Notice of Meeting



Scan here to access the public documents for this meeting

Health and Wellbeing Board

Thursday, 22nd July, 2021 at 9.30 am in Council Chamber Council Offices Market Street Newbury

Please note that a test of the fire and lockdown alarms will take place at 10am. If the alarm does not stop please follow instructions from officers.

Date of despatch of Agenda: Wednesday, 14 July 2021

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Gordon Oliver on (01635) 519486 e-mail: gordon.oliver1@westberks.gov.uk

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



Agenda - Health and Wellbeing Board to be held on Thursday, 22 July 2021 (continued)

To: Zahid Aziz (Thames Valley Police), Councillor Dominic Boeck (Executive Portfolio: Children, Young People and Education), Councillor Graham Bridgman (Executive Portfolio: Deputy Leader and Health & Wellbeing), Shairoz Claridge (Berkshire West CCG), Councillor Lynne Doherty (Leader of Council), Dom Hardy (Royal Berkshire NHS Foundation Trust), Matthew Hensby (Sovereign Housing Association), Paul Illman (Royal Berkshire Fire & Rescue Service), Dr Abid Irfan (Berkshire West CCG), Jessica Jhundoo Evans (Corn Exchange), Councillor Steve Masters (Shadow Portfolio Holder (Green Party) for Health and Wellbeing), Sean Murphy (Public Protection Manager), Meradin Peachey (Director of Public Health for Berkshire West), Matthew Pearce (Service Director - Communities and Wellbeing), Garry Poulson (Volunteer Centre West Berkshire), Andrew Sharp (Healthwatch West Berkshire), Andy Sharp (Executive Director (People)), Councillor Joanne Stewart (Executive Portfolio: Adult Social Care), Katie Summers (Berkshire West CCG) and Councillor Martha Vickers (Shadow spokesperson for H&WB) Also to: Councillor Rick Jones and Susanna Sales (Project and Programme Manager)

Agenda

Part I

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1	Apologies for Absence To receive apologies for inability to attend the meeting (if any).	7 - 8
2	Minutes To approve as a correct record the Minutes of the meeting of the Board held on 20 May 2021.	9 - 18
3	Actions arising from previous meeting(s) To consider outstanding actions from previous meeting(s).	19 - 20
4	Declarations of Interest	21 - 22



To remind Members of the need to record the existence and nature of any personal, disclosable pecuniary or other registrable interests in items on the agenda, in accordance with the Members' <u>Code of Conduct</u>.

The following are considered to be standing declarations applicable to all Health and Wellbeing Board meetings:

- Councillor Graham Bridgman Governor of Royal Berkshire Hospital NHS Foundation Trust, and Governor of Berkshire Healthcare NHS Foundation Trust; and
- Andrew Sharp Chair of Trustees for West Berks Rapid Response Cars.

5 **Public Questions**

23 - 24

Members of the Board to answer questions submitted by members of the public in accordance with the Executive Procedure Rules contained in the Council's Constitution.

6	Petitions	25 - 26
	Councillors or Members of the public may present any	
	petition which they have received. These will normally be	
	referred to the appropriate Committee without discussion.	

7 **Membership of Health and Wellbeing Board** 27 - 28 To agree any changes to Health and Wellbeing Board membership.

Items for discussion / decision

8	Joint Health and Wellbeing Strategy To receive an update on the development of the Berkshire West Health and Wellbeing Strategy and the associated Delivery Plan.	29 - 32
9	Domestic Abuse Board Terms of Reference To present the terms of reference for the West Berkshire Domestic Abuse Board for approval.	33 - 44
10	COVID-19 Recovery Dashboard To present the COVID-19 recovery dashboard developed by the Shared Public Health Team.	45 - 46
11	Health and Wellbeing Board Engagement Group Communications Toolkit	47 - 62



To present the first draft of the West Berkshire Health and Wellbeing Board Engagement Group Communication Toolkit.

12	Delivering the Health and Wellbeing Strategy Q4 2020/21 To provide a summary of progress in delivering the Delivery Plan for the Joint Health and Wellbeing Strategy during Quarter 4 of 2020/21.	63 - 72
13	Integrated Care Partnership Transformation Programme To provide an update on the latest Integrated Care Partnership activity.	73 - 74
14	Health and Wellbeing Board Forward Plan An opportunity for Board Members to suggest items to go on to the Forward Plan.	75 - 76
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15	COVID-19 Recovery and Renewal Strategy Update To note the updated Recovery and Renewal Strategy for West Berkshire, which was approved at Executive in June 2021.	77 - 116
16	Healthwatch West Berkshire To note the Healthwatch West Berkshire Annual Report 2020 – 2021.	117 - 144
17	Letter to Consultees on the Draft Statement of Gambling Principles 2022 (West Berkshire Council) To note the statutory consultation that West Berkshire Council is currently undertaking as part of the process of reviewing its Statement of Gambling Principles under the Gambling Act 2005.	145 - 146
18	Members' Question(s) Members of the Board to answer questions submitted by	147 - 148

Members of the Board to answer questions submitted by Councillors in accordance with the Executive Procedure Rules contained in the Council's Constitution. (Note: There were no questions submitted relating to items not included on this Agenda.)

 19
 Future meeting dates
 149 - 150



The dates for the 2021/22 Municipal Year are shown below:

- 30 September 2021
- 09 December 2021
- 17 February 2021

All meetings will start at 09:30.

Also, the Health and Wellbeing Conference will take place on 15 October 2021.

Sarah Clarke Service Director: Strategy and Governance

If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.



Agenda Item 1

Health and Wellbeing Board – 22 July 2021

Item 1 – Apologies

Verbal Item

Agenda Item 2

DRAFT

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

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING HELD ON THURSDAY, 20 MAY 2021

Present: Zahid Aziz (Thames Valley Police), Councillor Dominic Boeck (Executive Portfolio: Children, Young People and Education), Councillor Graham Bridgman (Executive Portfolio: Deputy Leader and Health & Wellbeing), Shairoz Claridge (Berkshire West CCG), Councillor Lynne Doherty (Leader of Council), Matthew Hensby (Sovereign Housing Association), Dr Abid Irfan (Berkshire West CCG), Councillor Owen Jeffery (Shadow Portfolio Holder: Health and Adult Social Care), Councillor Steve Masters (Shadow Portfolio Holder (Green Party) for Health and Wellbeing), Sean Murphy (Public Protection Manager), Meradin Peachey (Director of Public Health for Berkshire West), Matthew Pearce (Service Director - Communities and Wellbeing), Andrew Sharp (Healthwatch West Berkshire), Andy Sharp (Executive Director (People)) and Councillor Joanne Stewart (Executive Portfolio: Adult Social Care)

Also Present: Nick Carter (WBC - Chief Executive), Niki Cartwright (Berkshire West CCG), Paul Coe (Service Director, Adult Social Care), Councillor Rick Jones, Gordon Oliver (Corporate Policy Support), Sarah Rayfield (Acting Consultant in Public Health) and Samantha Shepherd (Programme Manager Local Communities)

Apologies for inability to attend the meeting: Charlotte Hall, Dom Hardy, Paul Illman, Garry Poulson, Reva Stewart and Councillor Martha Vickers

PART I

1 Non-Notice Procedural Motion

Councillor Graham Bridgman noted that the Council had previously passed a motion in relation to virtual meetings, which had expired with the emergency Coronavirus Regulations 2020. However, COVID restrictions remained in force and the Council had to manage meetings so they were legitimate and safe, while engaging Members unable to be present in the room, as well as members of the public.

Legislation and the Constitution only permitted those physically present to speak and vote. Therefore, it was proposed that standing orders be suspended, to allow Health and Wellbeing Board Members, officers and members of the public engaging remotely to speak at the option of the Chairman, and for Members of the Health and Wellbeing Board to take part in an indicative vote, prior to the formal vote, which would inform the votes of those physically present.

At the vote, the motion was carried.

2 Election of Chairman

RESOLVED that Councillor Graham Bridgman be elected as Chairman of the Health and Wellbeing Board for the 2021/22 Municipal Year.

3 Election of Vice-Chairman

RESOLVED that Dr Abid Irfan be elected as Vice-Chairman of the Health and Wellbeing Board for the 2021/22 Municipal Year.

4 Minutes

The Chairman asked that Dr Bal Bahia's declaration of interest be removed from the minutes as he was listed as an apology for that meeting.

Councillor Joanne Stewart (Executive Portfolio: Adult Social Care) asked that her name be added to the record of those who attended.

Subject to the above changes, the Minutes of the meeting held on 28 January 2021 were approved as a true and correct record and signed by the Chairman.

5 Actions arising from previous meeting(s)

151 - Andrew Sharp had spoken with Thatcham Research. They were still undecided, so he undertook to follow-up again.

153 – It was noted that the Peer Review would be carried out at a future date post-Covid.

158 – It was noted that the Cultural Heritage Strategy Delivery group planned to bring a report to the July meeting.

160 – It was noted that the Covid Recovery Dashboard was still in development and would hopefully be live in 4-6 weeks.

6 Declarations of Interest

Councillor Graham Bridgman and Andrew Sharp declared standing interests as set out in the agenda, but reported that, as their interests were personal or an other registrable interest, but not a disclosable pecuniary interest, they determined to remain to take part in the debate and vote on items where these may be relevant.

7 Public Questions

A full transcription of the public and Member question and answer sessions is available from the following link: <u>Transcription of Q&As</u>

- a) The question submitted by Ms Paula Saunderson on the subject of the low rate of normal Continuous Health Care awarded for long-term dementia patients was answered Interim Director of Joint Commissioning from the Berkshire West Clinical Commissioning Group.
- b) The question submitted by Ms Paula Saunderson on the subject of how lessons would be learned from the pandemic was answered by the Chairman of the Health and Wellbeing Board.
- c) The question submitted by Ms Paula Saunderson on the subject of the future availability of affordable nursing places for Dementia Patients in their later stages was answered by West Berkshire Council's Executive Director People.
- d) The question submitted by Ms Paula Saunderson on the subject of the availability of affordable residential respite care for full-time, unpaid dementia carers was answered by West Berkshire Council's Executive Director People.
- e) The question submitted by Mr Paul Morgan on the budget allocated for Health & Wellbeing board over the next 24 months and projects that this money will be spent on and when was answered by the Chairman of the Health and Wellbeing Board.

8 Petitions

There were no petitions presented to the Board.

9 Draft Joint Health and Wellbeing Strategy

Sarah Rayfield presented the first draft of the Joint Health and Wellbeing Strategy to the Board.

She indicated that there were eight principles embedded in the Strategy:

- Recovery from COVID-19
- Engagement
- Prevention
- Empowerment & self-care
- Digital enablement
- Social cohesion
- Integration
- Continuous learning

There were also five health and wellbeing priorities, which had been identified through consultation:

- Reduce the differences in health between different groups of people
- Support individuals at high risk of bad health outcomes to live healthy lives
- Help children and families in early years
- Good mental health and wellbeing for all children and young people
- Good mental health and wellbeing for all adults

Feedback on the draft strategy was sought from the Board.

It was noted that the draft Strategy would also be presented to the Reading and Wokingham Health and Wellbeing Boards for review and feedback.

West Berkshire Council's Legal Team had confirmed the need for a formal consultation on the draft Strategy. It was proposed that this should run for six weeks during June and July alongside continuing stakeholder engagement to inform the development of the Delivery Plan.

Councillor Lynne Doherty asked how a seamless, cradle-to-grave provision of mental health support was to be provided when children's and adults' mental health were covered by different priorities in the strategy.

Sarah Rayfield confirmed that this had been discussed, but it was decided that the different age groups should be mentioned separately to ensure children's mental health was not lost sight of and to recognise that different services handled provision for different age groups. She indicated that the need for a seamless transition would be picked up in the Strategy.

Councillor Dominic Boeck asked about the communication strategy for informing the wider public; he felt the document was aimed more towards professionals.

Sarah Rayfield acknowledged that is was not as accessible as it could be and noted that in the implementation phase, efforts would be made to embed public engagement as an ongoing activity and facilitate understanding.

Councillor Owen Jeffery queried the process by which priorities were determined. Sarah Rayfield explained that they were based on data relating to the impact of previous

strategies and feedback from the public and other stakeholders about what would make the biggest difference in their lives. Public feedback had been used to reduce the priorities from 11 to 5. The order in which they were listed did not reflect the status of any individual priority.

Matt Pearce noted the process would be guided by the Engaging and Enabling Local Communities programme and the Health and Wellbeing Engagement Group would also support communications relating to the Strategy.

The Chairman noted that there was a theme of tackling health inequalities running through the strategy and other papers being discussed at the meeting.

RESOLVED that the Board supported the amended proposal for a six-week consultation on the draft Strategy with further stakeholder engagement as part of development of the Delivery Plan.

10 Build Back Fairer: The COVID-19 Marmot Review

Sarah Rayfield summarised the paper provided to the Board on the COVID-19 Marmot Review. This set out how certain groups had been disproportionately affected by the COVID-19 pandemic. The report included a number of recommendations relating to:

- Reducing inequalities in mortality from COVID-19
- Reducing the impact on early years and inequalities in education
- Improving outcomes for children and young people
- Creating fairer employment and good work for all
- Ensuring a healthy standard of living for all
- Creating and developing healthy and sustainable places and communities
- Strengthening the role and impact of ill-health prevention

She noted that many of the recommendations were aimed at national level, but there was a need to tackle health inequalities within local strategies.

Dr Abid Irfan noted that the report made an excellent critique of the differential impact of Covid within communities and observed that there was a significant amount of work to do to address this, including at the Berkshire West 'place' level. He suggested that even addressing 50-60 percent of the recommendations would have a significant impact on communities.

Councillor Lynne Doherty suggested that these issues should be picked up in West Berkshire's Recovery and Renewal Strategy. She noted that some impacts may not be felt as much in West Berkshire as in other places, for example, West Berkshire had succeeded in reducing rough sleeping. She stressed the need to consider which bits were most relevant to this area.

The Chairman stressed the need for all of the recommendations to be addressed.

RESOLVED that the report be noted.

11 Health Inequalities Taskforce

Sarah Rayfield presented the report. She explained that the Taskforce had been established to tackle inequalities and this was a pillar of the Joint Health & Wellbeing Strategy. The Taskforce included officers from across West Berkshire Council and the Clinical Commissioning Group. It would deliver a coordinated approach and would be responsible for developing and delivering an action plan. This would be informed by data on what was driving health inequalities locally, a mapping exercise to understand the

initiatives already in place, and would draw on evidence of what worked well locally and elsewhere.

The Board's approval was sought to formalise the taskforce as a new sub-group of the Health & Wellbeing Board, reporting to the Board via the Steering Group.

The Chairman noted that there was a review of the Council's Constitution, which would ensure a consistent approach to the Terms of Reference for different committees and sub-groups. He thanks Sarah Rayfield for her work on developing the draft Strategy and setting up the Taskforce.

Dr Irfan noted that the Integrated Care Partnership already had a Prevention of Health Inequalities Board and queried how the taskforce would link with this to avoid duplication of efforts. Sarah Rayfield stated that she has not yet made a connection with that Board, but undertook to do so.

Councillor Stewart expressed support for the Taskforce as a way to ensure that expert voices were heard and for health considerations to be embedded across all Council policies.

Matt Pearce expressed his thanks to Sarah Rayfield. He noted that work had been done with local communities to understand their needs. He indicated that it was a complex situation that would take time to address and the Taskforce would not be able to address the problems alone – they would need to work with partners and the communities to understand their assets and needs.

Andy Sharp suggested that there was a need for the Taskforce to exercise a 'place' leadership role and highlighted the need to understand how it would engage with other partners.

RESOLVED that the new Health Inequalities Taskforce be formalised and that it should report into the Board via the Steering Group.

12 Healthwatch Covid Patient Experience Survey Report

Andrew Sharp presented the report. It was noted that the data was gathered between May and August 2020 and mostly related to the first wave of the pandemic and preceded the second lockdown. The survey had been undertaken jointly with Reading and Wokingham – West Berkshire had the largest response. More compliments than complaints were seen in the free-text responses, but over 240 local families were bereaved due to COVID-19. He noted that responses were still awaited from the Integrated Care System and Integrated Care Partnership. The report stressed the need to learn from mistakes so more lives could be saved in the event of a future pandemic.

Shairoz Claridge welcomed the report and its insights. She indicated that the CCG response was being prepared. She noted that lessons were learned from Wave 1 which informed the response of the NHS to Wave 2. Key meetings had been maintained to coordinate actions, with some ICP meetings moved to shorter sessions. She stated that there had been lots of challenges due to social distancing and infection control, but services were back to pre-COVID levels with a mix of virtual and face-to-face meetings. She indicated that the NHS was supporting decompression of staff and recognised the need to keep learning and improving.

Councillor Owen Jeffery reinforced the need to not just go back to normal after COVID-19 and to apply lessons learned in future years.

Andy Sharp indicated that the report was useful to show how public perceptions had changed through the pandemic. He reflected that some of the difficulties faced in the first

wave were outside of local agencies' control. He welcomed the report and ongoing discussions.

Councillor Lynne Doherty observed that there would be learning at the national level and queried how all the different research and lessons could be pulled together in West Berkshire. She noted that Overview and Scrutiny Management Commission would undertake a review later in the year and stressed the need to ensure that all voices were heard.

Councillor Joanne Stewart noted that there had been discussions on social media about difficulties in accessing dentists during the pandemic. She also welcomed that fact that the report included compliments and gave a balanced view.

The Chairman agreed that there was a clear need to learn lessons. He emphasises the need for further research to cover the second wave and the impacts of opening back up.

Andrew Sharp noted there were areas action could already be taken. He indicated that he had an NHS Dentistry contact who was willing to talk to relevant partners. He suggested that the Planning Authority would be an important partner. He noted there was still an issue with people not attending appointments, but it was not clear why. He indicated that there was an opportunity to promote careers in health and social care. He concluded by stressing the need to have open loop learning and to build back better and fairer, and to be better prepared for the next pandemic.

RESOLVED that the report be noted.

13 Integrated Care Partnership Transformation Programme

Andy Sharp provided an update on the work of the Integrated Care Partnership (ICP).

The Joint Commissioning Board (JCB) had looked at the potential for working across Berkshire West to get better value for money and improve outcomes for residents. There were limited opportunities for joint commissioning, but two projects would be progressed:

- Development of a Joint Nursing Care Strategy for Berkshire West looking at how to grow, shape and commission in the marketplace.
- A project to develop joint funding framework for health tasks delivered through local authorities, which were above and beyond social care.

Flagship programmes identified for 2021/2022 included:

- Cardio-vascular disease prevention (health inequalities)
- Ageing well programme
- Emotional health and wellbeing for children and young people
- Learning disabilities and autism
- Prevention Berkshire West Can (current flagship project)
- Rapid discharge from hospital (current flagship project)

Further detail would be fleshed out for each of the above projects before reporting back to the Unified Executive, with additional resources to be allocated to allow them to be progressed.

There had also been discussion about the Integrated Care System (ICS) footprints and the potential for a Berkshire ICS if the Frimley arrangement ended, but no formal decisions had been made.

Andy Sharp indicated that further updates would be made at future meetings.

The Chairman and Andrew Sharp expressed interest in the potential of a Berkshire ICS, which would make sense from a shared services perspective and there were good practices that could be brought over from Berkshire East.

Andrew Sharp also highlighted challenges around retaining the health and social care workforce and suggested that the Unified Executive should keep this on their radar. Andy Sharp agreed and indicated that workforce would be an enabler for the flagship projects and a joined up approach was needed. He indicated that this would be picked up by the Delivery Group.

RESOLVED that the report be noted.

14 Engaging and Enabling Local Communities

Sam Shepherd presented a report setting out the 'Engaging and Enabling Local Communities' work programme. This was about a different way of working and would be aligned with the Joint Health and Wellbeing Strategy, Council Strategy, Recovery and Renewal Strategy and the Communications and Engagement Strategy.

The Programme sought to understand and support community connections and find local solutions to challenges. She stressed that it was about engaging all communities, including those who were seldom heard, as well as the voluntary sector and town / parish councils. The benefits were set out in the presentation.

The project would deliver qualitative benefits such as improved connectedness and satisfaction with relationships with statutory partners, and would seek to measure how these changed.

The presentation included case studies from Oxfordshire and Bristol as well as local examples.

The programme would be overseen by the Customer First Programme Board. It was proposed to have a Community Alliance under the governance structure of the Health and Wellbeing Board, including the voluntary, community and statutory sectors. This would take forward lessons learned from Covid.

The proposal was for a board or group of individuals with the skills to unlock the potential in local communities to find solutions and for a stakeholder forum to ensure voices were heard from across a wide spectrum of the community. The Health and Wellbeing Board's support was requested for:

- The vision set out in the report.
- The establishment of a Community Alliance (final form to be determined).
- The establishment of a stakeholder forum (for the voluntary and community sectors).

Matt Pearce suggested this would be fundamental to improving health and wellbeing across the district and was about listening, understanding needs and 'doing with' rather than 'doing to'.

Councillor Lynne Doherty commented that it would build on work done by the Building Communities Together Team and the Health and Wellbeing Board in holding conversations to identify needs rather than imposing solutions. She welcomed the proposed next steps and noted that the Council had been working with over 90 local community groups during the pandemic and there was a need to carry on this work.

Andrew Sharp hoped that this proposal would represent a step forward. He stressed the importance of looking at wider determinants of health and agreed with the importance of utilising the enthusiasm of the local community.

Councillor Rick Jones expressed his support for the proposal and observed that inequalities were difficult to address, but this should be a key focus for the Board and suggested that the Programme could make a real difference.

Sam Shepherd noted that work on harnessing the community spirit had started with an initiative to create Health and Wellbeing Ambassadors.

RESOLVED that:

- a) the proposed vision for engaging and enabling communities be agreed;
- b) a 'Community Alliance' be established to oversee the work pertaining to 'engaging and enabling communities'
- c) a Stakeholder Forum be established to create channels of communication and influence with a wider network of community, voluntary and resident Groups.

15 Health and Wellbeing Board Forward Plan

The Chairman suggested that Members should email him with details of any proposed changes to the Forward Plan and copy in Gordon Oliver.

Notice was given of a workshop being held on the 24th June 2021. Members were advised that details would follow later.

16 Members' Question(s)

No questions were submitted by Members.

17 Covid-19 Situational Report

The Covid-19 Situational Report as presented to the most recent Local Outbreak Engagement Board was included in the agenda papers for information only.

RESOLVED that the report be noted.

18 Housing Strategy

The adopted Housing Strategy was included in the agenda papers for information only. **RESOLVED that** the report be noted.

19 Tobacco Control Plan

The Tobacco Control Plan was included in the agenda papers for information. **RESOLVED that** the report be noted.

20 Future meeting dates

The dates for the 2021/22 Municipal Year were noted as follows:

- 22 July 2021
- 30 September 2021
- 09 December 2021
- 17 February 2021

All meetings will start at 09:30.

