

Notice of Meeting



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Health and Wellbeing Board

Thursday 4 October 2018 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, 26 September 2018

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Jo Reeves / Jessica Bailiss on (01635) 519486/503124

e-mail: joanna.reeves@westberks.gov.uk / jessica.bailiss@westberks.gov.uk

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



Agenda - Health and Wellbeing Board to be held on Thursday, 4 October 2018 (continued)

To: Councillor Rick Jones (Executive Portfolio: Health and Wellbeing, Leisure and Culture), Tessa Lindfield (Strategic Director for Public Health), Ann-Marie Dunbar (FM Contract Manager, Vodafone), Dr Bal Bahia (Berkshire West CCG), Councillor Graham Jones (Leader of the Council), Councillor Lynne Doherty (Executive Portfolio: Children, Education & Young People), Councillor Graham Bridgman (Executive Portfolio: Adult Social Care), Councillor Marcus Franks (Executive Portfolio: Community Resilience & Partnerships), Cathy Winfield (Berkshire West CCG), Dr Barbara Barrie (Berkshire West CCG), Superintendent Jim Weems (Thames Valley Police), Ian Mundy (Locality Director, BHFT), Mary Sherry (Chief Operating Officer, Royal Berkshire Hospital), Councillor Mollie Lock (Shadow Executive Portfolio: Education and Young People, Adult Social Care), Neil Carter (Group Manager - RBFERS), Luke Bingham (Divisional Director - Sovereign Housing), Garry Poulson (Volunteer Centre West Berkshire), Andrew Sharp (Healthwatch) and Darrell Gale (Interim Strategic Director of Public Health)

Also to: Jo Reeves (Principal Policy Officer)

Agenda

Part I

Page No.

- | | | |
|---|--|---------|
| 1 | Election of the Chairman for the remainder of the 2018/19 Municipal Year
Purpose: To elect a Chairman for the remainder of the 2018/19 Municipal Year. | |
| 2 | Apologies for Absence
To receive apologies for inability to attend the meeting (if any). | |
| 3 | Minutes
To approve as a correct record the Minutes of the meeting of the Board held on 18 May 2018. | 5 - 12 |
| 4 | Health and Wellbeing Board Forward Plan
An opportunity for Board Members to suggest items to go on to the Forward Plan. | 13 - 14 |
| 5 | Actions arising from previous meeting(s)
To consider outstanding actions from previous meeting(s). | 15 - 16 |



Agenda - Health and Wellbeing Board to be held on Thursday, 4 October 2018 (continued)

- 6 **Declarations of Interest**
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' [Code of Conduct](#).
- 7 **Public Questions**
Members of the Executive to answer questions submitted by members of the public 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.)
- 8 **Petitions**
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.

Items for discussion

Programme Management

- 9 **Delivering the Health and Wellbeing Strategy 2018/19 Quarter One (Jo Reeves)** 17 - 34
To review the progress made by the Health and Wellbeing Board's sub-groups to deliver the Health and Wellbeing Strategy.
- 10 **Update on Priority Two (Employment for Vulnerable People) for 2018/19 (Fadia Clarke)** 35 - 38
To receive an update of progress made regarding Priority Two (Employment for Vulnerable People) for 2018/19.

Strategic Matters

- 11 **Homelessness Strategy Group Winter Plan for 2018/19 (Sam Headland)** 39 - 46
To respond to the Board's request for the Homelessness Strategy Group to produce a Winter Plan.
- 12 **West Berkshire 2036** 47 - 80
To note the Health and Wellbeing Board's West Berkshire Vision 2036, which has been published for consultation.



Other Information not for discussion

Please note that items 13 and 14 are available in a separate electronic-only pack.

- 13 **Berkshire Seasonal Influenza Campaign 2017-18 (Matt Pearce)**
For the Board to review the take up of seasonal 'Flu vaccines in 2017/18
- 14 **SEND Strategy (Jane Seymour/ Nina Bhakri)**
To present the final version of the SEND Strategy for the Board's information.
- 15 **Members' Question(s)**
Members of the Executive 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.)*
- 16 **Future meeting dates**
Health and Wellbeing Problem Solving Session (closed) – 18 October 2018
Health and Wellbeing Development Session (closed) – 22 November 2018
Health and Wellbeing Board – 24 January 2018

Andy Day
Head of Strategic Support

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



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 FRIDAY, 18 MAY 2018

Present: Councillor Dominic Boeck (Executive Portfolio: Health and Wellbeing, Leisure and Culture), Dr Bal Bahia (Berkshire West CCG), Councillor Graham Bridgman (Executive Portfolio: Adult Social Care), Ian Mundy (Locality Director, BHFT), Councillor Mollie Lock (Shadow Executive Portfolio: Education and Young People, Adult Social Care), Garry Poulson (Volunteer Centre West Berkshire), Andrew Sharp (Healthwatch) and Councillor Marigold Jaques (Council Member)

