2007	01/01/2008 to 31/12/2008
112	West Berkshire UA	-17.5	31	7.6	-11.2	-9.3	-16.2	-25.5	-9.5	-17.9	-24	-36.2	-17.5

			Date: Point in time						
			Percentage Number						
NI	Boundary	Latest Data -	Aug	Aug	Aug	Aug	Aug 2008		
	Name	Percentage	Number		2006	2007	2008	2007	
	West			lowest 25					
NI 116	Berkshire	10.2	3,470	percent	10.1	10.3	10.2	3,325	3,455

	Boundary Id	Boundary Name	Latest Data	01/01/2005 to 31/12/2005	01/01/2006 to 31/12/2006	01/01/2007 to 31/12/2007	01/01/2008 to 31/12/2008
NI 117	00MB	West Berkshire UA	4.7	6.4	5.2	4.4	4.7
	Boundary Id	Boundary Name	Latest Data	01/04/2004 to 31/03/2005	01/04/2005 to 31/03/2005	01/04/2006 to 31/03/2007	01/04/2007 to 31/03/2008
NI 118	00MB	West Berkshire UA	18.9	16.5	17.3	18.7	18.9

NI 146			Start to End Date
Boundary Id	Boundary Name	Latest Data	01/04/2008 to 31/03/2009
00MB	West Berkshire UA	3.2	3.2

NI 150			Start to End Date	
Boundary Id	Boundary Name	Latest Data	01/04/2008 to 31/03/2009	
00MB	West Berkshire UA	8.7	8.7	

					St	art to End Da	ite		
	Boundary Name	Latest Data	01/04/2007 to 31/03/2008	01/07/2007 to 30/06/2008	01/10/2007 to 30/09/2008	01/01/2008 to 31/12/2008	01/04/2008 to 31/03/2009	01/07/2008 to 30/06/2009	01/10/2008 to 30/09/2009
NI 151	West Berkshire UA	82	84.6	84.4	85	84	83.7	83.2	82
NI 151f	West Berkshire UA	77.5	79.2	79.1	78.9	78.5	78.6	78.8	77.5
NI 151m	West Berkshire UA		79.2	79.1	78.9	78.5	78.6	78.8	77.5

		01/01/00	01/10/04	01/01/05	01/04/05	01/07/05	01/10/05	01/01/06	01/04/06	01/10/06	01/01/07	01/04/07	01/07/07	01/10/07	01/01/08	01/04/08	01/07/08	01/10/08	01/01/09
	Latest	to																	
NI	Data	31/03/00	31/12/04	31/03/05	30/06/05	30/09/05	31/12/05	31/03/06	30/06/06	31/12/06	31/03/07	30/06/07	30/09/07	31/12/07	31/03/08	30/06/08	30/09/08	31/12/08	31/03/09
156	22	-	190	179	163	148	106	96	97	79	70	66	65	63	56	60	57	49	44

to to To 30/06/09 30/09/09 31/12/0	22
to to To	2/09
	o
01/04/09 01/07/09 01/10/09	0/09

			Start to End Date				
NI	Boundary Name	Latest Data	01/09/2006 to 31/08/2007	01/09/2007 to 31/08/2008	01/09/2008 to 01/09/2009		
161	West Berkshire UA	668	344	507	668		
162	West Berkshire UA	444	37	20	444		

NI 163			Start to End Date							
Boundary Id	Boundary Name	Latest Data	01/01/2001 to 31/12/2001	01/01/2002 to 31/12/2002	01/01/2003 to 31/12/2003	01/01/2004 to 31/12/2004	01/01/2005 to 31/12/2005	01/01/2006 to 31/12/2006	to	01/01/2008 to 31/12/2008
00MB	West Berkshire UA	77.7	72.1	73.4	74.4	73.6	75.9	75.8	75.7	77.7

			01/04/97	01/04/98	01/04/99	01/04/00	01/04/01	01/04/03	01/04/03	01/04/04	01/04/05	01/04/06	01/04/07	01/04/08	01/04/09
		Latest	to												
NI	Name	Data	31/03/98	31/03/99	31/03/00	31/03/01	31/03/02	1/03/03	31/03/04	31/03/05	31/03/06	31/03/07	31/03/08	31/03/09	31/03/10
	West														
166	Berks	608.8	329.2	359.8	418.9	411.8	473.4	483.9	491.8	539.6	517.4	554.8	517.9	600.1	608.8