It was noted that meetings would continue to be streamed once COVID restrictions allowed in-person meetings to resume.

(The meeting commenced at 9.30 am and closed at 11.10 am)

CHAIRMAN	
Date of Signature	

Actions arising from Previous Meetings of the Health and Wellbeing Board

RefNo	Meeting	Action	Action Lead	Agency	Agenda item	Com
151	24/09/2020	Contact Thatcham Research about becoming an employer representative on the Health and Wellbeing Board	Andrew Sharp	Healthwatch West Berkshire	Health and Wellbeing Board Membership	follow
153	24/09/2020	Seek another peer review of Health and Wellbeing Board.	Cllr Graham Bridgman	WBC	Health and Wellbeing Board Meetings	Defer
158		Cultural Heritage Strategy Delivery Group to be set up, with an interim report to be brought to the July meeting	Paul James	WBC	Cultural Heritage Strategy 2020-2030	Super be ove Board Opera neces Board
160	28/01/2021	Develop Covid Recovery Dashboard Tracker to monitor the broader effects of the pandemic on our community	Matt Pearce	WBC	Member Questions	In pro Public end o Group
161	20/05/2021	CCG to undertake a review of Continuing Health Care and its local application with a view to harmonising this across the Berkshire West footprint and to understand the reasons for the awarding of eligibility.	Katie Summers / Niki Cartwright	CCG	Public Questions	In pro with a Decer
161	20/05/2021	Provide Mrs Saunderson with the link to the online form for members of the public to nominate topics for scrutiny.	Cllr Graham Bridgman	WBC	Public Questions	Comp
162	20/05/2021	Provide Mrs Saunderson with the link to the Market Position Statement on the Council's website	Andy Sharp	WBC	Public Questions	Comp
163	20/05/2021	Provide Mrs Saunderson with information on respite care	Andy Sharp	WBC	Public Questions	Comp
164	20/05/2021	Ensure the Strategy addresses the transition between mental health services for children and young people and for adults.	Sarah Rayfield	WBC	Joint Health and Wellbeing Strategy	In pro and W the de
165	20/05/2021	Co-ordinate activity between the Inequalities Taskforce and the Integrated Care Partnership's Prevention and Health Inequalities Board.	Sarah Rayfield	WBC	Inequalities Taskforce	In pro Preve develo ensuro founda
						1.2

mment

progress. Initial approach made. Gordon Oliver has wed up. Andrew Sharp has been in further cussions and will make one final approach. erred. To be undertaken post-Covid.

perseded. It has been agreed that the strategy will overseen by the Culture and Libraries Programme ard, with updates provided to Corporate Board and erations Board as needed. Therefore, it is no longer essary to bring a report to Health and Wellbeing ırd.

progress. This is being developed by the Shared blic Health Team and should be completed by the of July. This will be monitored by the Recovery oup on an ongoing basis.

progress. Review to be completed within 6 months a report back to Health and Wellbeing Board in ember 2021.

mplete. This was sent by email on 24 May.

mplete. This was sent by email on 24 May.

nplete. This was sent by email on 24 May.

progress. This will be incorporated into the Health Wellbeing Strategy and will also be addressed in delivery plan for West Berkshire.

progress. The Taskforce will be engaging with the vention and Health Inequalities Board as part of the elopment of the delivery plans. This will help to ure alignment across the system and also set the ndations for coordination of activity going forward.

Last Updated: 12 July 2021

Agenda Item ω Page 20

Agenda Item 4

Health and Wellbeing Board – 22 July 2021

Item 4 – Declarations of Interest

Verbal Item

Public Questions to be answered at the Health and Wellbeing Board meeting on 22 July 2021.

Members of Health and Wellbeing Board to answer questions submitted by members of the public in accordance with the Executive Procedure Rules contained in the Council's Constitution.

(a) Question submitted to the Portfolio Holder for Health and Wellbeing by Mrs Paula Saunderson:

Concerning the Action notified in the 20th May 2021 meeting, to undertake a <u>'Review of Continuous Health Care and its local application'</u>, will this Action Arising be monitored by this Board, or will it be transferred to the new Health Scrutiny Board?

(b) Question submitted to the Berkshire West Clinical Commissioning Group by Mrs Paula Saunderson:

In May 2021, the timescale for delivery of the "Review of Continuous Health Care results and its local application' was 'within 6 months', please can you advise whether this is likely to be achieved?

(c) Question submitted to the Berkshire West Clinical Commissioning Group by Mrs Paula Saunderson:

Please may I ask that the scope of the 'Review of Continuous Health Care and its local application' work does look at the process for applying for Standard Continuous Health Care for Family Unpaid Carers who are providing Domiciliary Care at home, who are not on the radar of an Adult Social Care department, with Berkshire West Clinical Commissioning Group providing clear diagrammatic flow charts (Process Maps) for the Application Process on its web site?

(d) Question submitted to the Portfolio Holder for Health and Wellbeing by Mrs Paula Saunderson:

Does your new Health and Wellbeing Board <u>Health Inequalities Task</u> <u>Force</u> have within its scope the widely recognised Inequalities in Dementia Clinical Pathway and later stage Care provision in comparison to other Incurable Terminal Illnesses?

(e) Question submitted to the Portfolio Holder for Health and Wellbeing by Mrs Paula Saunderson:

Please may we have a Structure Chart which explains the fit and headline purpose of the various boards and task forces relating to Health and Wellbeing to include established and newly formed bodies and projects?

Agenda Item 6

Health and Wellbeing Board – 22 July 2021

Item 6 – Petitions

Verbal Item

Agenda Item 7

Health and Wellbeing Board – 22 July 2021

Item 7 – Membership of the Health and Wellbeing Board

Verbal Item

Development of the Berkshire West Health and Wellbeing Strategy

Report being considered by:	Health and Wellbeing Board
On:	22 nd July 2021
Report Author:	Sarah Rayfield
Item for:	Information

1. **Purpose of the Report**

To give an update on the development of the Berkshire West Health and Wellbeing Strategy.

2. Recommendation(s)

To note that:

- the Health and Wellbeing Strategy will be refined and finalised following the outcome of the public consultation.
- the development of the delivery plan for West Berkshire to take place concurrently with the public consultation, to ensure that there is enough time to engage with stakeholders and key partners.

3. How the Health and Wellbeing Board can help

- 3.1 For the Board to support the public consultation (23^{rd} June 4^{th} August 2021).
- 3.2 For members of the Board to support the development of the local delivery plan which will describe how West Berkshire will implement the new Strategy.

Will the recommendation require the matter to be referred to the Executive for final	No: 🛛
determination?	

4. Introduction/Background

- 4.1 The Berkshire West Health and Wellbeing Strategy has been in development since March 2020.
- 4.2 Regular updates on the development of the Strategy have been provided to each of the three Health and Wellbeing Boards and also to the Unified Executive of the ICP.
- 4.3 The draft Strategy is currently undergoing a six week public consultation period (starting 23rd June 2021).

5. Supporting Information

5.1 The stages of the Strategy development are as follows:

Phase	Timeframe
Defining the current state	March – July 2020
Prioritisation Process	August – September 2020
Public engagement and further engagement with stakeholders	October 2020 – February 2021
Production of the Joint Health and Wellbeing Strategy	March - June 2021
Public Consultation (six weeks)	June – August 2021
Development of local delivery plans for West Berkshire	June – August 2021
Refinement of the Strategy and production of the final version	August 2021

- 5.2 The new Strategy consists of five health and wellbeing priorities:
 - (1) Reduce the differences in health between different groups of people
 - (2) Support individuals at high risk of bad health outcomes to live healthy lives
 - (3) Help children and families in early years
 - (4) Promote good mental health and wellbeing for all children and young people
 - (5) Promote good mental health and wellbeing for all adults.
- 5.3 The priorities are interrelated and interdependent, with the number one priority of reducing healthy inequalities acting as a pillar and all eight principles driving all implementation plans.
- 5.4 The eight principles of the Strategy are: Recovery from Covid-19, Engagement, Prevention and early integration, Empowerment and self-care, Digital enablement, Social cohesion, Integration, and Continuous learning.
- 5.5 Each Health and Wellbeing Board is now developing their own delivery plan to describe what local actions need to be taken in order to implement the shared Strategy. These will also include actions to be taken at a Berkshire West level, when there are clear benefits to working at scale across a larger geographical footprint.
- 5.6 In West Berkshire, the development of the delivery plan started with a HWB Workshop on 24th June. This workshop included a breakout room discussion for each of the five priorities.
- 5.7 The discussion for each priority focused on the following questions:
 - (1) What do we need to do locally to implement this priority?

- (2) How can we measure our progress and what indicators should we use?
- (3) Which partners do we need to work with?
- 5.8 The delivery plan will include targets for the actions under each priority, along with indicators to measure our progress over the next ten years.
- 5.9 Following the workshop, further engagement is now taking place with key partners and stakeholders, along with the Health and Wellbeing Board Steering group and its Sub-groups to develop the delivery plan.
- 5.10 It is proposed that the following groups will take ownership of each of the new priorities.

Reduce the differences in health between different groups of people	Health inequalities taskforce
Support individuals at high risk of bad health	ТВС
outcomes to live healthy lives	
Help children and families in early years	Children's Delivery Group
Promote good mental health and wellbeing	Children's Delivery Group
for all children and young people	(Berkshire West Future in Mind group)
Promote good mental health and wellbeing	Mental Health Action Group
for all adults	Suicide Prevention Action Group

5.11 Delivery of the second priority (support individuals at high risk of bad health outcomes to live healthy lives) may be undertaken by a number of existing groups, including: Homeless Strategy group, Building Communities together, Ageing well task group, Skills and Enterprise Partnership and the Carers Strategy Action group. There is not currently one group which would provide oversight of all of the work against this priority.

6. **Options for Consideration**

6.1 For development of the delivery plans to proceed as outlined above, alongside the current public consultation on the draft Health and Wellbeing Strategy. This would enable ongoing engagement with key partners and stakeholders as part of this process.

OR

6.2 To wait until after the public consultation on the draft Strategy is completed, before developing delivery plans for implementation. However, this may result in less engagement with stakeholders and has the potential to delay the completion of the Strategy and delivery plans.

7. **Proposal(s)**

For development of the delivery plans to take place alongside the public consultation.

8. Conclusion(s)

8.1 This paper presents an update on the development of the Health and Wellbeing Strategy and plans for development of a local delivery plan for West Berkshire.

8.2 Once the public consultation has been completed, the Strategy will be further refined. The final Strategy and accompanying delivery plan will be presented to the HWB in September 2021.

9. Consultation and Engagement

The public engagement undertaken as part of developing this strategy is described in the associated engagement report.

10. Appendices

Appendix 1 - Draft Health and Wellbeing Strategy for Berkshire West

Appendix 2 – Draft Public Engagement report

Background Papers:

None

Health and Wellbeing Priorities 2019/20 Supported:

First 1001 days – give every child the best start in life

Primary Care Networks

Health and Wellbeing Strategic Aims Supported:

The proposals will help achieve the following Health and Wellbeing Strategy aim(s):

- Give every child the best start in life
- Support mental health and wellbeing throughout life
- Reduce premature mortality by helping people lead healthier lives
- Build a thriving and sustainable environment in which communities can flourish
- Help older people maintain a healthy, independent life for as long as possible

The draft Strategy includes a new set of strategic aims, which once adopted will guide the work of the Health and Wellbeing Board.

Officer details:

Name:	Sarah Rayfield
Job Title:	Acting consultant in Public Health
Tel No:	*
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West Berkshire Domestic Abuse Board Terms of Reference

Report being considered by:	Health and Wellbeing Board
On:	22 July 2021
Report Author:	Jade Wilder
Item for:	Decision

1. Purpose of the Report

This report has been produced for the Health and Wellbeing Board ("HWB") to formally sign off the newly established West Berkshire Domestic Abuse Board ("DAB") Terms of Reference ("ToR") and accompanying appendices which have been developed to support the work of the new DAB as required within Part 4 (Delivery of Support to Victims of Domestic Abuse, including Children, in Domestic Abuse Safe Accommodation Services) of the Domestic Abuse Act 2021 ("the Act").

2. Recommendation(s)

It is recommended that the HWB signs off the DAB ToR in its current format now that they have been finalised and signed off by the DAB and sighted by the Building Communities Together Partnership and Housing Board.

3. How the Health and Wellbeing Board can help

The HWB will be required to sign off the final draft of the DAB ToR and accompanying appendices now that DAB has been set up locally in line with Part 4 of the Act to ensure all statutory functions/responsibilities are being met.

Will the recommendation require the matter to be referred to the Executive for final	Yes:	No: 🛛
determination?		

4. Introduction/Background

- 4.1 The Domestic Abuse Bill received Royal Assent on 29th April 2021 to become an Act of Law. Various duties have been included in the new Act but at Part 4 generally and s 58 specifically, it requires a "relevant local authority" (which term includes West Berkshire Council ("WBC")) to appoint a domestic abuse local partnership board for the purposes of providing advice to the authority about certain functions and aspects of domestic abuse.
- 4.2 In light of this, the DAB shall be the WBC domestic abuse local partnership board constituted under the Act and has been formed by revising the Domestic Abuse Strategy Group.

- 4.3 The DAB must ensure that the functions under Part 4 of the Act which specifically looks at the delivery of support to victims of domestic abuse, including children, in domestic abuse safe accommodation services are being met.
- 4.4 To accompany Part 4 of the Act, the MHCLG recently published its updated draft statutory guidance and this has been used to create the DAB ToR.
- 4.5 The new DAB must fulfil certain specific functions in order to meet this new duty which have been reflected in the ToR. The functions include:
 - a) Assessing the scale and nature of the needs;
 - b) Preparing and publishing a whole-area domestic abuse strategy;
 - c) Giving effect to the strategy by making commissioning and decommissioning decisions;
 - d) Monitoring and evaluating the effectiveness of the strategy;
 - e) Report on progress and how funding has been used to MHCLG.
- 4.6 The statutory membership requirements of the DAB, as per the draft statutory guidance, will need to consist of representatives of West Berkshire Council, Victims of domestic abuse ("DA"), Children of DA victims, DA Charities and other Voluntary and Community Sector ("VCS") organisations, Health Care services, Policing or criminal justice.
- 4.7 The MHCLG has allocated funding to support local authorities with implementing the requirement laid out in Part 4 of the Act. In light of this, West Berkshire Council was allocated and has received £250,101 in the form of a non-ringfenced grant which will support the work of the DAB under Part 4 of the Act. This covers two combined aspects; support costs i.e. commissioning services and administrative burdens.
- 4.8 It is yet to be determined how long this funding will be available for and if the amount is subject to change but it is expected that it will be paid on an annual basis and be non-ringfenced for the first three years.
- 4.9 The new DAB will support the WBC in meeting these functions. This will be through providing expert advice, data and information for the needs assessment, feeding into the development of domestic abuse strategies and reporting requirements, as well as supporting a joined-up approach amongst wider domestic abuse areas.

5. Supporting Information

- 5.1 The first DAB meeting took place on 17th June where the draft ToR and procedure note were reviewed which sets out the new functions and requirements to ensure all duties are met under the new Act. This was further amended outside of the meeting by members of the DAB.
- 5.2 In order to meet the membership requirement for domestic abuse victims and children of domestic abuse victims to be represented, the DAB approved the introduction of a sub group to capture these voices which will feed into the DAB. This is currently being referred to as a 'lived experience' sub group and this piece of work is underway. It is

hoped that this group shall be set up and have the appropriate confidentially/safety measures in place by the next meeting scheduled for 23rd September 2021.

5.3 The DAB has been split into two parts to cover the operational and strategic duties. Not all members will be required to attend the full meeting, some will leave before the strategic part of the meeting begins in order to ensure the strategic part works effectively. This part will also have more seniority so that decisions can be made. It was agreed at the DAB meeting that an additional appendix would be added to the ToR which notes the representatives who are attending and where these changes take place.

6. **Options for Consideration**

None.

7. Proposal(s)

It is proposed that the HWB accepts the West Berkshire DAB ToR and accompanying appendices in order for them to be officially signed off.

8. Conclusion(s)

- 8.1 The DAB has been established as required within Part 4 generally and specifically s 58 of the Act. The first DAB meeting was very successful and engaging from partner agencies. It is likely that the DAB will develop over time as it is further implemented but the ToR are an accurate reflection of its responsibilities at present.
- 8.2 As part of constitutional work underway, it is acknowledged that a standardised ToR template will be developed and therefore the DAB ToR may be subject to change in the future to adopt this format.

9. Consultation and Engagement

- 9.1 Andy Sharp Executive Director, People
- 9.2 Janet Weeks Housing Service Manager
- 9.3 Councillor Graham Bridgman Deputy Leader and Executive Member for Health and Wellbeing

10. Appendices

- Appendix A Draft Terms of Reference for West Berkshire Domestic Abuse Board
- Appendix B Draft Procedure Note for West Berkshire Domestic Abuse Board

Appendix C – Domestic Abuse Board Representatives

Background Papers:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_ data/file/993825/Domestic_Abuse_Act_-_draft_statutory_guidance.pdf

Health and Wellbeing Priorities 2018/19 Supported:

- \boxtimes Support mental health and wellbeing for adults
- \square Improve access to employment for vulnerable people

Health and Wellbeing Strategic Aims Supported:

The proposals will help achieve the following Health and Wellbeing Strategy aim(s):

- \boxtimes Give every child the best start in life
- Support mental health and wellbeing throughout life
- Reduce premature mortality by helping people lead healthier lives
 - Build a thriving and sustainable environment in which communities can flourish
 - Help older people maintain a healthy, independent life for as long as possible

The proposals contained in this report will help to achieve the above Health and Wellbeing Strategy aim by ensuring the new Domestic Abuse Board performs correctly in line with the appropriate legislations to support victims of domestic abuse and children of domestic abuse victims.

Officer details:

Name:	Jade Wilder
Job Title:	Community Coordinator (Prevention)
Tel No:	01635 519982
E-mail Address:	Jade.Wilder@westberks.gov.uk

Appendix A

West Berkshire Domestic Abuse Board Terms of Reference

1 Introduction

The Domestic Abuse Act 2021 ("the Act"), at Part 4 generally and s 58 specifically, requires a "relevant local authority" (which term includes West Berkshire Council ("WBC")) to appoint a *domestic abuse local partnership board* for the purposes of providing advice to the authority about certain functions and aspects of domestic abuse.

2 The Board

The West Berkshire Domestic Abuse Board ("the Board") shall be the WBC domestic abuse local partnership board constituted under the Act and shall be responsible for the following:

- compliance with the requirements of the Act so far as they pertain to WBC as set out in the Scheme of Delegation within the WBC Constitution, including:
 - the provision of support to victims of domestic abuse and their children within accommodation based domestic abuse services;
 - issuing an annual report to the Secretary of State;
- operational and strategic functions under the shared vision within the West Berkshire Domestic Abuse Strategy '*For individuals, families and children in West Berkshire to live freely from Domestic Abuse*';
- any other matter relating to domestic abuse as the Board shall decide.

The Board, through the Chairman, shall be accountable to WBC via (in turn) the West Berkshire Building Communities Together Partnership ("BCTP"), the West Berkshire Health and Wellbeing Board Steering Group, and the West Berkshire Health and Wellbeing Board ("HWB").

3 Membership

Membership of the Board shall include the following or their representatives:

- West Berkshire Council
- Housing Registered Providers
- Thames Valley Police
- Criminal Justice and Probation Services
- Domestic Abuse Services
- Healthcare Providers
- The Voluntary Sector
- Substance Misuse Providers
- Victims of Domestic Abuse and Children of Domestic Abuse victims (or specialist practitioners on their behalf).

The WBC Executive Director, People shall be Chairman of the Board and the senior representative of Thames Valley Police on the Board shall be Vice-Chairman.

A detailed account of Board membership can be found in ToR Appendix B.

4 Approval and Review

These Terms of Reference were agreed by the Board, and confirmed by the HWB on XXX.

These Terms of Reference will be reviewed on a regular basis.

Appendix B

West Berkshire Domestic Abuse Board ToR Appendix A - Procedure Note

1 Introduction

This procedural note accompanies the Terms of Reference for the West Berkshire Domestic Abuse Board ("the Board") and sets out the Board's functions in line with Part 4 of the Domestic Abuse Act 2021 ("the Act").

2 Process

The Board will meet quarterly and be split into a two-part meeting to cover the operational and strategic functions. An interval will take place part way through the meeting to allow sufficient time to transition into the next part and allow representation to change over where appropriate to do so.

Administrative support will be provided by the Building Communities Together Team who will retain responsibility for organising the quarterly meetings, distributing agendas/papers, writing minutes and circulating any relevant information to the Board. The Domestic Abuse Coordinator will retain responsibility for overseeing the administrative support to the Board.

Quarterly reports will be provided to the governing body, the West Berkshire Building Communities Together Partnership ("BCTP").

3 Functions

<u>Part 1</u>

The first part of the meeting will focus on operational delivery locally ensuring all aspects of the West Berkshire Domestic Abuse Strategy and its corresponding action plan is being delivered effectively.

The following functions are required to be carried out:

- Conduct local Needs Assessments to assess the need and demand for accommodationbased support for all victims, including those who require cross-border support (in full every 3 years with an annual review);
- Regularly review performance data to monitor any trends or anomalies locally to help identify and delegate areas for improvement, opportunities to increase service provision, develop training and further protect victims;
- Actively seek to include the voice of victims/survivors and their children (or specialist practitioner on their behalf) in understanding the range and complexity of needs through sufficient time being allocated at the end of part 1 of the meeting.

Part 2

The second part of the meeting will focus on strategic delivery locally by owning and making decisions and addressing any issues identified through part 1 of the meeting and in response to any national requirements.

The following functions are required to be carried out:

- Develop and publish strategies for the provision of support to cover the locality and diverse groups of victims;
- Make any appropriate commissioning / de-commissioning decisions of new and/or existing Domestic Abuse Services;
- Meet the support needs of all victims including those with protected characteristics and/or complex needs;
- Monitor and evaluate the effectiveness of the strategy;
- Manage and decide how any funding to support the work of the Board is allocated in our area;
- Report back annually to central government (MHCLG) on delivering Part 4 of the Act, including how funding has been spent, in line with statutory guidance and the standardised reporting form.

4 Decision Making, Escalation and Quorum

The Board will be responsible for making decisions in relation to all operational and strategic duties. All views should be considered during this process but ultimately any final decisions which have to be taken will be made by the Chairman.

Members of the Board can raise a concern regarding a final decision made by the Chairman if it is firmly believed the decision is wrong, this will be recorded in the meeting minutes.

If any issues arise then the Chairman should escalate this to the West Berkshire BCTP.

To be quorate, attendance must include at a minimum: the Chairman, West Berkshire Council, victims and children of domestic abuse victims (or specialist practitioner on their behalf), domestic abuse charities or voluntary organisations, health care providers and the police or other criminal justice agencies.