Also Present: Jo Reeves (Principal Policy Officer), Councillor Quentin Webb (Council Member), Matthew Braovac (MHAG Independent Chair), Richard Benyon, Sue Brain (Service Manager, Safeguarding Adults) and Councillor James Fredrickson (Executive Portfolio: Economic Development and Communications) and James Lewis (Locality Manager, Adult Social Care)

Apologies for inability to attend the meeting: Councillor Graham Jones, Councillor Lynne Doherty, Councillor Marcus Franks, Cathy Winfield, Superintendent Jim Weems, Mary Sherry, Neil Carter, Luke Bingham and Darrell Gale

Absent: Dr Barbara Barrie

PART I

1 Election of the Chairman and Appointment of the Vice-Chairman for the 2018/19 Municipal Year

Dr Bal Bahia opened the meeting and thanked Councillor James Fredrickson for his year as Chairman.

Councillor Fredrickson advised that he would now be Portfolio Holder for Economic Development. He stated that he had had an amazing time as Chairman of the Health and Wellbeing Board in 2017/18 and had met some incredible people. Community conversations had given him a different view on working with the public. The Mental Health Action Group had now been established which was a group of fantastic individuals who would be driving forward some important work. Councillor Fredrickson concluded that it had been his privilege to claim responsibility for the hard work of others, many of whom were supporting the Health and Wellbeing Board's agenda on top of their day jobs.

RESOLVED that Councillor Dominic Boeck be elected Chairman for the 2018/19 Municipal Year.

RESOLVED that Dr Bal Bahia be appointed Vice-Chairman for the 2018/19 Municipal Year.

Councillor Dominic Boeck thanked the Health and Wellbeing Board for electing him to be the Chairman. He welcomed Richard Benyon MP to the meeting and proposed suspending the Rules of Procedure in order to permit him to address the Board. This was seconded by Councillor Graham Bridgman and approved by the Board.

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Richard Benyon MP stated that he wanted to take a moment to look back on the previous year as the Brighter Berkshire campaign had made 2017 the year of mental health. He was in awe of what had been achieved to reduce the stigma around mental health. Mental health was an important and neglected area of healthcare and Richard Benyon MP stated that he hoped that the Health and Wellbeing Board could build on the success of the campaign.

Richard Benyon MP continued that it had been his privilege to attend the Emotional Health Academy and see early intervention in action. He was delighted that other areas were looking to introduce similar schemes.

Noting that there was an item on homelessness on the meeting's agenda, Richard Benyon MP highlighted that a number of organisations had been working together with a noble ambition to end rough sleeping. He recognised that homelessness was not limited to rough sleeping, however rough sleeping was the most visible form of homelessness and shaming to society. While for some people rough sleeping might be a choice, for the vast majority of people it was not. Richard Benyon MP hoped the Health and Wellbeing Board could lead on ensuring there was a coordinated approach.

Councillor Boeck proposed reinstating the Rules of Procedure. This was seconded by Councillor Graham Bridgman and approved by the Board.

2 Minutes

The Minutes of the meeting held on 21 January 2018 were approved as a true and correct record and signed by the Chairman.

3 Health and Wellbeing Board Forward Plan

The Forward Plan was noted.

4 Actions arising from previous meeting(s)

The list of actions arising from previous meetings was noted.

5 Declarations of Interest

Dr Bal Bahia declared an interest in all matters pertaining to Primary Care, by virtue of the fact that he was a General Practitioner, but reported that as his interest was personal and not a disclosable pecuniary or other registrable interest, he determined to remain to take part in the debate and vote on the matters where appropriate.

Andrew Sharp declared an interest in any items that might refer to South Central Ambulance Service due to the fact that he was the Chair of Trustees of the West Berks Rapid Response Cars (WBRRRC), a local charity that supplied blue light cars for ambulance drivers to use in their spare time to help SCAS respond with 999 calls in West Berkshire, and reported that, as his interest was personal and not a disclosable pecuniary or other registrable interest, he determined to remain to take part in the debate and vote on the matters where appropriate.

6 Public Questions

a Question submitted by Mr Steve Masters to the Chairman of the Health and Wellbeing Board

A question standing in the name of Mr Steve Masters on the subject of which of the recommendations in the Healthwatch Homelessness report the Board would be adopting was answered by the Executive Member for Health and Wellbeing, Culture and Leisure.

7 Petitions

There were no petitions presented to the Board.

8 Priority for 2018/19: Promote Positive Mental Health and Wellbeing for Adults

The Board received a presentation (Agenda Item 9) regarding an update from the Mental Health Action Group (MHAG) on work undertaken to support the Board's priority for 2018/19 to 'promote positive mental health and wellbeing for adults'.