NI 172				Start to I	End Date			
Boundary Id	Boundary Name	Latest Data	01/01/2003 to 31/12/2003	01/01/2004 to 31/12/2004	01/01/2005 to 31/12/2005	01/01/2006 to 31/12/2006	01/01/2007 to 31/12/2007	01/01/2008 to 31/12/2008
00MB	West Berkshire UA	14.1	9.8	10.1	10.4	13.3	13.4	14.1

NI 176		Start to End Date		
Boundary Id	Boundary Name	Latest Data	01/01/2007 to 31/12/2007	01/01/2008 to 31/12/2008
00MB	West Berkshire UA	79	79	79

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NI 181		Start to End Date		
Boundary Id	Boundary Name	Latest Data	01/04/2009 to 30/06/2009	01/07/2009 to 30/09/2009
00MB	West Berkshire UA	9	13	9

				Start to End Date
	Boundary Id	Boundary Name	Latest Data	01/04/2008 to 31/03/2009
NI187a	00MB	West Berkshire UA	15	15
NI 187b	00MB	West Berkshire UA	16	16

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Agenda Item 8

Title of Report: Update on Health and Wellbeing Board

Report to be considered by:

Health Scrutiny Panel

Date of Meeting: 19 June 2012

Purpose of Report: To update Health Scrutiny Panel on the progress of

work to establish a Health and Wellbeing Board

Recommended Action: To note the actions that have been taken to ensure a

fully functioning Health and Wellbeing Board is in

place by April 2013

Healthier Select Committee Chairman				
Name & Telephone No.: Councillor Quentin Webb – Tel (01635) 202646				
E-mail Address:	qwebb@westberks.gov.uk			

Contact Officer Details					
Name:	June Graves				
Job Title:	Head of Care Commissioning, Housing and Safeguarding				
Tel. No.:	01635 5198733				
E-mail Address:	jgraves@westberks.gov.uk				

Executive Report

1. Background

- 1.1 The Health and Social Care Bill has legislated for how the reforms set out in the NHS and Public Health white papers are to be put into practice. The overarching aim is to ensure that services are joined up around the needs of the people who use them, and resources are used to improve outcomes.
- 1.2 Each local authority with responsibility for social services is required to establish a Health and Wellbeing Board (HWB) as a statutory committee of the local authority by April 2013.

2. Introduction

- 2.1 HWBs are to bring together elected representatives and key NHS, public health and social care leaders along with representatives of the patient population to work in partnership.
- 2.2 To achieve the most effective integration and joint action, core members of the board must include GP consortia, the Director of Adult Services, the Director of Children's Services, the Director of Public Health (DPH) and a representative of the local HealthWatch. There must be a minimum of at least one locally elected representative.
- 2.3 Members of the HWB will need to have delegated authority to make decisions and commit their agency to specific courses of action, including committing resources.
- 2.4 Through the core membership of the HWB there will be a requirement to develop the understanding of local need through the Joint Strategic Needs Assessment (JSNA) and to oversee the development and implementation of a Joint Health and Wellbeing Strategy (JHWS).

3. Progress

- 3.1 In West Berkshire a HWB has been in place in shadow form acting as the steering group to oversee the establishment of the fully functioning board by April 2013, since June 2011. The board has agreed to meet six times per year and membership as follows:
 - Leader of the Council (Chair)
 - Portfolio Holder for Adult Social Care
 - Portfolio holder for Children and Young People
 - Portfolio Holder for Public Protection
 - Corporate Director for Communities
 - Director of Public Health

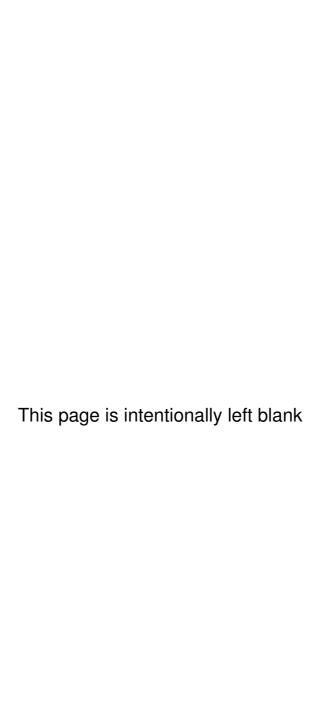
- Director of Joint Commissioning NHS Berkshire
- Representative of Newbury and Reading North West Clinical Commissioning Group
- LINk Chair (Healthwatch representative)
- 3.2 There are an agreed set of key responsibilities and functions for the board which are reviewed periodically, along with membership, to reflect local and national developments.
- 3.3 Routinely the board is updated on the development of the JSNA and JHWS, authorisation process for CCGs, NHS commissioning cycle and the establishment of Healthwatch which is also required by April 2013.
- 3.4 In addition there have been specific presentations from public health, work on dementia and national support for available for the development of HWBs.
- 3.5 At Head of Service level there is representation in the regional grouping associated with the Health and Social Care Partnership, providing specific support for the development of HWBs. Via this route it has been confirmed that progress in WBC is broadly in line with the rest of the country.
- 3.6 Main agenda item at the next meeting of the Board in June will be the presentation of a first draft of the JHWS, plus the consultation and engagement plan.