Where commissioning/de-commissioning decisions are to be made during part 2 of the meeting, any representatives from Domestic Abuse charities and services will be asked to leave the meeting to avoid any conflict of interest.

5 Membership

Full membership of the Board shall include representatives from the following services:

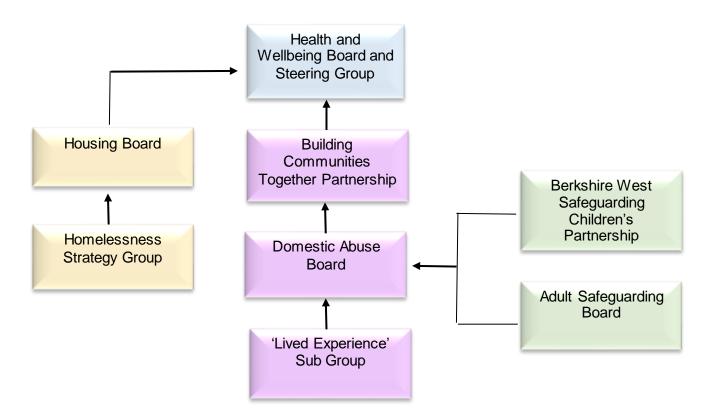
- Targeted Intervention Service, West Berkshire Council
- Housing, West Berkshire Council
- Public Health and Wellbeing Service, West Berkshire Council
- Building Communities Together Partnership, West Berkshire Council
- Elected Members, West Berkshire Council
- Sovereign Housing Association
- Thames Valley Police
- Probation Services
- West Berkshire Domestic Abuse Service, A2Dominion
- Youth Offending Team, West Berkshire Council
- Berkshire West CCG
- Royal Berkshire Foundation Trust
- Berkshire Healthcare Foundation Trust

- Adult Social Care, West Berkshire Council
- Children and Families Services, West Berkshire Council
- Healthwatch West Berkshire
- Voluntary Sector
- Domestic Abuse Charities
- Swanswell (Cranstoun), Drug and Alcohol Misuse Service
- Two Saints
- Other local housing register providers
- Victims and children of Domestic Abuse victims (or specialist practitioner on their behalf)

Not all members of the Board will be invited to attend both parts of the meeting and representation is subject to change where appropriate. New members will also be invited as and when appropriate by agreement of the Board. A detailed account can be found in Appendix B.

Where members are unable to attend a meeting, they are responsible for informing the Board ahead of the meeting and, as far as possible, should ensure a representative is present on behalf of the organisation / body.

5 Structure



Appendix C

West Berkshire Domestic Abuse Board Appendix B - Representation

Chair: Executive Director – People, West Berkshire Council **Deputy Chair:** West Berkshire Deputy Commander, Thames Valley Police

Statutory members as per duty and be quorate

Not attending Part 2

New members for more seniority

Member	Representative – Part 1	Representative – Part 2
Adult Safeguarding Board	ТВС	N/A
Adult Social Care, West Berkshire Council	Lisa Cleveland/ Sue Brain	Paul Coe
Berkshire Healthcare Foundation Trust	Sue Carrington	Sue Carrington
Berkshire West CCG	Kathy Kelly	Kathy Kelly
Berkshire West Safeguarding Children Partnership	Esther Blake	N/A
Berkshire Women's Aid	Rachel Murray	Andrea West
Building Communities Together Partnership, West Berkshire Council	Susan Powell	Susan Powell
Children and Families Services, West Berkshire Council	Steph Coomber	Pete Campbell
Domestic Abuse Charities	Amanda Phelan/Kathryn	N/A
	Warner (PACT)	
	Grace Ryder (Home Start)	
	Laura Hunter (Flag DV)	
	Sharon Briggs (Safe)	
Elected Members	Rick Jones, Dominic Boeck,	N/A
	Claire Rowles	
Healthwatch	Alice Clifton	N/A
Housing, West Berkshire Council	Kenna Young	Janet Weekes
My Family First, West Berkshire Council	Ema Holgate	N/A
Other local housing providers	Amanda Lowder (Stone Water)	N/A
Portfolio Holder	Graham Bridgman	Graham Bridgman

Probation Services	Jacqueline Markie	Jacqueline Markie
Public Health and Wellbeing Service, West Berkshire Council	Denise Sayles and Nikki Davis	Matt Pearce
Royal Berkshire Foundation Trust	Elizabeth Porter	Elizabeth Porter
Sovereign Housing Association	Ali Pearce	Sarah Andrews
Swanswell Substance Misuse	Sian Orton	N/A
Thames Valley Police - Neighbourhood, Problem solving and	Mark Tucker and Richard	Lindsey Finch
Safeguarding Team and DAIU	Johnson	
Two Saints	Matthew Cobbet	N/A
Victims and children of DA victims (or specialist practitioner on their	TBC – service providers	TBC – service providers
behalf)		
Voluntary sector	Colline Watts and Clare	Colline Watts and Clare
	Middleton (DEC advocacy	Middleton (DEC advocacy
	service)	service)
	Luke Pepperell (VCS CYP	Luke Pepperell (VCS CYP
	forum)	forum)
West Berkshire Domestic Abuse Service, A2Dominion	Luke Pepperell/ Lilly Key	Luke Pepperell/ Lilly Key
Youth Offending Team, West Berkshire Council	Stacey Clay	N/A

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Agenda Item 10

Health and Wellbeing Board – 22 July 2021

Item 10 – Covid-19 Recovery Dashboard

Verbal Item

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Development of the Health and Wellbeing Board Engagement Group Communications Toolkit

Report being considered by:	Health and Wellbeing Board
On:	22 July 2021
Report Author:	Kamal Bahia
Item for:	Discussion

1. **Purpose of the Report**

To present the first draft of the West Berkshire Health and Wellbeing Board Engagement Group Communication Toolkit.

2. Recommendation(s)

- 2.1 For the Board to review the content of the draft Health and Wellbeing Board Engagement Group Communication Toolkit.
- 2.2 For the Board to support the proposal to launch the draft toolkit at the Health and Wellbeing Board Conference in the autumn with a view to implementing it and sharing it as a communications cascade resource with its partners in West Berkshire.

3. How the Health and Wellbeing Board can help

3.1 For the Board to give feedback on the content of the draft toolkit and to encourage adoption of the shared resource.

determination?	Will the recommendation require the matter to be referred to the Executive for final determination?	Yes:	No:
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4. Introduction/Background

- 4.1 The aspiration of the Health and Wellbeing Board Engagement Group Toolkit had been to produce a cascade of health and wellbeing information that can be easily shared with residents across the District in an equitable manner to maximise the impact of these messages by having a unified message that is amplified by all the partners.
- 4.2 Development of this toolkit started in January 2020 and has been supported by the Health and Wellbeing Board Engagement Group.
- 4.3 The Priority Fund grant awarded to the group enabled the collaboration with Dynamiq Media and the Do No Harm Collective to pull together the toolkit and its associated graphics and resources.

5. Supporting Information

5.1 The implementation of the toolkit has a few phases of development:

Phase	Timeframe
Develop the Toolkit	January – June 2021
Share draft with Board Partners	June – August 2021
Include all the graphics resources	August – September 2021
Launch the Toolkit at the Conference	October 2021

- 5.2 The original intention was to create a shared resource and co-produce it by having a shared calendar, with shared resources, links and graphics within it, to share with all partners and to avoid duplication where possible.
- 5.3 This needs to be aligned with the existing work to strengthen the offer and develop it further to provide a collective approach that is inclusive and reflects the ambitions of the Board to increase the health and wellbeing of our population.

6. **Options for Consideration**

6.1 To develop it further with partners before launching at the conference.

or

6.2 To launch it and continue iterative development throughout the remainder of 2021/22.

7. **Proposal(s)**

To continue with the current plan of the draft toolkit following feedback from the Health and Wellbeing Board as a key offer towards continued engagement with West Berkshire residents.

8. Conclusion(s)

The first draft of the Health and Wellbeing Board Engagement Group Toolkit is presented to the board for consideration and feedback.

9. Consultation and Engagement

The engagement has been internal to the CCG and WBC Partners and would like to share with the board and its communications teams.

10. Appendices

Appendix A – Draft Health and Wellbeing Board Infographic Presentation

Background Papers:

None

Health and Wellbeing Priorities 2019/20 Supported:

- Give every child the best start in life \boxtimes
- \square **Primary Care Networks**

Health and Wellbeing Strategic Aims Supported:

The proposals will help achieve the following Health and Wellbeing Strategy aim(s):

- \boxtimes Give every child the best start in life
- Support mental health and wellbeing throughout life
- \boxtimes Reduce premature mortality by helping people lead healthier lives
- \boxtimes Build a thriving and sustainable environment in which communities can flourish
- \square Help older people maintain a healthy, independent life for as long as possible

The proposals contained in this report will help to achieve the above Health and Wellbeing Strategy aim by developing and disseminating health messages to audiences within West Berkshire.

Officer details:

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The Health and Wellbeing Board is a partnership between the Council and partners from the Clinical Commissioning Group, NHS Trusts, and others. It is responsible for developing and coordinating the delivery of the Joint Health and Wellbeing Strategy. This includes:



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Children's Delivery Group



Our main priorities include helping families and young children in the early years, and giving every child the best start at life. The group receives reports and provides scrutiny, challenge and encouragement to the SEND strategy, Young Carers, Therapeutic Thinking in Schools, Family Hubs, Public Health presentations to schools, Early Help Strategy and the My Family Plan (software programme).



Locality Integration Board

The Locality Integration Board has offered the vital link between the Board and the Primary Care Networks (PCNs). Membership of the Locality Integration Board has been strengthened and now includes the Clinical Directors from the PCNs.

Domestic Abuse Strategy Board



We assess the need for domestic abuse (DA) support for all victims (and their children) who reside in relevant safe accommodation within, and outside of our area. We also prepare and publish a strategy for the provision of this support. The board includes: Representatives of West Berkshire Council, Victims of DA, Children of DA victims, DA Charities and other Voluntary and Community Sector organisations, Health Care services, and policing or criminal justice.

"Our top priority is providing good mental health and wellbeing for all adults, young people and children."



Mental Health Action Group



The Mental Health Action Group (MHAG) was established in August 2017 and in April 2018 Mental Health was identified as a priority by the Health and Wellbeing Board. **The Prevention Concordat on Better Mental Health** provides basic principles and guidance to support the prevention of mental health problems and promotion of good mental health into organisations' plans. MHAG has developed an Action Plan to deliver the Concordat, informed by needs and asset assessment, which will drive the activities for this group.

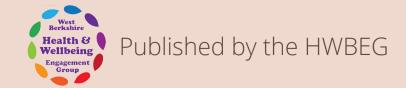
Substance Misuse Harm Reduction Partnership

We are made up of a range of organisations and partners including council departments, TVP, CCG, Healthwatch, Substance Misuse Services, statutory and voluntary sector partners. We also have a Sub Group which focuses on Young People.

Suicide Prevention Action Group



Volunteer Centre West Berkshire established the Suicide Prevention Action Group in May 2017 – comprises circa 20 voluntary and statutory partners.



Building Communities Together Partnership

The BCT Partnership consists of a wide range of partners with the shared vision to support communities to better harness local resources, help each other and build resilience whilst protecting the most vulnerable.

×

Homelessness Strategy Group

Made up of a wide group of organisations including the voluntary sector, Council Depts, Sovereign Housing Association, NHS, CCG, Healthwatch, and Thames Valley Police.

Ageing Well Task Group

The Ageing Well Task Group focuses on addressing social isolation and loneliness, preventing falls and increasing accessibility amongst older, vulnerable groups. Encouraging gentle, outdoor exercise and supporting people in staying active.



Skills and Enterprise Partnership



Support employers in providing and sustaining employment for people in under-represented groups to increase diversity. These include people with physical disabilities, young people, people with mental health problems, people with learning disabilities and people with long-term health conditions.

Health and Wellbeing Engagement Group

Includes Berkshire West CCG, BHFT (Berkshire Healthcare Foundation Trust and Department for Work and Pensions), Healthwatch, patient representatives, Oxford Academic Health Science Network, DWP, Volunteer Centre West Berkshire and West Berkshire Council.

"Create once and share widely."





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Achievements

3 Suicide Prevention training Sessions for 200 people delivered. Rollout of Alcohol Intervention and Brief Advice training to a range of organisations.

'Working for a healthier tomorrow' conference attracted 122 attendees.

Introduction of Hepatitis C treatment in Swanswell.

We worked with the NHS to undertake an audit of deaths among people with Serious Mental Illness (SMI).

Falls prevention Safe & Well Pilot with Royal Berkshire Fire and Rescue Service. Introduction of Housing First model and successful use to house a number of longterm rough sleepers.

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Health and Wellbeing Strategy Delivery Plan 2020/21										
					202	0/21				
Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative	
STRATEGIC AIM: GIVE EVERY CHILD THE BEST ST	ART IN LIFE									
Develop knowledge of Adverse Childhood Experiences	Pete Campbell (CDG)	Proportion of West Berkshire schools that have received Therapeutic Thinking training (cumulative)	30%		46%	72%	86%	86% Q4	The school training programme continues to be delivered. Despite the challenges of delviery, and additional demands on school leaders, this programme has progressed well.	
(ACEs) in the system and embed trauma informed approaches in our services.	Pete Campbell (CDG)	Reduce the number of fixed term exclusion days issued in schools adopting therapeutic thinking by 25% (data expected at the end of July 2020)	25%	-	-	-	-	Availability of data to be reviewed	Covid disruption has led to caution being required for this measure at this time. The safeguarding partnership reviews exclusions and is able to compare with both Reading and Wokingham numbers. Additionally the exponential increase in elective home education (nationally) due to Covid19 has disrupted a number of these measures and the ability to compare year on year. This data will continue to be reviewed.	
	Pete Campbell (CDG)	Develop and implement the My Family Plan multi-agency early assessment offer.	Autumn 2020		Part Delivered	Part Delivered	Part Delivered	Part-Delivered	Despite Covid disruption to both statutory and community partners, the co-ordinated delivery and promotion of 'Early Help' continues. The My Family Plan has been rolled out, but the planned 'high profile' launch has now been arranged for September 2021.	
Support children and young people at an earlier stage, ensuring they are safe through prevention and early	Pete Campbell (CDG)	Reduction in number of child protection / care applications as a result of domestic abuse	tbc	-	-	-	-	#N/A	This measure will be reviewed. Firstly it is unsuitable as a target, because children who need to be protected must be. Secondly, there is national recognition from many sources that the Covid lockdown will have exacerbated incidents of domestic abuse. In discussion with TVP consideration will be given to this measure capturing repeat incidents and recorded crimes.	
intervention services.	All groups	Total number of page views per quarter on West Berkshire Directory (Family Information and SEND Local Offer) (quarterly)	Not targeted	14,099	16,081	14,366	16,714	16,714 Q4	Statistics for Q1-Q3 have been revised to include views of SEND pages, which were previously omitted. Page views for 2020/21 were 12% lower than in 2019/20.	
Support young people leaving care to access accommodation	Janet Weekes (HSG)	Reduction in the number of care leavers requiring accommodation	2	0	0	0	7	7 Q4	This is a new measure for 2020 - 2021. and is linked to the revised Allocations Policy which went live Jan 2021, the target of 2 has been exceeded up Q4 of 2020 - 2021	
Provide young people with information and skills to enable them to make informed decisions that will	Denise Sayles (CDG)	Number of local primary schools who have received a Life Education performance	12	-	-	-	Due to start Sept 2021		Work pushed back to September - December 2021. Report will be available March 2022.	
enhance their wellbeing and build resilience against health harming behaviours.	Denise Sayles (CDG)	Proportion of pupils who feel that their knowledge regarding alcohol and tobacco has increased since the performance	70%	-	-	-	Due to start Sept 2021		Work pushed back to September - December 2021. Report will be available March 2022.	

			Health and V	Vellbein	g Strate	gy Deliv	ery Plan	2020/21	
					202	0/21			
Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative
STRATEGIC AIM: SUPPORT MENTAL HEALTH AND	O WELLBEING THRO	DUGHOUT LIFE							
Adopt the Prevention Concordat for better Mental Health	Matt Pearce (MHAG)	Health and Wellbeing Board to formally approve and adopt the Concordat	Sep-20	-	Complete	-	-	Complete Q2	The Prevention Concordat on Better Mental Health was agreed at Health and Wellbeing Board on 26 September 2020. The next task is for the MHAG to develop an Action Plan informed by needs and asset assessment, which will drive the activities for the rest of the year and will inform the actions, measures and targets for this group.
Agree key actions around the five themes of the	Matt Pearce (MHAG)	Develop and agree an action plan for the delivery of the Concordat	Not targeted	Not due until Q3	Not due until Q3	Complete	-	Complete Q3	The action plan has been agreed with the view that it will be a live document, additional actions can be incorporated when new signatories to the concordat are added.
Prevention Concordat for better Mental Health	Matt Pearce (MHAG)	Establish task and finish groups to lead identified themes.	Not targeted	Not due until Q3	Not due until Q3	On hold	Outstanding	Outstanding Q4	We are currently in the process of identifying action owners for the actions contained in the action plan, following a discussion at a previous MHAG meeting.
Ensure work around theme 1: Needs and asset assessment is achieved	Matt Pearce (MHAG)	Hold events to get resident, service user and stakeholder feedback about mental health related themes obtained (e.g. Thinking Together). (Cumulative)	3	Not due until Q3	Not due until Q3	1	1	1 Q4	Delay on thinking together events due to third lockdown and capacity issues.
Ensure work around theme 2: Partnership and alignment is achieved	Matt Pearce (MHAG)	Number of new members signing up to the Prevention Concordat with key actions identified	2	Not due until Q3	Not due until Q3	0	0	0 Q4	No new members confirmed.
Ensure work around theme 3: Translating need into deliverable commitments is achieved	Matt Pearce (MHAG)	Review the impact of Covid-19 on services (especially for people who are socially isolated) and establish feedback mechanism for frontline practitioners (e.g Social Prescribers and Community Navigators)	Not targeted	Not due until Q3	Not due until Q3	Partially complete	Complete	Complete Q4	We had Gold approval to set up a new covid19 mental health fund. We set up a surviving to thriving fund jointly with Greenham Trust as a result of this action.
	Matt Pearce (MHAG)	Identify gaps in mental health service provision and how they can be filled (e.g. Anger Management)	Not targeted	Not due until Q3	Not due until Q3	Complete	-	Complete Q3	Anger management was discussed in the October and December 2020 meetings. Dr Heather Howells informed that clients/service users can attend Talking Therapies. This action will be ongoing and reviewed in light of new Covid-19 Fund.
Ensure work around theme 4: Defining success outcomes	Matt Pearce (MHAG)	Agree relevant indicators from the Public Health Outcomes Framework (PHOF) to be monitored locally.	Not targeted	Not due until Q3	Not due until Q3	Outstanding	Outstanding	Outstanding	This is not progressed. Working on the Mental Health Needs Assessment first and linking in with a new data project for the LIB on connected care data.
Ensure work around theme 5: Leadership and accountability	Matt Pearce (MHAG)	West Berkshire Council Mental Health Champion to sign up to the national scheme	Not targeted	Not due until Q3	Not due until Q3	Partially complete	Partially complete	Partially complete	Cllr Joanne Stewart has agreed to become the Mental Health Champion for West Berkshire Council. Clarity is being sought on what this entails and what actions need to be undertaken.
Promoting and supporting good mental health	Matt Pearce (MHAG)	Support 2 national mental health campaigns across West Berkshire to encourage spotting early signs of mental ill-health. (Cumulative)	2	Not due until Q3	Not due until Q3	2	3	3 Q4	We promoted Blue Monday in January 2021 and Every Mind Matters campaign.
	Matt Pearce (MHAG)	Update Mental Health Z Card PDF and distribute to key stakeholders	Not targeted	Not due until Q3	Not due until Q3	Outstanding	Outstanding	Outstanding	Progress has been made on this indicator. Issues with supplier's level of insurance and method of distribution (e.g. council tax letters, parish councils, rotary groups) - currently being resolved.
	Garry Poulson (SPAG)	Number of events held per year (cumulative)	1	0	0	0	1	1 Q4	
Organise one training event aimed at front line workers, supervisors	Garry Poulson (SPAG)	Number of front line workers who attend each training event (cumulative)	50	0	0	0	47	47 Q4	Unable to deliver training as planned in the first half of 2020/21 . Q4.an online suicide prevention training course presented by consultant psychiatrist Dr Gill Creswell to 47
	Garry Poulson (SPAG)	Proportion of participants who report an increased level of confidence of suicide prevention on training evaluation form	75%	-	-	-	N/A	#N/A	representatives of West Berks organisations.
Reduce access to the means of suicide	Garry Poulson (SPAG)	Identify suicide risk sites at which to promote Samaritans with appropriate signage (subject to available resources) (cumulative)	6	0	0	0	0	0 Q1	Throughout the period our outreach worker Sue Bennet has continued tomake contact with local businesses and sports clubs.

Health and Wellbeing Strategy Delivery Plan 20									
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Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative
Reduce the risk of suicide in key high-risk groups	Garry Poulson (SPAG)	Run a suicide awareness campaign to target men in places such as the rugby club, pubs, comedy nights, etc. (cumulative)	1	0	1	2	2	2 Q3	Worked in partnership with Samaritans trustee on new resource webpage and secured support from local business Apple Print. Attended Berkshire Suicide Strategy Group meeting. Secured a small grant in September to appoint an outreach worker to undertake field based awareness of training and distribution of materials relating to support and resources. The outreach worker is now actively contacting small business and sports clubs and providing electronic resources and sending flyers and posters.
	Garry Poulson (SPAG)	Run events to raise awareness of suicide among men (cumulative)	2	0	1	1	1	1 Q2	Took part in world suicide prevention day on 10 September with social media exercise and bulletin materials. Rugby club now contacted by outreach worker.

Health and Wellbeing Strategy Delivery Plan 2020/21											
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Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative		
STRATEGIC AIM: REDUCE PREMATURE MORTALI	TY BY HELPING EVI	ERYONE LIVE HEALTHIER LIVES				Г					
Promote referral to Alcohol treatment by GP's for West Berkshire residents	Denise Sayles (SMHRP)	Number of referrals received from GPs for alcohol treatment (cumulative)	20	3	10	15	23	23 Q4	Referrals from GPs has started to improve and with the MAP alcohol project we are hoping this will further improve		
Promote access to alcohol detox for alcohol dependent drinkers	Denise Sayles (SMHRP)	Number of alcohol community detoxes carried out (cumulative)	7	3	6	8	10	10 Q4	Community detoxes have been delivered in the service which has been a positive development due to the service employing an NMP		
	Denise Sayles (SMHRP)	Number of in-patient alcohol detox placements (cumulative)	7	0	0	1	3	3 Q4	Placements for detox have been difficult due to lack of provision and long wiating lists but things have started to pick up and we have joined other local authorities in a detox partnership which will increase availabiility.		
Monitor effectiveness of Drug Diversion Pilot	Denise Sayles (SMHRP)	Proportion of cases where an individual has completed the voluntary Drug Diversion course delivered by Swanswell after being stopped by police for drug possession.	50%	Paused due to Covid	Paused due to Covid	10%	Awaiting Data	10% Q3	Completions for the diversion schome have inceased and there are greater numbers coming through. TVP will be commissiomig this with one provider in future at present this is causing extra pressure on service delivery.		

Health and Wellbeing Strategy Delivery Plan 2020/21											
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Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative		
STRATEGIC AIM: BUILD A THRIVING AND SUSTAI	Susan Powell (BCT)	ENT IN WHICH COMMUNITIES CAN FLOUI Number of community engagements facilitated/ supported (BCT) (quarterly)	RISH Not targeted	0	3	3	3	9	 3 Community Champion conversations in Q2 arising from district parish conference and linked to the outbreak plan and recovery. 3 Community Champion Conversations in Q3 relating to Mental Health, Track and Trace and Engaging and Enabling our Local Communities. Q4 saw 3 Community champion conversations held. Main outcome at the moment is the implementation of a COVID-19 information phoneline 		
Continue to work together to prevent rough sleeping and reduce the number of people who do sleep rough in West Berkshire to 6 or less by 2025	Janet Weekes (HSG)	The number of rough sleepers in West Berkshire on the last day of the quarter	0 by 2025	13	7	2	2	2 Q4	Housing Strategy Group has adopted a target of zero by 2025.		
Implement the Reducing Homelessness & Rough Strategy Delivery Plan in partnership with HSG	Janet Weekes (HSG)	Actions within the Reducing Homelessness and Rough Sleeping Strategy will be complete	Not targeted		On track	On track	On track	On track Q4	Is already being implemented and forming part of HSG work plan - on track		
Develop and adopt the Housing Strategy by 26th February 2021	Janet Weekes (HSG)	Adoption of the Housing Strategy	26/02/2021		On track	Delayed	Complete	Complete Q4	Completd and adopted at March Executive 2021. Public consultation took place 18 September to 1 November.		
Develop and adopt a Serious Case Review protocol by December 2020.	Janet Weekes (HSG)	Adoption of the Protocol	01/12/2020		On track	Delayed	Delayed	Delayed Q3	This has slipped because of COVID virus and the draft is currently undergoing comments for review to adopt by the end of Q2 (2021 - 2022).		
	Susan Powell (BCT)	Number of Domestic Abuse incidents reported to Thames Valley Police (recorded crimes) (quarterly)	Not targeted	406	354	381	dna	dna Q4	Q4 data has not been provided by TVP. A further request has been made.		
Monitor number of repeat incidents of Domestic Abuse reported to Thames Valley Police	Susan Powell (BCT)	Number of Domestic Abuse incidents reported to Thames Valley Police (non crime) (quarterly)	Not targeted	332	312	234	dna	dna Q4	Q4 data has not been provided by TVP. A further request has been made.		
	Susan Powell (BCT)	Domestic Abuse Repeat Victimisation Rate reported to Thames Valley Police (monthly)	Not targeted	Apr - 38% May - 33% Jun - 31%	Jul - 35% Aug - 25% Sep 46%	Oct – 47% Nov – 32%	dna		TVP are now measuring this data monthly. Q4 data has not been released due to an issue with the accuracy of the data.		
	Susan Powell (BCT)	Number of multi-agency staff trained in Domestic Abuse Awareness (quarterly)	Not targeted	0	0	0	0	0	No sessions scheduled during Q3. Working with reducing the risk who run the DA network to amend our training content so that training can take place virtually. 2021 training dates to be set. Q4 Training plan for 2021/22 are being finalised for training to resume.		
Improve staff awareness of domestic abuse	Susan Powell (BCT)	Number of multi-agency staff trained in Domestic Abuse Champions (quarterly)	Not targeted	0	6	0	0	6	1 training session was cancelled as could not take place face to face. 2021 dates need to be set. Q4 Training Plan for 2021/22 being finalised for training to resume.		

			2020/21						
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Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative
STRATEGIC AIM: HELP OLDER PEOPLE MAINTAIN	A HEALTHY, INDE	PENDENT LIFE FOR AS LONG AS POSSIBLE							
Increase the number of people aged over 65 who are at risk of a fall who have attended a Steady Steps class	April Peberdy (AWTG)	The number of new referrals of people aged 65+ at risk of falling to a Steady Steps Class	Not targeted	0	0	1	0	0 Q1	
Conduct campaigns to increase public awareness of falls and how to prevent falls.	April Peberdy (AWTG)	Number of Falls Prevention Awareness Campaigns	3	0	0	1	1	1 Q3	Safe and Well project referrals are shown in Q3 but some of these took place in Q1 and Q2. The number for the year was just short of target.
Deliver training to WBC staff, NHS Staff and volunteers on the Falls Prevention Pathway to increase knowledge of available services and the recommended approach.	April Peberdy (AWTG)	Number of Falls Prevention Awareness Training sessions delivered	Not targeted	0	0	0	0		Trips and Slips highlighted as part of cold weather comms. Only 1 Steady Steps referral - Leisure Centres have been closed for the majority of the year including Q4. In light of the Covid-19 pandemic the Ageing Well group has changed direction during the last few months to focus on reducing loneliness and Isolation in older people.
Monitor the number of Falls Risk Assessments completed by RBFRS as part of their Safe and Well checks	April Peberdy (AWTG)	Number of Safe and Well checks completed by RBFRS where a Falls Risk Assessment has been undertaken	20	0	0	11	18	18 Q4	
Distribute falls exercise cards to older residents in West Berkshire to encourage physical activity at home.	April Peberdy (AWTG)	Number of falls cards distributed (cumulative)	900	0	0	900	1264	1,264 Q4	
Distribute activity packs and booklets to older people isolated at home.	April Peberdy (AWTG)	Number of activity packs distributed (cumulative)	500	0	0	494	Awaiting data	494 Q3	Awaiting data
Distribute speaker friends to older residents in West Berkshire	April Peberdy (AWTG)	Number of Speaker friends delivered	15	0	0	0	31	31 Q4	

Health and Wellbeing Strategy Delivery Plan 2020/21											
	2020/21										
Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative		
IOW WE WILL DELIVER THE STRATEGY: INTEGRATION											
Decrease the number of bed days due to Delayed Transfers of Care (DTOC) from hospital	Paul Coe/ Shairoz Claridge (WBLIB)	Decrease the number of bed days due to Delayed Transfers of Care (DTOC) from hospital	Target variable based on DoH methodology Q1 = 1,492 Q2 = 1,508 Q3 = 1,508 Q4 = 1,492	-	-	-	-	#N/A	DTOC is suspended due to Covid.		
Monitor the number of non-elective admissions (General and Acute)	Paul Coe/ Shairoz Claridge (WBLIB)	Number of non-elective admissions (General and Acute) per 100k population (quarterly)	Q1 =2,120 Q2 = 2,153 Q3 = 2,225 Q4 = 2,200	1,813	2,155	2,188	2,108	2,108 Q4	We have seen a reduction of 7.86% on last year.		
Monitor the number of permanent admissions of older people aged 65+ to residential and care homes (per 100,000 of population)	Paul Coe/ Shairoz Claridge (WBLIB)	New permanent admissions of older people aged 65+ to residential and care homes (per 100,000 of population) (ASCOF 2A (part 2)) (quarterly)	190	143	125	128	137	137 Q4	Q4 figure is provisional. ASCOF 2A presented as per 100,000. Numerator just shows number of new admissions over a rolling 12 month period. This indicator is affected by Covid-19 and the long-term impacts are not yet clear. There is a cohort of people in interim beds which may become permanent in due course.		
Increase the percentage of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Paul Coe/ Shairoz Claridge (WBLIB)	% of older people (65+) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services (quarterly)	85%	83%	75%	77%	82%	82% Q4	This indicator is known to be volatile due to low cohorts. KPI only measures 3 months in the year and as a consequence it remains volatile.		
Support West Berkshire Social Prescribers to embed motivational interviewing into their practice and use the Patient Activation Measure (PAM) tool to monitor patient outcomes	Paul Coe/ Shairoz Claridge (WBLIB)	All social prescribers to attend training and have access to PAM licenses by the beginning of January 2021	Jan-21		On track	Complete		Complete Q3	Training in health coaching, motivational interviewing and use of the Patient Activation Measure took place over three days between October 2020 and January 2021. A Berkshire West Social Prescriber Network has been formed.		
Support West Berkshire PCNs to deliver Enhanced Health in Care Homes (EHCH)	Paul Coe/ Shairoz Claridge (WBLIB)	All PCNs to have met requirements of the contract by the end of the financial year.	Mar-21		On track	On track		On track Q3	From October 2020, all PCNs have been required to deliver, with partners in the local authority and community trust, the Enhanced Health in Care Homes element of the GP Contract. A task group has been working on a Berkshire West footprint to support PCNs to meet the contract requirements. No actions have arisen at time of writing for the West Berkshire locality. All care homes have been aligned to a single PCN. Every care home has a named clinical lead. Care home GP practice continues to provide a weekly homeround /check in. Work is underway to develop the MDTs.		
Develop and roll out a model for Multi-Disciplinary Team meetings which: - uses data to risk-stratify patients - measures the impact on patients' health and wellbeing - fosters collaboration and shared decision making	Paul Coe/ Shairoz Claridge (WBLIB)	All GP practices in West Berkshire participating in the new MDT model by the end of the financial year	Mar-21		On track	On hold	On hold	On hold Q3	Following a workshop in August with key multi-disciplinary team partners, a set of good practice principles for proactive MDTs was developed. This has been evolved into a self-assessment framework for each MDT to identify their current practice which all MDTs were asked to complete. MDT development is also a priority for the Integrated Care Partnership. MDT development has been put on hold as health partners are required to focus on set actions concerning the winter Covid response. The LIB plans to reignite the vision for MDTs once we can move into recovery.		

Health and Wellbeing Strategy Delivery Plan 2020/21											
				2020/21							
Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative		
HOW WE WILL DELIVER THE STRATEGY: PUBLIC E	NGAGEMENT										
Develop and roll out a model for Multi-Disciplinary Team meetings which: - uses data to risk-stratify patients - measures the impact on patients' health and wellbeing - fosters collaboration and shared decision making	Kamal Bahia (HWEG)	Number of articles published in the Newbury Weekly News per year (cumulative)	12	2	0	0	4	4 Q4	The Public and Patient Engagement Sub-Group has been rebranded as the Health and Wellbeing Engagement Group. This has been carried through to social media accounts. Refreshed the HWB logo and produced associated logos for each of the subgroups, with corresponding Powerpoint templates and collateral, which were used at the Health and Wellbeing Conference.		
Develop branding for Health and Wellbeing Board and their sub-groups	Kamal Bahia (HWEG)	Agree new name for PPE sub-group, update social media accounts and develop branding for each of the other sub-groups to support comms	Aug-20	-	Aug-20	-	-	Complete	The Public and Patient Engagement Sub-Group has been rebranded as the Health and Wellbeing Engagement Group. This has been carried through to social media accounts. Refreshed the HWB logo and produced associated logos for each of the subgroups, with corresponding Powerpoint templates, which were used at the Health and Wellbeing Conference.		
Organise annual Health and Wellbeing Conference and open this to public	Kamal Bahia (HWEG)	Virtual conference to be held in September	1	-	1	-	-	1 Q2	Health and Wellbeing Conference held via Zoom on 11 September with a theme of '1000 Acts of Kindness' focussing on the contribution of the voluntary sector and celebrating that. Included workshops on Volunteering, Working Together and Young People. The event was opened up to the public for the first time and over 100 people attended. Feedback from the event has been very positive. Videos from the conference have been put on YouTube. Follow-up events to engage young people were carried out separately via Berkshire Youth and local schools and a survey.		
Promote the West Berkshire Directory as a one stop shop for information and advice. (Adults)	Kamal Bahia (HWEG)	Total number of page views on West Berkshire Directory - Adults (quarterly)	Not targeted	5,932	6,107	5,620	6,774	6,774 Q4	The number of page views for 2020/21 was very similar to 2019/20 (24,433 vs 24,220).		

Health and Wellbeing Strategy Delivery Plan 2020/21											
				2020/21							
Action	Chair/ Group	Measure	Target	Q1	Q2	Q3	Q4	Latest/YE RAG (grey=not targeted)	Narrative		
ADDITIONAL OBJECTIVE: IMPROVE ACCESS TO EM Identification of the main groups in West Berkshire who are under-represented in employment, in order to confirm the priorities of planned projects	IPLOYMENT, EDU Iain Wolloff (SEP)	CATION, TRAINING AND VOLUNTEERING	FOR VULNERABLE P Apr-20	EOPLE -	Achieved	-	-	Achieved Q2	Work completed by Catherine Greaves (Workplace Health Officer & Project Officer West Berkshire Wellbeing). Discussed and agreed by the Skills & Enterprise Partnership		
Delivery of a public awareness campaign to promote the sustained employment of people from under- represented groups	lain Wolloff (SEP)	Awareness campaign delivered	1	Delayed due to Covid	Delayed due to Covid	Delayed due to Covid	Delayed due to Covid	Delayed due to Covid	Delayed by pandemic. SEP will work with the group 'Employment is everyone's business' (Mark Browne and Lee Hunt) to devise campaign		
Development of the second phase of the 'Working for a Healthier Tomorrow' initiative	lain Wolloff (SEP)	Number of companies participating in WFAHT initiative	Not targeted	Delayed due to Covid	Delayed due to Covid	Delayed due to Covid	Delayed due to Covid	hive to to bouch bouch	Delayed by pandemic. Will be the remit of the new post holder for Workplace Health who will join the SEP and lead on this action. Focus is likely to be on mental health in the workplace.		
Expansion of the 'Delivering Life Skills' programme	lain Wolloff (SEP)	Number of young people benefitting from the DLS programme	60	-	-	Achieved	-	Achieved Q3	HWB funds agreed for the Delivering Life Skills programme, facilitated by the West Berkshire Education Business Partnership (EBP)		
Enhanced delivery of a Work & Careers Fair, including participation by local schools and supporting the work on employment opportunities for people with learning disabilities	lain Wolloff (SEP)	Number of participants with learning disabilities benefitting from the work & careers fair	40	-	-	On target	On target	Planned for delivery in October 2021	The SEP has been working with our MP Laura Farris to facilitate a Universities and Careers Fair for young people across West Berkshire. Laura will utilise parliamentary funds to support the event and is also raising sponsorship monies from local companies. The EBP are providing the organisational expertise for the event, as they have access to an ESF funding pot for careers activities. The event will also be supported by a range of other interested organisations. The plans are for an event: Aimed at all young people across the area (Years 10 to 13): Ensuring wide participation, including young people from vulnerable groups: Held across two days – the first an online day, followed by an onsite day: Including businesses and universities across the region: Focussing on interactive and engaging activities. The event is now confirmed for 14th & 15th October and all local schools have confirmed the involvement of their students.		
Determine bids for grants under the Health and Wellbeing Priority Fund	Abid Irfan (HWB Steering Group)	Amount of Health and Wellbeing Priority Funding allocated to HWB Sub-Groups (cumulative)	Not targeted	-	£7,000	£18,920	£18,920	£63,029.33. of £96,000 allocated	The Suicide Prevention Action Group was awarded £7,000 of funding for an Outreach Programme, which was approved at the Steering Group on 7 September. The Skills and Enterprise Partnership was awarded £4,420 for the Developing Life Skills programme and the Engagement Group were awarded £7,500 for the Health and Wellbeing Engagement for the Board project. These were approved virtually in January 2020. The remaining balance of funds is £32,970.67.		

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Agenda Item 13

Health and Wellbeing Board – 22 July 2021

Item 13 – ICP Transformation Programme

Verbal Item

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There is a fire alarm and lockdown alarm in the Council (Chamber at 10am on Thursdays.				
Item	Purpose	Action required by the H&WB	^y Date Agenda Published	Lead Officer/s	Those consulted
30 September 2021 - Board meeting					
Programme Management		1			
Delivery of Health & Wellbeing Strategy - Q1 2021/22	To present the performance dashboard for the delivery of the Joint Health and Wellbeing Strategy and highlight any emerging issues.	For information and discussion	22/09/2021	Gordon Oliver	Health and Wellbeing Steerin Group
Strategic Matters					
Joint Health and Wellbeing Strategy and Delivery Plan	To present the draft Strategy and Delivery Plan for approval	For information and discussion	22/09/2021	Matt Pearce / Sarah Rayfield	Health and Wellbeing Steering Group
Voice of Disability	To report back on the recommendations made in relation to the Healthwatch VoD report	For information and discussion	22/09/2021	Andrew Sharp	Health and Wellbeing Steering Group
Royal Berkshire Hospital Development Proposal	Royal Berkshire Hospital Trust to provide an update on their hospital redevelopment proposal.	For information and discussion	22/09/2021	ТВС	Health and Wellbeing Steering Group
Operational Matters					
COVID Recovery	To provide an update on development and implementation of the Recovery Strategy	For information and discussion	22/09/2021	Joseph Holmes	Health and Wellbeing Steering Group
Integrated Care Partnership Transformation Programme	To provide an update on current ICP activity	For information and discussion	22/09/2021	Andy Sharpe	Health and Wellbeing Steerin Group
Review of Health and Wellbeing Board Sub-Groups	To consider options for the structure of the Health and Wellbeing Board Sub-Groups to reflect the priorities identified in the Joint Health & Wellbeing Strategy.	For decision	22/09/2021	TBC	Health and Wellbeing Steerin Group
Review of Health and Wellbeing Board Terms of Reference	To consider how the terms of reference for the Health and Wellbeing Board and Steering Group should change to reflect the new Strategy.	For decision	22/09/2021	TBC	Health and Wellbeing Steerin Group
Provision of defibrillators in West Berkshire	To consider how and where defibrillators should be provided across West Berkshire	For discussion	22/09/2021	ТВС	Health and Wellbeing Steering Group
15 October - Conference					
09 December 2021 - Board meeting					
Programme Management		1			
Delivery of Health & Wellbeing Strategy - Q2 2021/22	To provide the performance dashboard for the delivery of the health and wellbeing strategy and highlight any emerging issues.	For information and discussion	01/12/2021	Gordon Oliver	Health and Wellbeing Steerin Group
Strategic Matters					
Annual Public Health Report	To present the annual report into the health and wellbeing of people in Berkshire as prepared by the Director for Public Health.	For information and discussion	01/12/2021	Meradin Peachey	Health and Wellbeing Steering Group
Draft Pharmaceutical Needs Assessment	To agree the draft Pharmaceutical Needs Assessment for public consultation.	For information and discussion	01/12/2021	Sarah Rayfield	Health and Wellbeing Steering
Review of Continuing Health Care payments	To present the outcome of a review of Continuing Health Care and its	For information and discussion	01/12/2021	Katie Summers / Niki Cartwright	Health and Wellbeing Steerin Group
Leisure Strategy		For information	01/12/2021	Matt Pearce	Health and Wellbeing Steerin Group
Operational Matters		·		·	
COVID Recovery	Update on development and implementation of the Recovery Strategy	For information and discussion	01/12/2021	Joseph Holmes	Health and Wellbeing Steerin Group

Integrated Care Partnership Transformation Programme	To provide an update on current ICP activity	For information	01/12/2021	Andy Sharpe	Health and Wellbeing Steering
		and discussion			Group
17 February 2022 - Board meeting			1	1	
Programme Management					
					T
Strategic Matters					
West Berkshire Vision 2036	To provide a progress report and consider whether the vision needs to	For information	09/02/2022	Nick Carter / Catalin Bogos	Health and Wellbeing Steering
	be updated	and discussion			Group
West of Berkshire Safeguarding Adults Board	Presentation of Annual Report for 2019/20	For information	09/02/2022	Teresa Bell - Independent Chair of	Health and Wellbeing Steering
Operational Matters			-		
April 2022 (TBC) - Workshop					
19 May 2022 - Board meeting					
Programme Management					
Delivery of Health & Wellbeing Strategy - Q3 2021/22	To provide the performance dashboard for the delivery of	For information	01/12/2021	Gordon Oliver	Health and Wellbeing Steering
Strategic Matters					
Operational Matters				•	

Recovery and Renewal Strategy

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1. Introduction

- 1.1 The Council's Recovery Strategy was agreed by the Executive in June 2020. Since then the country has seen a second wave of the Covid-19 Pandemic with an expectation that there may be a third. There have been two further national (and local) Lockdowns, and more positively the commencement of a national vaccination programme. On February 22nd the Prime Minister announced a Roadmap to reducing Covid-19 restrictions with a hope that all current social restrictions would end by June 2021.
- 1.2 Since June 2020 the Council has taken a range of actions to implement its first Recovery Strategy. In addition, the Economic Development Strategy (2019-2036) has been revised to ensure it reflects the challenges and opportunities that Covid-19 present, and a new Communications and Engagement Strategy (2020-2023) has also been approved which embraces key elements of the original Recovery Strategy. Another year has also provided the opportunity to reflect more on Covid-19, its impact, and on our local communities' response to it.
- 1.3 It is also relevant to note that the Council is now approaching the mid-point in its Council Strategy (2019- 2023). The Strategy reflects the Council's ambitions for West Berkshire over the medium term and the associated Delivery Plan articulates how those ambitions will be delivered and progress measured.
- 1.4 It is usual to both refresh the Strategy and Delivery Plan half way through the planning cycle and that is what we will be doing in May 2021. This is the subject of a separate paper but this Recovery and Renewal Strategy has been updated to ensure that the key actions reflected within it are included, where appropriate, within the revised Council Strategy Delivery Plan.

2. Background

- 2.1 The original Recovery Strategy set out some of the key challenges and opportunities that West Berkshire and the Council have faced during the Covid-19 Pandemic. These have been updated and are set out in Appendix 1 under the headings of health and social; economic; environmental and organisational impacts.
- 2.2 The key challenges that drive this updated Recovery and Renewal Strategy include:
 - Covid-19 has had a disproportionate health impact on vulnerable groups, namely older people, those with disabilities and ethnic minorities.
 - Economically, the impact has been most felt by younger age groups, women, and poorer households.
 - Socially, the impact has probably been more widespread but with those living alone, those with mental health and emotional wellbeing issues, and children and young people appear to have been most impacted.
 - Lockdown has created a range of concerns amongst children and young people with schools having been closed for a prolonged period of time.
 - Lockdown has also meant that some services have not been provided and some issues and concerns have probably been hidden from view.