4. Conclusion

4.1 West Berkshire has made good progress in meeting the new requirement for a HWB. The opportunity of working across health and social care is already evident through the development of the JHWS. The adoption of this strategy, alongside supporting CCGs in attaining authorisation as part of the first wave, will be key tasks over the coming months as we move towards a fully functioning board structure.

Appendices

There are no Appendices to this report.



Agenda Item 9

Title of Report: Health Scrutiny Panel Work Programme

Report to be considered by:

Health Scrutiny Panel

Date of Meeting: 19 June 2012

Purpose of Report: To consider and prioritise the work programme for the

remainder of the municipal year 2012/13.

Recommended Action: To consider the current items and discuss any future

areas for scrutiny.

Health Scrutiny Panel Chairman					
Name & Telephone No.:	Councillor Quentin Webb – Tel (01635) 202646				
E-mail Address:	E-mail Address: qwebb@westberks.gov.uk				

Contact Officer Details					
Name:	Kate Phipps				
Job Title:	Policy Officer				
Tel. No.:	01635 519695				
E-mail Address:	kphipps@westberks.gov.uk				

Executive Report

1. Introduction

1.1 Members are requested to consider the latest work programme attached at Appendix A. In addition, Members are asked to give consideration to future areas for scrutiny.

Appendices

Appendix A – Health Scrutiny Panel Work Programme

Consultees

Local Stakeholders:

Officers Consulted: Head of Adult Social Care, Head of Policy and Communication

Trade Union: N/A

Health Scrutiny Panel Work Programme 2012/13

Reference	Subject / purpose	Methodology	Expected outcome	Review Body	Dates	Lead Officer(s) / Service Area	Portfolio Holder(s)	Status: In Progress Completed	Comments
OSMC/11/125	Day Centres To examine the provision of day centres across the District.	Task group review with information supplied by, and questioning of, lead officers and external partners.		HSP	Start: TBD End: TBD	Jan Evans – 2736 Adult Social Care	Cllr Joe Mooney	To be scheduled	
OSMC/11/104	Anti-Child Poverty Strategy	To monitor the strategy	Monitoring item	HSP	Start: On- going End: April 2012	Julia Waldman – 2815 Children and Young People	Cllr Irene Neill	In Progress	
OSMC/11/105	Dignity and Nutrition – Hospitals To review the Care Quality Commission report on Dignity and Nutrition - Hospitals	To survey and hold focus groups detailing information		HSP	Start: July 2011 End: April 2012	Nigel Owen, West Berkshire LINks, Age UK	Cllr Joe Mooney	In Progress	Update report received. To be presented at the next meeting
OSMC/11/106	Update on the Health and Wellbeing Board To receive updates from the Health and Wellbeing Board	To update members on Health and Wellbeing Board	Monitoring item	HSP	Ongoing	Teresa Bell / June Graves	Cllr Joe Mooney	In Progress	
OSMC/11/107	Update on the Health Service in West Berkshire	To update members on the changes to Health Service in West Berkshire	Monitoring item	HSP	Ongoing	Bev Searle - Director Joint Partnerships and Commissioning	Cllr Joe Mooney	In Progress	
OSMC/11/119	Continuing Healthcare (CHC) To examine the operation of the NHS CHC scheme in the NHS Berkshire West area	In meeting review		HSP	Start: Jan 2012 End: April 2012	Jan Evans – 2736 Adult Social Care	Cllr Joe Mooney	In Progress	

OSMC/12/122	Home Care To understand and critically appraise the systems and process in place for the provision of Home Care	TBD	HSP	Start: TBD End: TBD	Jan Evans – 2736 Adult Social Care	Cllr Joe Mooney	To be scheduled	Item incorporated at OSMC meeting of 2012-02-21
OSMC/12/124	The effect of health service reorganisation on local provision and private finance initiatives (PFI).	TBD	HSP	Start: TBD End: TBD				Item incorporated at OSMC meeting of 2012-02-21