- Acute hospitals have had to cope with an unprecedented number of Covid-19 inpatients. This has led to a large number of planned operations and screenings being cancelled. This is likely to bring further health issues.
- The West Berkshire economy has not been as impacted as elsewhere. Hospitality, leisure, wholesale and retail have been the worst affected.
- The economic sectors that are set to expand in West Berkshire over the medium term have generally not been as badly impacted during the Pandemic.
- Town centres have been particularly adversely affected.
- More broadly, the economic impact of an ongoing recession needs to be considered including its potential impact on future public finances.
- The 'inequality gap' in West Berkshire is likely to have grown as a result of the Pandemic and this is perhaps the biggest overriding concern.
- 2.3 Not everything has been negative. Some of the opportunities to be seized include:
 - Given reducing labour supply, high job density and anticipated strong demand for labour, the general prospects for the local labour market coming out of the Pandemic look relatively positive.
 - The Pandemic has promoted effective partnership working across a range of agencies. This has perhaps been most noticeable between health and adult social care.
 - There has been a digital revolution that has taken a lot of interaction on line. Much of this is likely to remain in some form.
 - There has been a noticeable resurgence in community spirit.
 - The Pandemic has seen a reduction in travel and an increase in air quality. There has also been a shift towards active travel with walking and cycling coming to the fore. There also appears to have been a renewed interest in the environment and countryside.

3. Vision

3.1 The Vision set out in the original Strategy remains largely unchanged although the final sentence has been redrafted to place a greater emphasis on addressing inequalities:

To recover three of the core elements that make West Berkshire a great place to live; health, education and the economy, and to ensure a renewed and enhanced focus on our community, environment and engagement. Our Strategy is for everyone but in particular those most affected, now, and into the future by the Covid-19 Pandemic.

4. Our Priorities for Recovery and Renewal

4.1 The original Strategy identified six priorities and a number of associated critical success factors. Given developments over the past year, and the work that has already been completed, the opportunity has been taken to bring these together and to refocus them into seven priorities. The original themes have been retained. The seven priorities are:

- 1. Recovering West Berkshire's health and social wellbeing to ensure we remain one of the healthiest places in the country, whilst at the same time doing more to address health inequalities.
- 2. Ensuring economic recovery and renewal, with a focus on those who have lost their jobs, notably the young, women and the disadvantaged; supporting those sectors most impacted by Covid-19; and ensuring we continue the journey of repurposing our Town Centres for the future.
- 3. Supporting our children and young people and our schools with a focus on the most vulnerable.
- 4. Taking the opportunity to work with our local communities to accelerate the delivery of our environmental objectives.
- 5. Enhancing our communications and community engagement.
- 6. Improving our customers' experience of us with an enhanced efficiency and openness in how we work and share information.
- 7. Seizing the positives from the Pandemic but not forgetting those we have lost; those whose lives will be forever changed; and those who have supported our local communities during the Pandemic, including our own staff.

5. **Delivering our Priorities**

- 5.1 Our seven priorities cover both recovery and renewal. Recovery can perhaps be described as getting back to where we were before the Pandemic struck. Renewal is creating something better, through focusing on the good things that have come out of the past year or so.
- 5.2 In this chapter the key actions that we intend to take in support of our seven priorities, in some cases with our partners, are set out. These actions seek to ensure that we place our communities in the best possible position to recover from the Pandemic but also build on the new opportunities that Covid-19 has brought. Appendix 2 sets out the actions in detail. In some cases work is already well underway and is encompassed within existing strategies. In other instances further work is still required because we do not yet fully understand all the implications of the Pandemic.

1) Recovering West Berkshire's health and social wellbeing to ensure we remain one of the healthiest places in the country, whilst at the same time doing more to address health inequalities.

- 5.3 There are six key themes that underpin our approach within this Priority:
 - *Closing the inequality gap.* This existed prior to Covid-19 and was highlighted both in West Berkshire 2036 and the Council Strategy 2019-2023. The Pandemic seems likely to have created an even wider gap. In moving forward it is important that we have a full understanding of the issues that need to be addressed, ensure there is effective engagement with the affected communities and that the impact is measured and learning taken from that. The Council's new Equality and Diversity Strategy will underpin our proposed approach.
 - Supporting our colleagues in the NHS. Covid-19 has had a significant impact on the NHS who are now in the process of trying to catch up on other work that has

been delayed. There has also been a significant impact on staff. The long term impacts on the NHS are still not clear. The Council will continue to work with the NHS to support its own recovery planning.

- Seeking to maintain the benefits of health and social care integration. Whilst the Pandemic has brought challenges it has also demonstrated the art of the possible. The most obvious example is perhaps the discharge of patients from hospital into the community. Over the past year Delayed Transfers of Care have disappeared as the resources have been found to move people out of hospital very quickly. Digitisation and virtual working has also brought many benefits. There is a desire to hold onto these achievements and it is hoped that the funding can be found to achieve this. Much of this work will be taken forward through the Berkshire West Integrated Care Partnership.
- Promoting good mental health and wellbeing. This has been a major issue over the past year with clear evidence of increased referrals both for adults and children and young people. The negative impacts of Lockdown has been widely commented on but it is also important to consider the impact created by unemployment and in some cases by having to manage grief. Funding for programmes to support mental health and emotional wellbeing have already been put in place but it is widely recognised that longer term support will be needed.
- Supporting Adult Social Care. Adult social care has been adversely affected by the Pandemic in many ways, most notably the residential sector. There is still more to do to ensure that those dependent on adult social care get the support they need but there are also a number of concerns regarding the state of the residential care market both now and into the future.
- Promoting active lifestyles The Pandemic, and the Lockdown in particular, have brought challenges and opportunities in terms of physical activity. The Government has also responded with a move towards promoting active travel with the focus in particular on walking and cycling. Much of West Berkshire is designated as an Area of Outstanding Beauty. Funding has already been provided to support increased activity in our parks and this Strategy seeks to promote this even further recognising the benefits it can bring to both personal physical and mental health as well as wider environmental benefits which are touched on later.
- 2) Ensuring economic recovery and renewal, with a focus on those who have lost their jobs, notably the young, women and the disadvantaged; supporting those sectors most impacted by Covid-19; and ensuring we continue the journey of repurposing our Town Centres for the future.
- 5.4 The Council has recently refreshed its Economic Development Strategy (2019-2036) to take into account the impacts of Covid-19. The Strategy embraces both existing medium and long term commitments set before Covid-19 and more recent

objectives that are seen as important in the context of recovery and renewal. Six themes have been identified which in the main reflect that revised Strategy:

- Increasing our efforts to empower everyone to enter the workforce. This is an
 existing priority within the Council Strategy 2019-2023. The Council recognises
 that West Berkshire has notable underemployment in some of the most
 vulnerable groups. Given the earlier comments regarding the inequality gap this
 underemployment is likely to have been exacerbated through the Pandemic.
 This Strategy recognises that more needs to be done and that additional funding
 and resources will be needed to address this imbalance.
- Putting in place employment support for the newly unemployed and underemployed. Reference has already been made to the young, women and vulnerable groups being particularly vulnerable to the economic impact of Covid-19. The Council has responded by acting as a sponsor for the Government's Kickstart Scheme, subscribing to Berkshire Opportunities and continuing to progress its own Apprenticeship Strategy that includes work with partners. The Economic Development Board will continue to keep this work under review whilst at the same time working with the Thames Valley Berkshire Local Enterprise Partnership (TVBLEP) to determine what further opportunities can be developed.
- Supporting businesses that have been affected by Covid-19 to reopen and trade resiliently. The Council has worked quickly to administer a wide range of Business Support Grants that have been provided by the Government. The Additional Restrictions Grant (ARG) will continue to run until the end of March 2022 and the Council will also now roll out the new Restart Grant to ensure that this is effectively utilised to support local businesses. The Council will also continue to support the implementation of the national Routemap and will respond, where appropriate, to requests for further assistance and will seek to respond proactively to any further unforeseen Covid-19 developments.
- Reshaping our Town Centres. There is growing evidence that Town Centres could be particularly badly affected by the fallout from the Pandemic. Prior to Covid-19 the retail sector had been under prolonged pressure. A further continuation towards e-commerce and more working from home will create further pressures. The Council has already responded to this by commissioning a master planning exercise in Newbury and financial commitments have also been made to supporting work in Thatcham and Hungerford. The expectation is that these will be followed through with longer term commitments to bring about renewal through a variety of regeneration schemes.
- Promoting digital infrastructure focusing on 'Full Fibre' and 5G coverage and help grow digital skills. Information and communications technology has played a fundamental role in supporting both the economy and wider social infrastructure of the District during the Pandemic. The Council has joined forces with partners in Berkshire to produce a new Digital Investment Strategy. This is focused on installing full fibre across the County, promoting 5G and seeking to

fill in gaps in the existing 4G coverage. The Pandemic has only increased the urgency that needs to be given to this work.

- Reviewing whether the Council, with its Partners, should seek to invest more in tourism if there is a change in travel patterns. Over the past decade the Council has disinvested in local tourism. It is one of a number of areas that were deemed to be a lower priority when financial savings had to be made. The degree to which Covid-19 will create a change in travel patterns is still unclear but if there is to be an increase in 'staycations' then the District's attractive environment may provide an opportunity to create further economic growth.
- Supporting residents to develop and utilise their digital skills. The Pandemic has accelerated a move towards home working and the digitisation of services in the public, private and voluntary sectors. Although the majority of West Berkshire residents have the digital skills required to work from home or access the services they need online, with statistics suggesting that around a third of the population was able to work remotely during the Pandemic, there still remains a large group who do not have either the skills to do so or the equipment to use even if they did. As many employers and service providers look to rationalise their estates and make long term plans for increased levels of remote working, we must ensure all residents of all generations have the opportunity to access employment and other opportunities which require digital skills.

3) Supporting our children and young people and our schools with a focus on the most vulnerable

- 5.5 The closure of schools during most of the Lockdowns has understandably had a major impact not only on the education of pupils but also on their social and emotional development. A range of measures have already been put in place to try and help address this but there is no doubt that medium and even long term support will also be required. The Council's approach will be particularly focused around the most vulnerable pupils where the impact is thought to have been most pronounced.
- 5.6 Financially, the Early Years sector has been particularly badly hit and again measures have been taken to provide support. It will be necessary to monitor how the sector responds coming out of the Pandemic.
- 5.7 There have however been positive impacts and opportunities for Renewal going forward. These include further remote learning and more inter school collaboration. Seven specific themes have been identified:
 - Ensuring that programmes and support are put in place so that pupils of all ages are able to catch up on the time lost during the Covid-19 Lockdowns. It is proposed that this is primarily achieved through a range of reading and tutorial programmes.
 - Closing what may well have become a greater education attainment gap. This will be taken forward through progressing the Disadvantaged Strategy.

- *Improving the transition experience* from primary to secondary schools. This will be supported through holiday programmes and a specially commissioned transition project.
- Addressing increased mental health and emotional wellbeing concerns amongst children and young people. This will be implemented through the deployment of additional staffing resources and new programmes.
- Responding to an increased demand on our services for support, notably for more vulnerable children. This will require further assessment as the Lockdown is relaxed but the response is likely to involve deploying additional resources to where they are most needed.
- Supporting a fragile Early Years sector. A range of measures are proposed here including potential financial support.
- Embracing new technology and the opportunities for remote and shared *learning.* The focus here is on a range of family based projects but also on ensuring the required security and safeguards are put in place.

4) Taking the opportunity to work with our local communities to accelerate delivery of our environmental objectives

- 5.8 The Pandemic has led to a range of behavioural changes, many enforced, some arguably voluntary. Travel has been significantly affected as many residents have been forced to stay at home during Lockdown. This has had a resulting positive impact on air quality. At the same time Lockdown would appear to have resulted in a greater appreciation of the countryside and wider environment. The degree to which the Pandemic has created a greater impetus around Climate Change is perhaps less clear but three specific themes are picked up under this Priority which are further reflected in Appendix 2.
 - Greater promotion of Active Travel. As mentioned earlier the Government has already provided the Council with funding to support active travel through an Active Travel Grant. The focus is on promoting cycling and walking as a mode of travel. The Council already supports active travel through its own capital funding and it is proposed that Active Travel is now developed further through the delivery of the Council's Environment Strategy and the preparation of the forthcoming Local Transport Plan 2.
 - Promoting sustainable forms of transport. Public transport is a key focus within this theme. Many of West Berkshire's bus routes are already subsidised by the Council and providers have continued to be supported financially during the Pandemic. The Government has also recently announced funding aimed at attracting people back into using public transport and encouraging cleaner vehicles. The Council has also recently agreed its Ultra Low Emission Vehicle (ULEV) Strategy and an increased focus will be put on promoting and supporting

the use of non-hydrocarbon fuelled vehicles.

• Investing more in our parks, open spaces and public rights of way. This theme aligns closely with the promotion of physical activity. The aim here is to seek to increase the attractiveness of our parks and open spaces and also to more actively promote our public rights of way through the introduction of designated trails. The provision of more dog bins is another issue that will need to be considered.

5) Enhancing our communications and community engagement

- 5.9 Prior to Covid-19 the Council recognised that it needed to do more to enhance its communication and engagement with its local communities. The Local Government Association reflected this in its recommendations as part of the Council's second Corporate Peer Challenge in November 2019. The Pandemic has provided the opportunity to implement these recommendations and more, and with the benefit of additional funding we have now greatly expanded the reach of our communication activities.
- 5.10 The Pandemic has also brought a renewed sense of community spirit. Some 90 community groups have emerged to support those affected in some way by Covid-19 and the Council also established a Community Support Hub to coordinate its own community response to the Covid-19 challenge.
- 5.11 Over the past year the Council has prepared a Communications and Engagement Strategy and within that a community engagement programme. The Council has also sought to create the new Communities and Wellbeing Department over the same period to ensure that there is sufficient focus and ambition on this important area. Appendix 2 contains a summary of what is within the Communications and Engagement Strategy recognising that the Pandemic has been the catalyst for much of what lies within it:
 - Developing and strengthening even further our relationships with local partners and those at a sub-regional level reflecting on the good collaborative work that has been achieved through the Pandemic. This will involve seeking to take a system based approach to recovery. This has already begun to emerge. Economic recovery is being taken forward in part at a County level with the assistance of the TVLEP. Recovery work is also being taken forward with Health partners through the Integrated Care Partnership (ICP).
 - Working to help build a more sustainable voluntary, community and social enterprise sector. This will involve the establishment of new community alliance and the commissioning of a number of advocacy organisations.
 - Sustain the dynamic relationships with community groups and local councils that have emerged during the Pandemic. This is an ongoing area of work that involves the creation of a Community Engagement and Enablement Framework.

- Capture what was achieved by the creation of the Community Support Hub and take that learning into future work. This work will follow later in 2021.
- Becoming better at informing our local communities about what we are doing and about the issues that are relevant to them. Much of this work has already been completed through implementation of the Communication and Engagement Strategy although there is some further work to be done around enhancing the Council's presence on social media.
- Enhancing our approach to how we involve residents, businesses and local communities in what we are doing. This work is less advanced and will again involve the further development of social media.

6) Improving our customers' experience of us with an enhanced efficiency and openness in how we work and share information

- 5.12 Whilst the Council has kept its Offices open throughout the Pandemic there have been relatively few visitors. Lockdown rules have driven that but that does not take away from the fact that the Council has managed to continue much of its business very effectively without the need to have face to face contact. The proliferation of Zoom and Teams meetings highlight the change, but also potentially a longer term trend towards interacting virtually and in doing so saving time and potential carbon production.
- 5.13 That said not all interaction can or should be done virtually. For an Organisation that has a particular focus on the most vulnerable, and a Recovery and Renewal Strategy that recognises that it is often these groups that have been most adversely effected by the Pandemic, it is important that we do not close the door to other means of communication that some will find easier to manage. Social interaction is vital for human health and wellbeing and the Council has no desire to gain a reputation for being remote and mechanistic.
- 5.14 This is an area of work that is currently relatively undeveloped. The Council has sought to maintain communication channels during the Pandemic and has successfully enabled remote working for its staff but quite what the Council aspires to in the future is not yet clear. This Strategy will help drive this forward at greater pace.
 - Responding to the changing needs of our customers in a post Covid-19 world. Further work is required but the focus here will be on transforming the Council's work to ensure that customers who want it are able to access the Council's digitally enabled services 24/7 and engage with the Council's staff virtually, in addition to face to face contact where required.
 - Responding to an increasing demand to work virtually and in a more digitally enabled world. As above but with the wider application to how we work with communities and partners in a similar way.
- 7) Seizing the positives from the Pandemic but not forgetting those we have lost; those whose lives will be forever changed; and those who have

supported our local communities during the Pandemic, including our own staff.

This section is something of a catch all. It seeks to bring together important activities that fall outside of the other six priorities. It includes proposals to remember those in West Berkshire who have been lost to the Pandemic and also embraces a major piece of work that is underway within the Council to change the way we work as an organisation.

- Take the opportunity to embed the positive aspects of the working practices that we have had to be put in place during the Covid-19 Pandemic. As mentioned earlier the Council has introduced new working practices during the Pandemic as the vast majority of staff have had to work from home and engage remotely. The Council has now initiated a project entitled Timelord 2 that seeks to take the learning from the Pandemic and translate it into a set of permanent new working practices.
- Using Outcome Based Budgeting to help direct resources to support Recovery and Renewal priorities. The Council will be using the Outcomes Based Budgeting to support the development of it's 2022/23 Budget and will ensure that it's recovery and renewal priorities are reflected in that. This will be in addition to other direct sources of Council and Government recovery funding. Funding has already been provided to support activities such as enhancing public rights of way. Financial support for enhancing the Council's engagement work including CIL and further capital schemes will also be considered.
- Remembering those we have lost, and those whose lives have been adversely impacted, by the Pandemic. A special project entitled 'A Blossom in to Spring' is proposed to mark the 235 West Berkshire residents who have died as a result of Covid-19. In addition to this the Council also proposes to mark the start of the first Lockdown in the spring of 2020 on an annual basis.

6. Conclusions

- 6.1 The Country and the Council have swung between periods of response and recovery over the past 12 months or so as we have sought to manage the impact of the Covid-19 Pandemic. The first Recovery Strategy was written and approved at a time when it appeared we were moving into a period of prolonged recovery. This proved short lived and response has now been the theme since last autumn. Once again as we move into spring 2021 it appears recovery is coming to the fore and we have therefore sought to update our Strategy.
- 6.2 Whilst the Council may have had to return to response during the autumn of 2020 a great deal of recovery work has been undertaken. Some of this has been strategic. The Council's Economic Development Strategy has been written and a new Communications and Engagement Strategy has been approved. Both are a response, at least in part, to the Pandemic. The Council's Recovery Group has also instigated and funded a range of new initiatives and programmes to assist with recovery work and many of these are referenced in this updated Strategy.

- 6.3 This new Recovery and Renewal Strategy has sought to reflect on three issues:
 - The progress with recovery work that we have already made over the course of the past year.
 - The learning that we have taken with regard to the impacts of Covid-19 on our local communities and the things that are important to them.
 - The need to focus our activities on what will be most impactful, mindful that our own capacity is limited.
- 6.4 This updated Strategy also coincides with the refresh of our Council Strategy (2019-2023). We have sought to align both so that the key elements of our Covid-19 recovery and renewal are built into the Council Strategy Refresh.
- 6.5 No one yet knows how the Pandemic will develop from this point. It is however already clear what some of the main impacts have already been and also some of the opportunities that the Pandemic might present. It is important that we do not delay in implementing our proposed actions otherwise challenges will be left unresolved and opportunities for beneficial change lost. It may well be that we will need to come back once more to this Strategy in the months ahead. The Pandemic is not over but we recognise that we must continue to respond to the challenges that we face whilst also recognising that the road to recovery and renewal will be a long and potentially uncertain one.

Appendices

Appendix 1 – What are we recovering from and what are we seeking to renew?

Appendix 2 – Recovery and Renewal Strategy 2021 Update – Delivery Plan

What are we recovering from and what are we seeking to renew?

Health and other social impacts

Overview

- West Berkshire had 6,489 Covid-19 cases as at 16^{th May} 2021. This places West Berkshire in the lowest quartile compared with the other 152 upper tier local authorities in England.
- There were 252 deaths in West Berkshire to 16th May 2021. This is a rate of 156.5 deaths per 100,000 population in West Berkshire compared to a rate of 230.7 nationally and 226 regionally.
- West Berkshire had 7,225 shielded patients (on 26th February 2021), 4.6% of the population (compared to 6.1% for SE region and 6.8% for England)
- It is estimated that nationally between 6.7% and 14.7% of infected people have Long Covid-19 symptoms after 12 weeks, the median duration of symptoms is around 40 days.
- West Berkshire is ranked 5th on the national Health Index suggesting strong resilience in terms of population health.
- From a health perspective Covid-19 has had a disproportionate impact on vulnerable groups, including older people, people with disabilities, ethnic minorities and those living in deprived areas. This will have potentially increased the inequality gap in West Berkshire even further.
- The longer term health impacts of Covid-19 are as yet unclear but delayed medical treatment is set to increase the incidence of long term illness and mortality. Lockdown has had an impact on mental health of many, including children and young people. The longer term impacts of this are as yet unclear.
- Mental health referrals have increased during the Pandemic.
- A range of services have not been able to be provided during the Lockdown largely because the NHS has been focused on Covid-19 or because Lockdown has prevented consultations and meetings taking place. Health visiting and sexual health services are but two examples. In some instances some groups may have found it more difficult to remain in treatment during the Pandemic.

- Safeguarding, particularly for the under 5s, has been a concern during the Pandemic.
- Underlying illnesses e.g. hearing and vision problems may not have been picked up.
- The longer term impact on the residential care sector is not yet known. Demand is currently suppressed. This will need to be considered alongside the existing work regarding the Council's future place in the residential care market.
- Visiting arrangements in Care Homes need to be carefully considered moving forward as do the arrangements for reopening Resource Centres.
- Lockdown is also likely to have led to an increase in unhealthy behaviours such as physical inactivity, an increase in alcohol consumption and poor diet.
- The Pandemic has brought about a notable increase in community resilience and spirit. Individuals and communities have demonstrated a desire to go the extra mile. 90 local community groups have emerged during the Pandemic.
- Crime rates have fallen during the Pandemic. This replicates an underlying trend in crime reduction that has been seen for a number of years. The reduction has been notably greater in West Berkshire than elsewhere.
- Local communities have generally been compliant in adhering to Covid-19 restrictions.
- Vaccine immunisation has been high in West Berkshire to date but it is likely to be lower in some ethnic groups and potentially amongst younger people.
- The national increase in domestic abuse during the Pandemic has been less evident locally.
- Lockdown has had a major impact on education. Learning has moved online but it is widely accepted that pupils have fallen behind. The wider longer term health and social impacts on children and young people are not fully understood but personal, social and emotional development is thought to have been particularly badly affected.
- Achievement rates in reading and maths are thought to have reduced and speech, language and communication development are also thought to have been particularly badly impacted.
- Anxiety has been created around examination disruption and also the impact of parental stress.
- Levels of social development are thought to be lower especially amongst poorer children highlighting again the particular impact the Pandemic has had on potentially more vulnerable children including children with Special Educational Needs and Disabilities (SEND).

- The impact of bereavement trauma during the Pandemic is not fully understood.
- The Early Years sector has been particularly badly impacted financially during the Pandemic raising concerns about long term financial viability.
- Lockdown has catalysed a further increase in e commerce and 'all things digital'. Some of this shift will undoubtedly stick going forward and create new patterns in how residents live their lives.
- The Government's 'Everyone In' programme has led to a notable reduction in rough sleeping. In January there were 9 individuals sleeping rough locally.
- The longer term generational impact of Covid-19 and its impact on children and young people are not fully understood yet. There are feelings of resentfulness amongst the younger generation regarding missed life events and opportunities.
- The degree to which any behavioural change has become embedded is also unclear.

Implications

- A potentially widening inequality gap must be seen as a major concern given it was already an issue pre Covid-19. More will need to be done and the issue will need to be tackled in a holistic manner.
- NHS Recovery may have a 'knock on' impact on local government most notably Adult Social Care and the provision of preventative services.
- Holding onto some of the positives in terms of the integration of health and social care services are likely to come at a cost with little clarity yet as to whether that funding will be forthcoming.
- There are a range of impacts regarding children and young people that will need to be considered. These include catching up on learning, addressing what is likely to have become an increased attainment gap, addressing mental health and wellbeing issues, supporting a fragile Early Years sector and on a positive footing embracing the opportunities that technology and shared learning have brought through the Pandemic.
- More extensive and longer term mental health and wellbeing programmes are likely to be needed. There is also an opportunity to build on promoting greater social interaction through the planned work on community engagement.
- There is an opportunity to harness and promote an increased interest in more active lifestyles.
- There is a real opportunity to consolidate on the community spirit that has emerged and thereby enhance engagement further.

- The digital world is now truly here. Expectations have changed as a result of the Pandemic and some of these are likely to become norms in the post Covid-19 world. The Council will need to adapt to meet these expectations.
- Partnership working has been enhanced as a result of the challenges that Covid-19 has brought. This is evident in a number of areas e.g. hospital discharges, NEETS etc. Can this be built on?
- Time and space needs to be set aside to reflect and remember what local communities have gone through over the past year and also to celebrate what is hoped will be a brighter future.

Economic Impacts

Overview

- The Government now expects GDP to reach pre Covid-19 GDP levels by the middle of 2022. The national economy is expected to be 3% smaller in five years' time than it would have been had the Pandemic not occurred.
- The most impacted sectors are those dependent on social consumption (e.g. hospitality and leisure) in addition to wholesale and retail. These are not overly dominant in the West Berkshire economy.
- The sectors most adversely affected tend to be dominated by young workers and females who are often unable to work from home.
- That said West Berkshire has a large proportion of industries where there is a high propensity to be able to work from home.
- There has been a significant rise in the past year in vacancies which are seeking staff to work remotely.
- 4,900 jobs in West Berkshire have been furloughed (6% of all jobs).
- 3,755 people are claiming unemployment benefit in West Berkshire (March 2021). The number has tripled in a year although the qualifying criteria have been broadened.
- It is worth reflecting on pre Covid-19 forecast trends which will remain relevant in recovery planning alongside predictions relating to the current recession:
 - Locally labour supply will continue to fall as the population ages rapidly (this started in 2018). This is at odds with other areas where the workforce is set to increase.
 - Future forecast growth sectors have been less impacted by Covid-19.

- Growth is expected in employees self-employment is forecast to remain static.
 Part time employment is expected to grow more rapidly than full time.
- Job density (number of jobs per economically active person) remains very high in West Berks (1.17 compared to 0.88 for the South-East and 0.87 nationally). Looking ahead comparatively strong demand and a shrinking workforce would see this ratio increase further. Reduced in migration from Europe and the impact of increased remote working also need to be considered.
- Despite known challenges in terms of vulnerable groups being able to access the labour market, West Berkshire's NEET figures in January 2021 were very positive.
- West Berkshire's working population remains very highly qualified.

Implications

- Recession will reduce consumer spend and is likely to have an impact on public finances.
- West Berkshire has generally proved fairly resilient economically during the Pandemic as it has during earlier economic shocks. This comparatively positive position would seem set to remain moving forward.
- Some sectors such as retail are likely to decline further in terms of employment. Others such as hospitality may recover more quickly.
- There is a need to rethink the District's town centres as destinations. They have a high proportion of sectors that have been vulnerable during Covid-19, are sensitive to the rapid growth in e-commerce and are also vulnerable to changing work patterns which may well see more 'office workers' working from home.
- The forecast shift out of major urban centres such as London to suburban or more rural areas such as West Berkshire could lead to an increase in housing demand and pressure on house prices.
- Reskilling, particularly for badly impacted sectors may be important. Job support will need to focus on younger age groups and women as well as those groups that are traditionally underrepresented in the local workforce.
- Demand for office accommodation may shrink as new working patterns potentially form. Future regeneration plans will need to reflect this if it materialises.
- Digital investment seems set to become an even more important driver.

Environmental Impacts

Overview

- At a global level the negative impacts of the Pandemic are seen to be an increased use of single use plastics and lower oil prices. Positive influences, at least in the short term, are reduced emissions and improved air quality. The latter could become more lasting if work locations and there are widespread changes in human behaviour.
- There may be longer impacts on international trade and travel if strategies are introduced to reduce exposure to Pandemic risks.
- Locally, travel has been impacted by the Lockdown (April 2020 saw reductions between 59% and 73%, then 7% - 26% during September and reduced again to between 11% and 55% in December compared to previous year). Fewer journeys have led to reduced congestion. At the same time there has been a move towards more active forms of travel most notably cycling and walking.
- There is a sense that there is now a greater appreciation of the environment.
- As with the economic impacts it is worth reflecting on those wider trends / decisions that were in place prior to Covid-19 and which will have an influence on recovery and renewal planning:
 - Nationally, legally binding targets to reduce emissions by 2030 noting that West Berkshire has committed to being 'Carbon Zero' by the same date; reducing water abstraction and leakage by 2025; enhancing biodiversity with long term targets for tree planting and woodland cover; better management of environmental risks e.g. flooding; better natural resource management namely soils, timber fish and food; enhancing the natural environment; mitigating and adapting to climate change; and, minimising waste, managing exposure to chemicals.
 - On November 18th the Prime Minister set out a ten point plan for a green industrial revolution. This included the promotion of greener forms of energy, greener homes and buildings, carbon capture, protecting the natural environment, promoting innovation and providing financial support. The Council's Environment Strategy reflects much of this.

Implications

- The Council has an Environment Strategy Delivery Plan and this will be used as the vehicle to enshrine any recovery and renewal targets emanating from Covid-19. Areas where it would appear there is a notable opportunity to do more are:
 - The promotion of community engagement since much of what the Council is seeking to deliver can only be done with local communities.

- Promotion of active travel which could be further supported by residents choosing to travel less or in a different way.
- \circ An even greater opportunity to promote the expansion of EV charging points.
- Encouraging customers back to using public transport.
- o Better promotion and use of our open spaces for leisure activities.
- Enhanced tree planting and other initiatives aimed at enhancing biodiversity and responding to a greater appreciation of the countryside and local environment. This could be particularly positive with the younger generations.
- Longer term opportunities in this area will be driven by the degree to which the Pandemic has created long lasting behaviour change. This is not yet clear.
- If traditional road travel is going to decline then should resources be diverted away from road maintenance into supporting the themes in the Environment Strategy?
- If 'Staycations' are going to become more popular should the Council consider investing more in tourism promotion?

Organisational Impacts

Overview

- As this Recovery and Renewal Plan is being written there is an emerging expectation that Local Government is set to play a prominent role in supporting the national Covid-19 response going forward. It has been suggested that councils are likely to take on responsibilities for Test and Trace, outbreak management, surge testing, community support and even vaccinations. If additional responsibilities are allocated then these will need to be managed alongside recovery and renewal expectations
- The country is currently experiencing an economic recession driven by Covid-19. This will have an adverse impact on the community but also potentially on the Council in terms of both future Government funding and the Council's own income levels. Covid-19 may well have a more direct impact on Council income in terms of town centre parking.
- Covid-19 recovery and renewal provides an opportunity for the Council to lead by example in the measures it takes following the Pandemic.
- The ability to do a lot more digitally has transformed the way that the Council works both internally and with its customers. This will undoubtedly be one of the most lasting areas of renewal post Covid-19. There are a range of issues to consider in this regard:
 - Progressing new channels of communication such as chat bots

- o Continuing to engage more residents in Council meetings through remote access.
- Meetings and surgeries all being held on line. This could be extended to the resolution of service queries, complaints etc. That said an understanding needs to be reached as to what is best done online and what is better done face to face.
- Moving further away from paper and written recording.
- Opportunities to engage the traditionally 'hard to reach' through more innovative digital methods.
- With a greater emphasis on digital working there is a fresh opportunity to enhance our capture of data and using it to better understand our customers' needs in the planning of services.
- Staff training becoming increasingly virtual and extended into areas such as coaching and mentoring.
- Operating under urgency procedures has enabled much speedier decision making and there is an appetite for looking at whether this could be retained at least in part moving forward.
- New ways of working which are likely to involve more home working on a permanent basis will bring both opportunities and challenges. Opportunities will include being able to recruit from a larger employment pool, improved retention and work life balance, reduced carbon emissions and reduced costs. Challenges include managing remote staff, training, supporting new starters and maintaining a team ethos and support structure.
- There is an expectation that the demand for services may well increase following the Pandemic notably for those areas which are focused on supporting the vulnerable, safeguarding and providing mental health and wellbeing services.
- The Pandemic has now been with us for over a year. The vast majority of Council staff have continued to work during this time sometimes in difficult circumstances. Others have had to directly support the Covid-19 response. Fatigue is now a noticeable problem and this needs to be recognised in setting an appropriate pace for any Recovery and Renewal Programme.
- The long term impact of Covid-19 on staff recruitment most notably in Adult Social Care is as yet unclear. In the NHS there is a fear that there may be a significant exit of staff post Covid-19 particularly from those who came into the country to work.

Implications

• Recovery and renewal need to be set at an appropriate pace. Some staff are very tired and the 'day job' has not gone away. Expectations need to be managed particularly if coming out of Lockdown demand for services increases in some areas.

- This will become even more important if local government is given on going responsibilities for Covid-19 management.
- The Council needs to 'lead by example' thereby further strengthening its community leadership role through the Pandemic.
- There are significant opportunities to enhance our own efficiency and our relationship with customers through the more rapid enablement of ICT. Capacity and perhaps capability are likely to be the main restraints here. A comprehensive training programme will be essential.
- Whilst there is great potential in the enablement of further ICT we need to reach an understanding as to what is best done virtually and what should be done through face to face contact.
- New approaches to working are there to be realised and could bring a wide range of potential benefits. An early start has been made on this with Timelord 2.

Recovery and Renewal Strategy 2021 Update – Delivery Plan

Priority 1 - Recovering West Berkshire's health and social wellbeing to ensure we remain one of the healthiest places in the country, whilst at the same time doing more to address health inequalities.

Theme	Actions
1. Closing the inequality gap.	Ensure that our Equality and Diversity Strategy is prepared with key partners and effectively consulted on to ensure it addresses post Covid-19 issues - and that it is championed within the Council.
	Address these concerns through the upcoming Equalities and Diversity Strategy basing actions on what evidence is available. There will need to be an emphasis on:
	 Improving the collection of ethnicity and other protected characteristics data. Developing 'culturally competent' programmes for engagement and service delivery. Measuring the impact of interventions and learning from what that tells us. From our learning create actions that can be delivered at a local level to reduce inequalities. Ensure that there is meaningful consultation on the strategy; that it is co-produced and that it clearly
	demonstrates the Council as being a 'champion of equality'.
	Reinforcing the Council's role as a placemaker buy using our own Establishment to influence change e.g. positive hiring practices, offering work opportunities, influencing appropriately in our role as a major employer in the District and byensuring we bring social value into our policy making.
	(Strategy and Governance to lead – All Departments)

Theme	Actions
1. Closing the inequality gap.	Address the inequality gap through implementing new healthy planning considerations and procedures, such as health impact assessments, in West Berkshire developments. The built environment is a wider determinant of health and COVID-19 has exemplified to what extent people's physical living conditions play a part in determining health across the life course. Public Health will work with all relevant departments and Berkshire West CCG to ensure that health is at the forefront of new designs as part of the effort to close the inequalities gap. <i>(Communities & Wellbeing)</i>
2. Supporting our colleagues in the NHS.	NHS Recovery priorities are based around continuing to support the Covid-19 response, returning to BAU as soon as possible, and ensuring that staff are supported and the required staffing resources are in place. The Council will continue to work with Health colleagues through the Integrated Care Partnership (BW ICP) to support this.(Berkshire West Integrated Care Partnership)Seek to continue the very positive improvements that have been seen in hospital discharge times during the Pandemic. This will be subject to sufficient funding coming forward.(Adult Social Care)Place an increased focus on preventation to help reduce the demand on the NHS. (Communities & Wellbeing)
3. Seeking to maintain the benefits of health and social care integration.	The BW ICP is currently reviewing its flagship priorities for 2021/22 and these will include a number of programmes which will seek to further develop health and social care integration both at a Place (Berkshire West) and Locality (West Berkshire) level. <i>(BW ICP)</i>
 Promoting good mental health and wellbeing. 	A £200k programme has already been put in place to cover additional mental health support co funded with Greenham Trust.

The	eme	Actions
	Promoting good mental health and wellbeing.	Carry out an exercise with partners to map mental health needs across West Berkshire post Covid -19. The BOB ICS is undertaking a review of CAMHS services across the wider area.
		(Communities and Wellbeing; Children and Family Services; Adult Social Care; BW ICP)
		Ensure that arrangements are in place to raise the profile of mental health services to effectively manage the increase in mental health and wellbeing in rough sleepers and homelessness.
		(Development & Planning)
		Carry out an exercise with parnters to map mental health needs across West Berkshire post Covid-19. The BOB ICS is undertaking a review of CAMHS services across the wider area.
		(Communities & Wellbeing)
		Promoting positive mental health as well as mental health services for those that need it.
		(Communities & Wellbeing)
5.	Supporting Adult Social Care.	Ensure that visiting arrangements are reviewed and updated as required.
		Ensuring the Resource Centres open as soon as they are able.
		Continue to monitor the residential care market and our position within it.
		Support initiatives aimed at improving outdoor spaces in our 'in house' care homes.
		Ensure that certain key functions e.g. the review of care packages are brought back to 'business as usual' as soon as possible.
		(Adult Social Care)
6.	Promoting active lifestyles.	Continue to support the roll out of 'Berkshire West Can'.
		(Berkshire West Integrated Care Partnership)

 on promoting physical activity locally in the context of coming out of Covid-19 including the restart of previously popular programmes e.g. West Berkshire Run Together and West Berkshire Park Run. <i>(Communities and Wellbeing; Strategy and Governance)</i> Establish bespoke programmes to support those who have lost mobility during the Pandemic or are potentially vulnerable to low levels of physical activity 	Theme	Actions
Consider promoting on line fitness programmes. Refocus and relaunch the Community Physical Activity Fund in partnership with Greenham Trust with health inequalities and COVID-19 recovery in mind. The fund will give local organisations the opportunity to apply for funding to enable them to develop or enhance a physical activity initiative, and will prioritise		 Establish an ongoing promotional campaign focused on promoting physical activity locally in the context of coming out of Covid-19 including the restart of previously popular programmes e.g. West Berkshire Run Together and West Berkshire Park Run. <i>(Communities and Wellbeing; Strategy and Governance)</i> Establish bespoke programmes to support those who have lost mobility during the Pandemic or are potentially vulnerable to low levels of physical activity e.g. older people. Consider promoting on line fitness programmes. Refocus and relaunch the Community Physical Activity Fund in partnership with Greenham Trust with health inequalities and COVID-19 recovery in mind. The fund will give local organisations the opportunity to apply for funding to enable them to develop or enhance a physical activity initiative, and will prioritise those applications that will best serve members of the community most impacted by the Pandemic.

Priority 2 - Ensuring economic recovery and renewal, with a focus on those who have lost their jobs, notably the young, women and the disadvantaged; supporting those sectors most impacted by Covid-19; and ensuring we continue the journey of repurposing out Town Centres for the future.

Theme	Actions
 Increasing our efforts to empower everyone to enter the workplace. 	Target skills development and employment guidance at women, young people and other groups impacted by the Covid-19 Pandemic.
	(Planning and Development : Education)
	Reinforcing the Council's role as a placemaker buy using our own Establishment to influence change e.g. positive hiring practices, offering work opportunities, influencing appropriately in our role as a major employer in the District and ensuring we bring social value into our policy making.
	(Strategy & Governance)
	Promote local government more effectively as a career path for local residents
	(Strategy and Governance: All Departments)

Theme	Actions
 Increasing our efforts to empower everyone to enter the workplace. 	Adopt a Social Value Policy to maximise the use of public money in public contracts and make positive changes for the good of the District as a whole by creating jobs for local people, supporting young people into apprenticeships, using local suppliers, and supporting a local supply chain and investing in SME businesses. The Policy will support opportunities to innovate and generate environmental benefits in such areas as the delivery of the new Environment Strategy 2020- 2030.
	(Commissioning)
	Help residents to develop their digital skills at every stage and to facilitate access to equipment among communities where there is deprivation, including through out community hubs such as libraries.
	(Strategy & Governance)
 Putting in place employment support for the newly unemployed and underemployed. 	Promote Berkshire Opportunities as a first port of call for the recently unemployed.
underemployed.	Through the Jobcentre, identify and refer young people to the Kickstart Scheme, delivering this message through other Council services.
	Utilise the Kickstart scheme to create temporary roles at the Council and in schools.
	Work with the Local Enterprise Partnership to influence employers to offer value- added jobs to a wider range of employers.
	(Planning and Development)
 Supporting businesses that have been affected by Covid-19 to reopen and trade resiliently. 	Continue to administer Business Support Grants including the ARG
	Support businesses to adapt and diversify by referring them to the Berkshire Business Growth Hub for bespoke advice.
	(Finance and Property : Planning and Development)
	Redesign and relaunch a Mental Health First Aid initiative for local businesses, so that they may reopen with staff health and wellbeing at the forefront of their operations.
	(Communities and Wellbeing)

Theme	Actions
4 Reshaping our Town Centres.	Through the Berkshire Place Making Board identify projects which will contribute to sustainable, inclusive growth and seek funding for them from Government through the Levelling Up Fund and similar revenue streams. The redevelopment of the Newbury Lido has been identified as the first project to be put forward to Government.
	We will support our High Streets across the District to deliver the new uses that are needed by local residents and businesses.
	Use the Government's Welcome Back Fund and Council funded Welcome Back business grants to drive footfall in high streets and town centres, including Newbury, Thatcham, Hungerford and others. Develop 'Shop Local' branding and marketing activity to encourage more ethical, impactful shopping and purchase of services.
	Seek funding for capital spend arising from masterplanning for Newbury, Thatcham, Hungerford and other West Berkshire towns in order to improve the public realm and the spaces available to residents and businesses.
	(Development and Planning; Environment)
	Develop formalised working relationships between Planning and Public Health, so that the health needs of the West Berkshire population are considered in the reshaping of our town centres.
	(Development and Planning, Communities and Wellbeing)
 Promoting digital infrastructure focusing on 'full fibre' and 5G coverage and help grow digital skills. 	Seek to facilitate and fund projects that enable the provision of full fibre and 5G across Berkshire and West Berkshire.
	(Berkshire Digital Infrastructure Group)
	Partnering with schools, and our teams involved with schools, to deliver targeted digital skills training such as coding – initially through online classes.
	Prioritise digital skills within opportunities offered by the Council; including apprenticeships, work experience and potential Kickstarter roles.

Theme		Actions
5	Promoting digital infrastructure focusing on 'full fibre' and 5G coverage and help grow digital skills.	We will support the LEP's proposed Digital Skills Partnership to boost the availability of vital skills locally. (ICT; Planning and Development; Strategy and Governance; Education; Berkshire Digital Infrastructure Group)
6	Reviewing whether the Council, with its Partners, should seek to encourage further rural diversification through investing more in tourism if there is a sustained change in holiday travel patterns.	Will require a review of potential investment opportunities if it becomes clear that over the medium term there has been a move towards domestic holidays. (<i>Planning and Development</i>)
7	Support the most vulnerable and disadvantaged groups in the district to recover from financial hardship and poverty.	Adopt a financial inclusion policy to support local vulnerable and disadvantaged groups such as homeless, experiencing financial hardship and poverty due to the impact of Covid 19. The policy will enable issues such as, loss of income through furlough, job losses and affordability to be minimised and contribute towards sustainable communities. (Strategy & Governance; Finance & Property)

Priority 3 – Supporting our children and young people and our schools with a focus on the most vulnerable.

Theme	Actions
 Ensuring that programmes and support are in place for pupils of all ages and that they are able to catch up on the time lost during the Covid- 19 Lockdowns. 	 A range of programmes are in or being put in place: Early Reading Year 1 General Reading Programme (18 schools) National Tutoring Programme Full potential (1:1) tuition for any pupil (GT Partnership) Oracy programme Mathematics programmes. (Education)
 Closing what may well have become a greater education attainment gap. 	 Introduce the Ready to Progress' criteria to schools for mathematics. Ensure the curriculum is highly ambitious for all by: Continuing to raise the profile of subsidised subject leader training Flying visits to schools

	Staff meetings to schools.
Theme	Actions
 Closing what may well have become a greater education attainment gap. 	Widen career choices for disadvantaged pupils by ensuring PP champions in secondary schools engage through network meetings. <i>(Education)</i>
3. Improving the transition experience.	 Holiday and activities and food programme will include secondary involvement and complete some transition work. Schools transition project. Year 6 / 7 schools' transition project – voluntary project between schools to share outcomes of any assessments taken. <i>(Education)</i>
 Addressing increased mental health and emotional wellbeing concerns amongst children and young people. 	 A range of programmes are in or being put in place: Extra Primary Mental Health worker in EHA (potential extension for 2 years). Deliver PPEP Care Training Emotionally Based School Avoiders (EBSA) support (bid has already gone to Schools Forum). Potential early intervention from Ed Psychs (screening for one year). Video Interaction Guidance (VIG) being made available for parents to improve parent wellbeing and child behaviour intervention increases parenting sensitivity. Consider subsidising training for ELSAs (Emotional Literacy Support Assistants) for Early Years setting to support the wellbeing of pre- schoolers. Pilot the role of Wellbeing Governors in schools.
 Responding to an increased demand on our services for support, notably for more vulnerable children and young people including those Not in Employment, Education or Training (NEETs). 	 The following actions are being considered: Reduce our traded services costs for 1 year to subsidise costs to schools. Increase the amount of free days provided on SLAs. Extend Assistant SEN case officer post. Roll out the Oracy project to schools. Use assessments and school intelligence to select core schools to receive support Implement the Phonics Early Reading Strategy. Pupil premium champions to work in nominated

 6. Supporting a fragile Early Years sector. 7. Embracing new technology and the opportunities for remote and shared learning. 	 schools. Create a Recovery based 'Diminishing the Difference' schedule. Continue to support opportunities for NEET indivduals and invest time in seeking out apprenticeship options with employers. (Education) Consider providing a central Early Years central training bursary fund. Extend the Imagination Library (book gifting) to specific targeted groups Family Hub work to focus of developing parenting with a focus on socialisation and using outdoor spaces to develop motor skills Consider the recruitment of Family Support Workers OR active play workers to encourage parents and their children to get active, interact and connect and help alleviate anxiety, loneliness and raise mental health resilience. (Education) Awareness and training for parents. Designing projects completed as a family.
	Parental control guidance for devices to keep children safe online. (<i>Education</i>)
Priority 4 - Taking the opportunity to ac	celerate delivery of our environmental objectives
Theme	Actions
1. Greater promotion of Active Travel.	Implement the local Cycling and Walking Infrastructure Plan and enclose this within a new post Covid-19 Local Transport Plan. Expand the Council's cycle training offering. <i>(Environment)</i> Promote active travel modes in all relevant planning consultations with a particular focus on active commuter travel. Contribute to the LEP's Berkshire Connected Travel Plan.

(Development and Planning)

Explore commissioning an active travel behaviour change study, as part of the Capabilities Fund Grant,

to research the barriers and facilitators to adults in West Berkshire choosing active modes of travel.

	(Communities and Wellbeing)
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Thoma	Actions	
Theme	Actions	
2. Promoting more sustainable forms of transport.	Seek to find additional resources to implement EV charging at greater pace.	
	(Environment)	
	Establish a promotional campaign to encourage people back onto public transport.	
	(Environment)	
Priority 4 - Taking the opportunity to ac	celerate delivery of our environmental objectives	
Theme	Actions	
3. Investing more in our parks, open spaces and public rights of way.	Implement further initiatives to increase physical activity.	
	Assess what investment may be needed to protect current parks and open spaces in the face of increased demand.	
	(Environment)	
Priority 5 - Enhancing our communications and our community engagement		
Theme	Action	
 Developing and strengthening even further our relationships with local partners and those at a sub-regional level reflecting on the good 	Establish system level approaches to Recovery e.g. through Integrated Care Partnership, Community Safety Partnership etc.	
collaborative work that has been achieved through the Pandemic.	(Communities and Wellbeing, Strategy and Governance – others?)	
	Through the Health and Wellbeing Board look to establish a more system based approach to communications and community engagement.	
	(Communities and Wellbeing, Strategy and Governance)	
2. Working to help build a more sustainable voluntary, community and social enterprise sector.	Conduct engagement to establish and address the needs of the Voluntary and Community Sector Support in West Berkshire.	
	Commission a Diverse Ethnic Communities Advocacy Service to support our ethnically diverse communities in West Berkshire.	
	Create a Community Alliance to bring together community leaders as equal partners to support community capacity building.	

(Communities and Wellbeing)

Th	eme	Action
3.	Sustaining the dynamic relationships with community groups and local councils that have emerged during the Pandemic.	Develop a Community Engagement Framework to strengthen relationships with our local communities – seeking engagement and opportunities to co-produce local solutions. (Communities and Wellbeing)
4.	Capturing what was achieved by the creation of the Community Support Hub and take that learning into future work – both under emergency scenarios and 'normal' service delivery across the Council.	A specific paper will be produced for discussion later in 2021. <i>(Communities and Wellbeing)</i>
5.	Becoming better at informing our local communities about what we are doing and about issues that are relevant to them.	 The publication of a digital residents newsletter which is already in place. The use of the Gov.Delivery framework to enhance our delivery of information to local communities including the publication of a newsletter to local businesses. The production of a weeknote from the Leader and Chief Executive to local residents. This is already in place. The introduction of 'think pieces' to reflect on the implications of the global on the local emphasis of WBC's role in something wider. Social media – look to further enhance the opportunities provided by social media and to rensure that it is effectively managed. The establishment of an internal Communications Steering Group to enhance the flow of information across the Council and out to the local community. The establishment of a weekly briefing for the local media. (Strategy and Governance)
6.	Enhancing our approach to how we involve residents, businesses and local communities in what we are doing.	Start using social media to establish more effective means of creating a two way dialogue. (Strategy and Governance)

Priority 6 - Improving the customers' experience of us with an enhanced efficiency and openness with an enhanced openness in how we work and share information

Theme	Action
 Responding to the changing needs of our customers in a post Covid-19 world. 	This area of work is significantly less developed and will require further attention of we are to sustain the behaviour changes that have been seen in Lockdown. Key issues to be addressed are:
	 Digital Democracy is as important as the Digital Strategy – viz one service, many channels. Should we consider some form of Customer Charter – highlighting the need for two way communication, participation and our responsibilities to each other as we deliver and use local services. What approach are we going to take to face to face meetings with customers – are we moving to 'virtual by default?' Do we remove all walk in face to face contact and move to appointments only
	 What suite of performance indicators do we use to ensure that a more digitally enabled customer experience is delivering what the customer should expect and needs? What additional resources do we require to make this more efficiency digitally enabled work a reality – and by the same measure what do we need to disinvest from?
	(Strategy and Governance)
	The Council will create a modern workplace by improving the connectivity of its workforce and by providing better facilities to aid remote working.
	The Council will provide training to officers and Members to ensure that they are proficient at performing digital transactions.
	The Council will produce a Customer Charter – two way communication, participation and our responsibilities to each other as we deliver and use local services.
	The Council will seek to achieve Many Channels – One Service. The Council will review options to increase channel choice for customers, whilst ensuring consistent customer service standards.
	The Council will ensure that its public meetings remain accessible to all, including access via digital means.

Theme	Action	
 Responding to the changing needs of our customers in a post Covid-19 world. 	The Council will explore opportunities to further enhance accessibility by the use of technology. (Strategy & Governance)	
 Responding to an increasing demand to work virtually and in a more digitally enabled world 	 There are two elements to this: 1. What we do within the wider West Berkshire community. 2. What we do as a Council. 	
	On the former there is a Digital Strategy which is being developed for Berkshire through the Digital Infrastructure Group. This has only just been completed and focuses on the themes of full fibre, 5g and filling gaps in existing 4g coverage.	
Priority 7 – Seizing the positives that has emerged from the Pandemic but not forgetting those we have lost; those whose lives will be forever changed; and those who have supported our local communities during the Pandemic, including our own staff.		
Theme	Action	
 Taking the opportunity to embed the positive aspects of the working practices that have had to be put in 	This is being embraced within the Workforce Strategy and the Timelord 2 Programme.	
place during the Covid-19 Pandemic.	(Accommodation Group : Workforce Board)	
	Public Health will lead on implementing ICP funded workplace physical activity initiatives through 2020-21. The Council will seek to learn from these and engage with staff in order to establish best healthy workplace practices for West Berkshire Council employees moving forwards.	
	(Communities and Wellbeing)	
2. Using Outcome Based Budgeting to help redirect resources to help	This will be built into budget build process this year.	
support recovery and renewal priorities.	(Finance and Property)	
3. Remembering those we have lost and those whose lives had been adversely impact on by the Pandemic.	<i>Blooming into Spring</i> ' remembering those who has died by planting circa 250 white flowering cherry trees across the District in a number of groves to mark the start of the first Lockdown in the Spring of 2020.	
	(Environment)	
	Remembering those who have lost their life to Covid- 19 or been adversely affected by it holding an annual event which could also be potentially linked to the Celebrating suggestion below.	

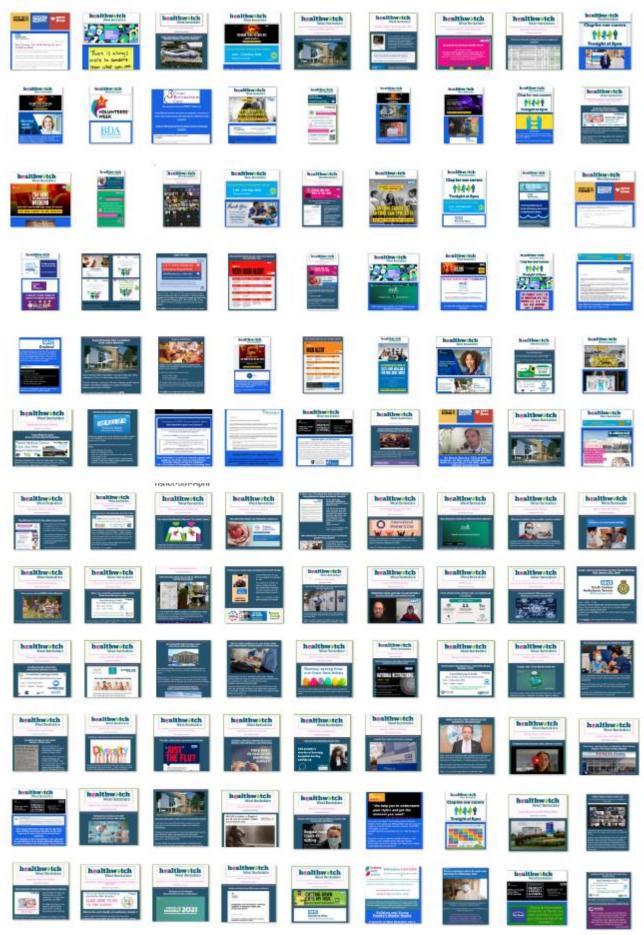
Th	eme	Action
3.	Remembering those we have lost and those whose lives had been adversely impact on by the Pandemic.	Celebrating a better future through embedding the achievements relating to our renewal priorities in our communications.
		(Strategy and Governance)



On equal terms

Then and now

Healthwatch West Berkshire Annual Report 2020-21



All Newsletter Covers produced during COVID-19



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West Berks Diversity Forum

"The Healthwatch West Berkshire team are always incredibly responsive and exemplar of active listening" James Wilcox (Fair Close Centre) Page 119

Message from our Chair

Welcome to the Healthwatch West Berkshire (HWWB) Annual Report for 2020/21.

When I wrote my report this time last year it was difficult to look to the future and envisage the on-going havoc wreaked by the SARS-CoV-2 virus and resultant impact on the provision of health care to the community.

Despite the difficulties imposed by remote working in a virtual world, Healthwatch West Berkshire has continued to be the essential, and successful, conduit for patient feedback.



Mike Fereday, Chair Healthwatch West Berkshire

care services provided to the local community for the better.

While there have been many dark days, the light at the end of the tunnel is glowing ever brighter fuelled by the fantastic efforts of scientists around the world to produce effective vaccines in an unbelievably short period of time and the subsequent roll-out by local health professionals. For West Berkshire, the CCG, the Primary Care Networks, Practice Managers, Practice Staff and volunteers can feel justly proud of the smooth and efficient way that the local vaccination centre was set up and run. It follows that much of the work of HWWB this year has been Covid 19 related.

Remote working and virtual meetings have continued to be the norm which has impacted on activities such as "Enter and View". Given the national disaster of coronavirus infected patients being discharged from hospitals to care homes, a member of the Healthwatch West Berkshire staff, with full PPE and taking effective infection control measures, was able to visit several care homes to gather the experiences of residents and staff as to how they were affected by the pandemic. I am humbled by the dedication of this individual in performing this activity.

Adapting to the new way of working was challenging but I am delighted to commend the staff of Healthwatch West Berkshire for the way that they have responded. Our monthly Newsletters became daily as we sought to provide the residents of West Berkshire with up-to-date information on the pandemic. Of particular note was our fifth "*Thinking Together*" event which was held as a virtual event. This enabled providers and recipients of mental health support to exchange views. Holding the event virtually had both *pros* and *cons* but it proved to be very successful. Concerns that we may have lost participants because of digital exclusion issues proved to be largely unfounded thanks to welcome support from the voluntary sector.

Joint Covid 19 Survey and Report for 'Berkshire West'

HWWB took part in a joint survey with Healthwatch Reading and Healthwatch Wokingham on how Covid 19 had affected individuals. We took the opportunity to target and engage particularly with the residents of West Berkshire. It was clear that there was a huge anxiety created in the public as everyday services moved online, changed location, were suspended, or just stopped operating. Major issues highlighted included Phlebotomy (which seems to have been largely resolved) and specifically Dental services, which effectively ceased to operate in any meaningful way for much of 2020.

Maternity Survey , Report and Forum to obtain people's views and experience.

Following our survey of women using maternity services which was updated to take account of Covid 19 issues, we published our report on the maternity experience. In West Berkshire, the levels of care are generally very good, though the maternity experience report highlighted some issues that may warrant further investigation and potential changes - a startling finding of the report being that 25% of women were dissatisfied with their maternity care. A significant number of women were found to have given birth in hospitals in adjoining counties (outside the Bucks, Oxfordshire and Berkshire West (BOB) Integrated Care System (ICS) highlighting the cross-border issues we experience in West Berkshire.

West Berkshire Diversity Forum

HWWB hosted the second West Berkshire Diversity Forum – another virtual event – which focussed on how Covid 19 had affected individuals, their families and the community. This enabled the community (people of colour) to share their experience during the pandemic with the intention of learning from the feedback and how this should impact on health and social care service in West Berkshire.

CAMHS Survey & Focus group work

In February 2021 HWWB undertook an online survey exploring the views and perceptions of the parents/guardians of children who were currently using the local Child and Adolescent Mental Health Services (CAMHS). I hope our report, when published, will be a springboard for the root and branch transformations that will improve the mental health and emotional wellbeing of our children and young people in West Berkshire.

In terms of healthcare provision, the pandemic has continued to change the way in which people interface with GP surgeries with much greater reliance on digital technology. HWWB will continue to have an important role in ensuring that the vulnerable and those unable to adapt are not left behind and overlooked by the NHS.

Finally...

In conclusion, it is my firm belief that we impact the provision of local health and care services provided to the local community for the better. That this has been achieved, once again largely devoid of any face-to-face contact, is entirely due to the enthusiasm and vigour shown by the Chief Officer, HWWB staff, volunteers and Board members. Of course, we could not have done this without the willingness of statutory and Health and Social care organisations to listen to us, to work with us and to respond positively to the issues raised on behalf of local people.



Mike Fereday, Chair Healthwatch West Berkshire

About us

Here to make health and care better

We are the independent champion for people who use health and social care services in West Berkshire. We're here to find out what matters to people and help make sure your views shape the support you need, by sharing these views with those who have the power to make change happen.

Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.





"Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone's views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives."

Sir Robert Francis QC, Chair of Healthwatch England

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hts from our year

Find out about our resources and how we have engaged and supported people in 2020-21.



We heard from

1137 people

this year about their experiences of health and social care.

We provided advice and information to

1,115,638 people

this year via social media, newsletters & our website.

Responding to the pandemic

We engaged with and supported via digital

387,909 people

during the COVID-19 pandemic this year.

Making a difference to care

We published



reports

about the improvements people would like to see to health and social care services. From this, we made 24 recommendations for improvement.

3 % of recommendations

we made last year have been acted upon, at the point where we reviewed progress.

Health and care that works for you



22 volunteers

helped us to carry out our work. In total, they contributed 800/100 hours/days.

We employ 4 p/t staff

2.6% of whom are full time equivalent, which is the same as the previous year.

We received

£98,000 in funding from our local authority in 2020-21, the same as the previous year.



Healthwatch West Berkshire Maternity Report

Theme one: Then and now Maternity

Then: access to NHS Maternity services

Thanks to people sharing their experiences of maternity we were able to highlight a message that all was not good for those giving birth in West Berkshire and for new mums also.

Our report found that one in five of those women answering the survey told us they were unhappy with their maternity care and almost one in ten found the experience traumatic.

HWWB also found that only half the women surveyed felt they were given all the information they needed. The most worrying figures relate to those women who said they received little or no information or advice during their pregnancy: 12% and in the 10 days post-partum: 21%. We found 3 out of 10 women felt they didn't get the emotional support they needed during pregnancy. Of more concern was that 4 in 10 women felt that they had little or none of their emotional support needs met. Given the dangers of postpartum depression, this is a concerning figure and one that needs to be addressed.

Approximately 6 out of 10 women felt free to make their own decisions and believed that options and choices were well explained, leaving 4 out of 10 who did not. It is striking that although a third expressed the desire to give birth at home, however, only 5% of the sample achieved this. Leading to the question is shared decision making real in maternity?

Of particular note, was the communication 'gap', with many feeling they did not know what to do around important issues: including getting in touch with their midwife and what to do if they were not available; baby weighing and how important this was or even how to do it safely. There were inconsistencies from the four local hospital Trusts around partners visiting or accompanying pregnant women. It is important this feedback does not get lost. Page 124



Thanks to patients sharing their experience of maternity, HWWB has actively campaigned to ensure that the issue of maternity is right at the top of 'the worry list' for the local NHS leaders and West Berkshire's Health and Well Being Board. Asking for scrutiny and service improvements to be made is crucial to ensure national scandals are not brushed off as '*well its not like that here.*'

We were delighted to take our Maternity report to the Health and Well Being Board for an in depth discussion of local services in September 2020. The report had 14 recommendations

Our initial survey captured the views of 190 women, following on from a joint survey in 2018 that heard from 1400 across the BOB ICS area. With recent national maternity scandals to the fore, Shrewsbury's leading to the *Ockendon Report*,* which followed on from others including Morecombe Bay and the birth inequalities for Ethnically Diverse Communities scandal,* it's clear Maternity services are not in the place they need to be for scores of women and more importantly it's not being talked about! 1 in 5 women being unhappy with their experience points to systematic issues even in an area of relatively good health like West Berkshire.

In addition, HWWB received some post survey Covid maternity feedback:

- It has emerged from talking to new mums within the *West Berkshire Maternity Forum* that **Health Visitors** (HV) play a vital role, in supporting them postnatally. The HV service has been greatly affected by being unable to operate normally with limited mitigation being open to the service during the pandemic. This has inevitably had a huge impact on new mums.
- The communication 'gap', left many feeling they did not know what to do around important issues: such as how to get in touch with their midwife and what to do if the midwife was not available
- There were inconsistencies from the four local hospital Trusts around partners visiting or accompanying pregnant women.

"We had our 6-week check done at the same time as her jabs but no measurements. Don't even get me started on trying to get her weighed that's been an absolute nightmare back and forth with both doctors and Health Visitors"

As a result of our report Hampshire Hospitals have agreed to locate a Maternity service within West Berkshire, with Great Western Hospital happy to consider it if there is funding available.

We have also established a *West Berkshire Maternity Forum*, allied to the other three maternity voice groups in surrounding areas. It is hoped it will be supported to become a real voice for pregnant women/new mums in West Berkshire.

HWWB urges the BOB ICS, West Berkshire Health and Well Being Board & NHS England to keep a keener eye on patient feedback with regard to maternity in its transformation plans and hope overall services will begin to become equitable for all with satisfaction levels far higher in future.



Share your views with us

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

www.healthwatchwestberks.org.uk

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contact@agel125atchwestberks.org.uk

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Theme two: Then and now Accessing Covid Vaccinations

(b) Then: access to Covid-19 Vaccinations

Being able to get an appointment with a GP has been a priority for Healthwatch since it was first established. For many, including those from vulnerable groups such as Rough Sleepers, the Ethnically Diverse Communities, Canal Boat dwellers and disabled groups this can often be far from straightforward.

A West Berkshire Resident whose mother had travelled over from India to visit found themselves 'stuck' in the UK as the pandemic caused another lockdown. They tried to register their mother with a local Newbury GP, only to be told they needed a letter from the Home Office, despite her having a valid visa.

"My Mum had struggled to register with the GP however with fantastic effort from Healthwatch team, we have managed to get her two doses of vaccine in Newbury thanks Healthwatch team"

When vaccinations opened up to vulnerable groups the son tried again to register his mother and, despite her visa being valid until 2022, was told again by the surgery receptionist a Home office letter was required.

At this point he approached Healthwatch West Berkshire:

- a. We contacted the Berkshire West CCG who clarified the correct procedure under the GP Enhanced Service specification that she should be registered and entitled to a Covid-19 vaccination
- b. We then wrote to the Practice Manager and the lady was registered, received her jab (as did the son and his wife as carers) at the Newbury Racecourse site. age 126



An older couple who live on a narrow boat had cruised down from the Midlands and found themselves on the canal just outside Newbury when the second lockdown happened. Both were due to be vaccinated and had received NHS texts offering them vaccinations back in the Midlands . As they could not get there due to lockdown, having no transport other than the canal boat, they tried to register with a local GP practice

Their own surgery was only offering postal access to national sites and advised them to seek temporary registration in West Berkshire. They completed the online form for the nearest Surgery. The response from the surgery said because they were registered so far away they would not allow a temporary registration for Covid Vaccination. Additionally, they both received text messages from the NHS to book an appointment at national sites, but the link only offered places around the Midlands surgery where they were registered.

They found that the local Vaccination Centre was the Newbury Racecourse. Having found a number for the Racecourse they were told the vaccination centre did not have a phone number, but it was suggested that they try another local Newbury Surgery, as they are 'nice people'. The couple contacted this surgery in Newbury, to be told the surgery didn't want to register them.





As the <u>BMA</u> states: "<u>Anyone</u>, regardless of their country of residence, is entitled to receive NHS primary medical services at a GP practice. This means tourists, or those from abroad visiting friends or family in England, should be treated in the same way as a UK resident."

The couple then rang the national 119 number to book an appointment at the Newbury Racecourse, and were told that the Newbury site is not registered with the NHS booking service, it was only for people registered at a local surgery! They could not understand that they had done what had been requested of them, but were still no closer to organising Covid-19 vaccinations.

Finally the couple contacted HWWB. We contacted the CCG and subsequently the surgery the couple had initially applied to in order to determine why it was unable to register this couple to get vaccinated. On receiving the call from us, the surgery registered the couple as temporary patients so they could receive the vaccination.

The couple were registered, and brilliantly offered the vaccine at the Newbury Racecourse, as they didn't have transport to get to the Mass Vaccination sites in Reading or Basingstoke, (which was policy for temporary patients,) but they could get the train Radew 27 Racecourse and got their jabs there.



Now: accessing your GP during the pandemic

As a result of people sharing their experiences, we contacted the Berkshire West CCG and their Covid Vaccination Board who reminded all the local GP surgeries that under the National Guidance all people were to be registered to ensure they received their vaccination when due.

HWWB also raised this issue of Rough Sleeper Covid-19 'jabs' with the local Covid Vaccination Board. We were delighted when the Board and Dr James Kennedy set up a virtual clinic working with the Newbury Soup Kitchen/ West Berkshire Homeless Team to get our local Rough Sleepers vaccinated early in the New Year.

Despite the excellent 'Right to Care' card produced by Healthwatch England and NHS England, national initiatives around 'GP Registration', *it's still not working!* We still have too many vulnerable people approaching surgeries and being told they can't register without ID.

HWWB is calling on NHS Improvement and the BOB ICS to conduct a formal review into how people should be registered either temporarily or on a full-time basis. HWWB are asking whether difficulties with securely accessing patient records can be worked around to avoid 'flat refusals' to register someone visiting a surgery by GP receptionists, who are simply following a local surgery process!





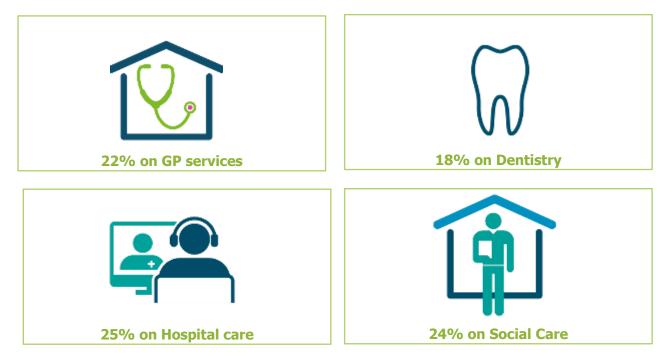
Responding to COVID-19

Healthwatch plays an important role in helping people to get the information they need, especially through the pandemic. The insight we collect is shared with both Healthwatch England and local partners to ensure services are operating as best as possible during the pandemic.

This year we helped 1137 people by:

- Providing up to date advice on the COVID-19 response locally
- Feeding back to the NHS and West Berkshire Council what the public were telling us
- Linking people to reliable up-to-date information
- Running the personal stories of residents & key workers in our *Covid Diaries* page
- Supporting the vaccine roll-out and helping with community engagement
- Supporting the community volunteer response
- Helping people to access the services they need

Top four areas that people have contacted us about:



Phlebotomy



Early in the pandemic, we heard from many people about the inability to get an emergency blood test. Many were concerned that having consulted a GP, who said their case was urgent, they then found there was a three/four week delay to get a test done at the major centres as their GP didn't do blood tests. We even had our local MP 's office asking if we could help signpost or assist and one case where they were seen by a consultant before the blood test were done

Following this:

- We raised it at the CCG Planned Care Board?
- A recovery plan was put in place
- More staff were recruited and new booking systems were put in place



Contact us to get the information you need

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& contact@healthwatchwestberks.org.uk



Volunteers

At Healthwatch West Berkshire we are supported by 22 volunteers to help us find out what people think is working, and what improvements people would like to make to services.

This year our volunteers:

- Helped us get in touch with Ethnically Diverse Communities who were struggling in the pandemic producing our online surveys.
- · Held focus groups for new mums feelings isolated to capture their feedback during Covid
- Helped us analyse key feedback and write reports for CAMHS, Covid-19, Maternity
- Managed online Zoom meetings around the new Joint Health and Well Being Strategy to capture the thoughts of key groups
- · Helped us write online surveys that were 'public friendly' avoiding jargon

"When I don't know what to do...I phone Healthwatch...so helpful." Mark Landreth Smith





Board Member – Lesley

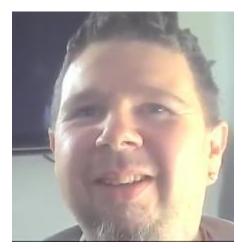
When I retired in March 2017 I wanted to carry on contributing to the health and well-being of local residents. So, alongside my parttime consultancy roles within Public Health, I have been proud to be a member of the Healthwatch West Berkshire Board for the last 2 years.

I have been involved with the HWWB team in looking at a variety of care services including maternity services, CAMHS, primary care and services for ethnically diverse communities. I have been able to use the skills and knowledge, from working in the NHS, to help contribute to the valuable work that Healthwatch does to improve local NHS services. I feel privileged to be a member of such a professional, able and dedicated Board.

Younger Volunteer – Abbie

Working with Healthwatch has been very insightful. Being part of the team gave me an opportunity to gain some understanding of people's experiences using local health services, and how important they are in making sure those who need it are provided with the proper support.

It's great to think I may have contributed, albeit in a small way, to making a difference for those who are in need of the most help.



Board member Paul

Having recently found out about Healthwatch in 2020, then asked to be an active volunteer, has given me a big insight into the varied but important work they undertake bearing in mind this is only a small team but with a large outreach within all care and health sectors.

It has enabled me to share my knowledge and understanding with those who would not have direct experience within the world of Disability thus helping to bring disability to the forefront of Healthwatch and all its workstreams.

We should all aspire to give as much support as we can to those in need, they deserve our endeavours.



Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested in volunteering, please get in touch at Healthwatch West Berkshire.



www.healthwatchwestberks.org.uk 01635 886210 vplugteergehealthwatchwestberks.org.uk

Some of our media coverage





SOUNDS



Andrew Sharp Chief Officer, Healthwatch West Berkshire



BBC RADIO BERKSHIRE

Laura Farris. MP for Newbury, mentioning our Maternity Report in House of Commons

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Newbury Weekly News



What our partners say about Healthwatch West Berkshire....

"All at Berkshire West CCG would like to take the opportunity to thank the team at Healthwatch West Berkshire for your approach throughout the 2020/21 coronavirus pandemic. You have provided support where merited and challenge where necessary to ensure the best possible patient outcomes.

In particular, we would like to thank you for the helpful and comprehensive report entitled "Covid 19 First Wave Survey and Post First Wave findings in West Berkshire". It is clear, that a lot of effort was made to capture and reflect the public view and we were pleased to have had the opportunity to comment on the recommendations within the report ahead of its publication."

Dr Abid Irfan, Chair, Berkshire West CCG



COMMUNITY UNITED

WEST BERKSHIRE

"Community United West Berkshire has been working with Healthwatch West Berkshire throughout the pandemic, signposting cases involving the ethnically diverse communities and being involved with the West Berkshire Diversity Forum as well as the Community Link Conversation.

Together we have been advocating that the word 'BAME' no longer be used with reference to the ethnically diverse communities in West Berkshire since our Belonging West Berkshire event in September, which UK government has also supported the abolishing of the use of this word.

We value the spirit of collaboration and look forward to more especially as a partner in the West Berkshire Diversity Forum and the Long Covid Project."

Community United West Berkshire

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"Healthwatch are a valued key stakeholder in Dementia Friendly West Berkshire. They are consistently involved in meetings, projects and feedback and are committed to making things better for people living with dementia and their carers in West Berkshire. Representatives from Healthwatch are always keen to share ideas and expertise and are first to step up and share tasks and events. All in all a very valued partner"

Dementia Friends West Berkshire Victoria Rowland (Dementia Co-ordinator)



What our partners say(cont)....

"In all of the work we do with Healthwatch West Berkshire, they constantly demonstrate a tireless commitment to ensuring that the people of West Berkshire are represented and have their voice heard. This has included acting as an essential bridge to local government, the health and wellbeing board and other decision makers/ representative bodies in the area. Further they are a critical friend – helping to ensure our plans, proposals and processes are developed in full consideration of the needs of the people they represent and advocate for.

The support of Healthwatch West Berkshire has been critical to the success of our engagement to date and is essential for our plans for the future The whole team provide a fantastic service to the community and we are proud to call them our partners."

Hampshire Hospital NHS Trust



"I would hope that after being closed for the whole of 2020 and part of 2021 that the Patient Information Point and Healthwatch will be able to resume its close working relationship and start working together again to help patients in the local community get the best treatment and help they can.

Thank you to all the staff of Healthwatch for your help and support with information and at times the urgent assistance you have given the PIP's Volunteers. We have seen how your staff's quick response to a bad experience can help a patient and how fast it can calm the situation down. Look forward to working with you all again in 2021."

Patient information Point West Berkshire Community Hospital



"During this difficult year, Healthwatch has been supportive and encouraging of older people's views to ensure that they feel listened to. Through Healthwatch we have enabled older people to feed into the new Health and Wellbeing strategy for the Berkshire West CCG area, which will have a longterm impact on the services and support for older people in the local area."



Hampshire Hospitals

Patient Information Point

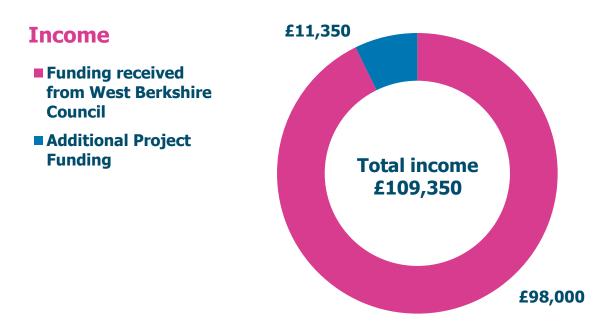
NHS Foundation Trust

Fiona Price, CEO Age UK Berkshire

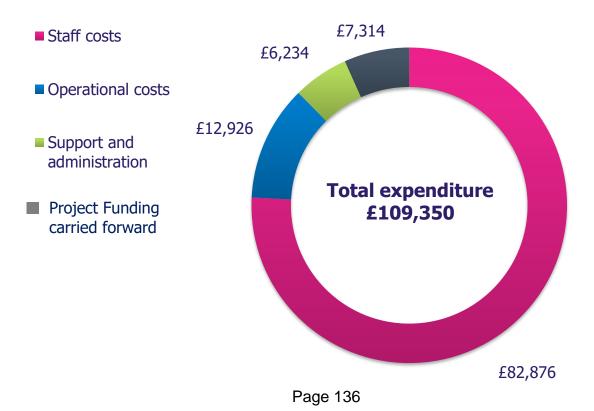
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Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.



Expenditure



Next steps

Top three priorities for 2021-22

- Ensuring equitable recovery of all services from Covid including Dentistry, Primary Care, Secondary Care and Community services, with no group left behind due to lack of a 'loud voice to fight their corner
- 2. Maternity services in West Berkshire need to improve and be the same for women who use other hospitals and with Commissioners not only focussing on the Royal Berkshire Hospital. We will champion the West Berkshire Maternity Forum to ensure women and their families are listened to
- 3. Children and Young people's mental health services are still not responding quickly enough and Covid-19 may have created even more demand. We will work with partners and Commissioners to ensure this improves and doesn't lead to years on waiting lists

Next steps

• Ensure recovery of services is fair for all. By capturing real life experiences via all our feedback mechanisms our champions network of Voluntary Organisations and including in person again, once allowed, as well as digitally. We can then present providers and commissioners with accurate feedback to how services are recovering. Additionally, we can suggest amendments and ensure meaningful patient engagement is taking place

• We will champion the creation of a functioning and meaningful Maternity Forum locally for mums, which represents all the woman and families giving birth in West Berkshire. It will cover all the maternity units, not just the Royal Berkshire Hospital. We aim to engage all the relevant Maternity Voices groups and also the Commissioners at Berkshire West CCG

Following up on last year's recommendations?

• We will continue to support the work of the joint West Berkshire Diversity forum with Community United who have been instrumental in allowing us to reach some seldom heard from communities, which have suffered disproportionality through the pandemic

• We continue to play an active role for the Homeless in West Berkshire. We remain committed to our target of zero involuntary Rough Sleeping in West Berkshire and ensuring that the homeless are recognised as a vulnerable group by the NHS

• We will use our voice at key Committees and Boards to deliver feedback from the public to those who commission services with the aim of an improvement in services to all, delivered without exception fairly

"Healthwatch have helped us considerably by sharing the feedback from people who use our services and communicating updates about access to our services with residents and other health, social care and community organisations across West Berkshire at a time when we recognise the importance of people being able to access the information, services and support they need."

Alex Whitfield, CEO, Hampshire Hospital 137

Message from our Chief Officer

This was the toughest of years for us all, but especially those working in and around Health & Social Care, where it was clear that the best of responses, though heroic, hard fought & selfless, were failing and that the many unknowns of Covid-19 were reaping the most terrible of tolls. We reorganised completely to become a useful transmitter of up to date information and a conduit to feedback vital patient stories to the decision makers. While many were supportive, sadly much of the health and care system closed inwards and decided not to listen to the public's views. Others will decide how serious that was as a decision. In the period of this report 253 residents of West Berkshire died with Covid-19



Andrew Sharp, Chief Officer Healthwatch West Berkshire

We worked flat out repurposing our work and concentrating on getting as much information out as we could as things changed daily with the first Covid-19 pandemic wave. Our newsletters changed from monthly to daily, introducing new sections on our website for easy access to groups and conditions affected (eg: LD, Carers, Mental Health, Pregnancy, the isolated, etc.)

HWWB ensured key meetings continued to take place and set up new online meetings with Adult Social Care and the voluntary sector. In addition, we attended weekly briefings with the Berkshire West Clinical Commissioning Group and Royal Berkshire Hospital (RBH). We discussed the patient feedback we received on the challenges faced, from where to reach a service, to how to get a prescription.

Our community's response throughout was marvellous, often stepping in where services wouldn't or couldn't. The *Community Response Hub* was set-up, instantly offering help by joining up with both voluntary sector and impromptu groups. It was the very best of us. Our front-line medics and key workers were too.

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"As Sir Michael Marmot said 'there can be no more important task for those concerned with the health of the population than to reduce health inequalities. Review what can be done to reduce health inequalities and then do it', our key aim is to make sure this happens in West Berkshire" Andrew Sharp, Chief Officer, Healthwatch West Berkshire

HWWB did however find gaps that really worried and unnerved our residents, who fed back to us. Issues from three week waiting lists for emergency blood tests, to the entire Memory Clinic service for dementia diagnosis being suspended, and only re-opening in September 2020. This created even longer waiting times for those in need of answers, with those carers hoping for relief now even more isolated with their loved ones.

Dentistry also stood out as a key failing service, and largely still does. Oral health is seen largely as 'external' to the Health system – and was treated as an afterthought in pandemic service planning. Consequently, many went months in severe pain, while others struggled to access services, they thought they were entitled to. It became almost impossible to find an NHS dentist with a short wait, but waiting times disappeared for those paying privately.

As the first wave abated recovery of services became buzz words. We actively sought the view of the public around many issues and fed this back. Secondary care locally responded well. Even Phlebotomy returned to a near normal service in the New Year, although with major inequalities built in dependent on the continuing issue of surgery on-site testing.

GP's struggled to cope with a backlog of patients, with odd national edicts around access from NHS England, and more access points for patients to deal with (eg: text, email and social media). Face-to-face GP meetings were harder to get, wait times on phone systems increased and public levels of dissatisfaction started to grow. Ultimately, in many cases, GPs were harder to reach. New triage protocols also caused issues, especially for those who are digitally excluded or vulnerable. This highlights the fact that those already marginalised found it ever harder to get help and services struggled to find a way to get to them and be of help. This was all made worse by the sheer exhaustion of key staff, over not one, but three waves of Covid.

It's clear *Health Inequalities*, better termed *Health Inequities* (an inherent unfairness in how two residents are treated for similar conditions) needs far reaching and urgent action. It's good to see the BOB ICS, Berkshire West Integrated Care Partnership (ICP) and the West Berkshire Health and Well Being Board looking at this seriously, with inequalities a key priority and a Joint Health and Well Being Strategy for all to get behind.

As Sir Michael Marmot said: "there can be no more important task for those concerned with the health of the population than to reduce health inequalities. Review what can be done to reduce health inequalities and then do it." Our key aim is to make sure this happens in West Berkshire.

Andrew Sharp, Chief Officer Healthwatch West Berkshire





Volunteer with us:

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Statutory statements

About us

Healthwatch England, 2 Redman Place, Stratford, E20 1JQ. Healthwatch West Berkshire is run by The Advocacy People who are the contract holders. Healthwatch West Berkshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch board consists of 8 lay members who live locally, and work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met 4 times and made decisions on matters such as safely visiting care homes, holding our Thinking Together Event virtually and postponing our End of Life conference until it can be held in a face to face environment risk free.

We ensure wider public involvement in deciding our work priorities. We capture all the feedback we receive and signposting requests to look to see if any themes emerge for future work or investigation. With its estimated only 1 in 100 people complaining about poor service in health and social care just a few reported cases with a similar story alerts our attention. We then check with partners, CQC & discuss at Board meetings held in public.

We also use our public focus group events, such as the Maternity Forum to delve deeper into particular areas and our Champions group of voluntary organisations help provide key background intelligence that feeds into our priorities and work plan. We also work with our colleagues The Advocacy people running Health complaints to identify emerging issues. This combined with our active digital activity via web and social media gives the public many opportunities painfluence our work priorities.

Methods and systems used across the year's work to obtain people's views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, freepost response cards, by email, provided a webform on our website, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by, for example, running jointly Three West Berkshire Diversity Forum conversations around Covid 19 and the vaccination programme. We are key members of the West Berkshire Learning Disability Partnership Board, Carers Strategy Partnership and the West Berkshire Dementia Alliance.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it via all our digital media, send copies to West Berkshire's Public Libraries, all key stakeholders . Parish Councils, Patient Panels, voluntary groups, schools and colleges. Larger print and easy read versions are available on

2020-21 priorities

Project / activity area	Changes made to services
Covid 19 Recovery of services	Phlebotomy services enhanced with more staff recruited & better digital access. Memory Clinics reopened. Equalities vaccination Board established. Digital Exclusion work targeted by CCG.
BAMER (Black, Asian, Ethnic Minorities, Refugee) health inequalities	Ethnically Diverse Communities (EDC)replaces BAMER term in Health & Well Being Board. West Berkshire Diversity Forum established
Maternity Services	Agreement for Hampshire Hospitals to offer services in West Berkshire in conjunction with Berks West CCG. West Berks Maternity Forum created
Children and adolescent mental health services (CAMHS)	Survey run, focus groups help and significant attention raised to areas of concern. Report to follow in June 2021

Responses to recommendations and requests

We had **no** providers who did not respond to requests for information or recommendations, however neither The Secretary of State for Health or The Department of Health and Social Care have responded to our Covid-19 report, when all other bodies have.

This year, due to the COVID-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity.

We reported three key issues to Healthwatch England this year that were: 1. Discriminatory nature of the term BAME & use of EDC instead. 2. Free access to Dental for new mums unable to find an NHS dentist in 12 month period of free dental care during the pandemic 3. NHS Dental Issues around lack of access and failures to provide adequate service for residents during and after the pandemic

Health and Wellbeing Board

Healthwatch West Berkshire is represented on the West Berkshire Health and Wellbeing Board by Andrew Sharp, Chief Officer. During 2020/21 our representative has effectively carried our this role by attending every meeting, many sub groups (Integration Steering Board, Engagement ,Joint Health and Well Being Strategy, Mental Health Action Group, Ageing Well, Substance Abuse, Homeless Strategy Group) and delivering two key reports, Maternity and Covid 19.

thank you

I would again like to take this opportunity to thank our amazing Volunteer Board Members, (Mike Fereday, Lesley Wyman, Martha Vickers, Adrian Barker, Karen Swaffield, Judy McCulloch & Amanda Cunnington, and 'newby' Paul Wilson, our volunteers, our hard working small team (Alice, Michelle & Nathan), the support from our partners on the WB Health and Wellbeing Board Thanks also to our Health & Social Care partners, who are open and transparent & welcome our findings as key in helping improve services. I want to thank Catherine Williams, our Joint Healthwatch BOB ICS Officer who has managed to cope with a challenging year and provided five local Healthwatch with excellent information and representation but who made such a positive impression with everyone she met. To our remarkable voluntary sector, who daily perform miracles, local NHS and Social Care teams, Care Home staff, Domiciliary Carers and the thousands of 'unpaid' carers who were especially challenged during the Covid-19 pandemic. Big thanks to The Advocacy People team for unflinching support.

Finally, thanks also to the retiring Chair of The West Berkshire Health and Well Being Board, Dr Bal Bahia, who has been involved since the start and remains a working GP in West Berks and one of the most inspiring medics we have met!



Online Board meeting



Matthew Hilton CEO, The Advocacy People



The Advocacy People are delighted that we are continuing our work to facilitate the delivery of Healthwatch services in West Berkshire. We see HWWB as a key piece of our overall mission to deliver excellent services to clients across our patch. The roles of advocacy organisations and Healthwatch have much in common - we believe we can deliver more effective and efficient services in addressing many of our challenges from a consistent perspective.

We have worked with local providers and with HWWB with the aim of getting rough sleepers into more settled lives, with GP registration, benefits and dental support. This was successful with HWWB supporting the advocacy work we undertook locally. We also work closely around emerging Health Complaint themes.

As we - hopefully –start to emerge from the challenges of the COVID pandemic, we can look back on a year of maintaining service delivery through what have been trying circumstances for all; and look forward to a constructive and productive future supageting 2 he people of West Berkshire.





Covid-19 First Wave Survey & Post First Wave findings in West Berkshire

Feedback & Recommendations

healthwatch West Berkshire

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Agenda Item 17

Public Protection Partnership Bracknell Forest West Berkshire Wokingham

07 July 2021

Public Protection Partnership West Berkshire Council Council Offices Market Street Newbury Berkshire RG14 5LD

Tel: 01635 519045 E-mail: moira.fraser@westberks.gov.uk

Our ref: BFCSOGP2021

Dear Sirs,

Gambling Act 2005 - Formal consultation on West Berkshire Council's Draft Statement of Principles

As required by the Gambling Act 2005, this Council in its capacity as the Licensing Authority has to formulate a new Statement of Principles at least every 3 years. The last Statement of Principles was produced and became effective from January 2019. This policy needs to be reviewed by the end of January 2022. The <u>new Draft Statement of Policies</u> incorporates a number of minor changes when compared to the previous iteration of the report. A section on small society lotteries has been added and the policy has been amended to make it compliant with the current legislation and regulations as well as making it consistent with the very recent updates to the guidance to licensing authorities published by the Gambling Commission. The opportunity has also been taken to provide some additional information in order to assist anyone reading the policies to understand the various sections to ensure that the policy is both up-to-date and informative.

In carrying out this function this Licensing Authority is required to formally consult with Responsible Authorities under the Act, and other bodies and organisations who will or may have an interest, prior to agreeing the new Gambling Statement of Principles. Your comments and observations are therefore sought and will be considered before finalising and publishing the new Statement of Principles. More information on the consultation can be found <u>here</u>

The consultation period on the draft Statement of Principles commenced on Monday 05 July and ends on 27 September 2021. Your response or observations, in writing, should

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Public Protection Partnership Bracknell Forest West Berkshire Wokingham

reach this Licensing Authority by no later than 23:59 on 29 September 2021. Should you wish to comment on the statement you could do so by:

- 1. Sending a letter with your comments to Moira Fraser, Licensing Team, Public Protection Partnership, Theale Library, Church Street, Theale, Berkshire, RG7 5BZ
- 2. Sending an e-mail to Licensing@westberks.gov.uk

We look forward to receiving your responses and observations

Yours faithfully, Moira Fraser Policy and Governance Officer Public Protection Partnership

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Agenda Item 18

Health and Wellbeing Board – 22 July 2021

Item 18 – Member Question(s)

Verbal Item

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Agenda Item 19

Health and Wellbeing Board – 22 July 2021

Item 19 – Future Meeting Dates

Verbal Item

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