Matthew Braovac introduced himself as the independent chair of the MHAG and advised that he had joined the group in February 2018. He noted that the MHAG had reported four key workstreams at their last presentation in November 2018 and would provide an update on each.

Community Navigation and Peer Support.

The MHAG had stated that they would 'celebrate, promote and connect existing resources especially those who provide Community Navigation and Peer Support.' The MHAG had influenced the specification for the Village Agent scheme, now known as Village Agent Community Navigators; the service would now be more focussed on social isolation and loneliness. Anyone over 18 would now be eligible to access their support when previously anyone referred would need to be over 55.

Berkshire West Your Way had been commissioned by the CCG and would expand into West Berkshire from Reading from the 1st June 2018. MHAG had provided practical support regarding venues, contacts, facilities and existing partners.

Digital Community Resource Directory.

The MHAG had been working with colleagues in Adult Social Care to shape the upgrade of the Social Care Information Point (SCiP) to ensure that information was accessible to those with mental health concerns.

The Emotional Wellbeing West Berkshire website was also being revamped and would be connected with SCiP. Service users would be trained to run the website as a self-support tool.

While the overall digital offer for health and wellbeing services was being considered by another group, the MHAG felt it was important to expedite these processes in order to ensure the availability of information.

Co-produced review into patients' experience of crisis.

Previous Thinking Together events had raised the issue of crisis. A further event was held on 22 March 2018 which sought to understand concerns better. It had been interesting that professionals and service users often defined crisis differently. Service users sought more empathy in dealing with professional services but also recognised the pressure that front line workers were under and thought that they should be supported better.

Preventable deaths of people with serious mental illness.

Matt Pearce, Head of Public Health and Wellbeing, noted that the MHAG had identified that West Berkshire may be an outlier in the number of preventable deaths from physical health conditions of people with serious mental illness (SMI). Nationally, people with SMI died 10-25 years earlier than their counterparts. Dr Angus Tallini had conducted an audit into 38 patient records and identified that 22% of premature deaths were due to cancers not amenable to screening. Alcohol was a direct or indirect factor in 28% of deaths. This

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was contrary to national literature which suggested that cardiovascular causes were the main factor in preventable deaths of people with SMI.

The audit recommendations included maintaining a focus on reducing alcohol related harm, smoking cessation (as 80% of people with SMI smoked) and better targeting of Healthchecks and lifestyle interventions.

Matthew Braovac outlined that the MHAG's next steps were:

- Reviewing existing 'community connector' activity and providing 'on the ground' input for Berkshire West Your Way.
- Contributing to wider digital community resource plans.
- Developing an action plan to support individuals with SMI.
- Providing recommendations to the HWBB Strategy.
- Working with the Skills and Enterprise Partnership to improve workplace access for vulnerable people.

Councillor Mollie Lock stated she would like the group to ensure there was early intervention services for children under the age of 18. Matthew Braovac advised that the MHAG's remit was regarding adults. Matt Pearce advised that no work to support children would be stopping and the group needed to focus their attention. Councillor Marigold Jacques drew attention to the Emotional Health Academy and the 'Little Ray of Sunshine' booklet produced by the CCG.

Councillor Graham Bridgman asked whether the causes of early death found in the SMI audit were the same as the majority of the population and people with SMI were more likely to die earlier. He also asked to what extent cancers experienced by people with SMI were preventable if they were not amenable to screening. Matt Pearce responded that cancer was the biggest cause of death in those aged under 65. The cause of early death in people with SMI was expected to be cardiovascular but this was not found in the audit. He also explained that cancers not amenable to screening could still be prevented by a number of lifestyle factors.

Andrew Sharp noted that mental health was such a broad area the MHAG had needed to focus its work and the Children's Delivery Group which reported to the Board oversaw the children's element of mental health. As a former co-chair of the MHAG he wished to reflect that a key thing to ensuring the group had pace was membership and members sending deputies if they were unable to attend meetings. He stated that as care for mental health was increasingly provided in and by the community, there needed to be confidence that the voluntary and community sector was able to deliver that support. Regarding crisis, Andrew Sharp noted that for physical health crises a patient could expect a team of people to support them at Accident and Emergency; for a mental health crisis a patient might find a flashing answerphone.

Dr Bahia noted that at the Health and Wellbeing Steering Group, the chairs of the Board's sub-groups came together and shared information on cross-cutting themes.

RESOLVED that the report and presentation be noted.

9 Dementia Enabling Environment Project in Adult Social Care

The Board received a presentation (Agenda Item 12) from Sue Brain and James Lewis regarding the dementia enabling environments project in adult social care.

The project had been initiated following a presentation by Dementia Design Specialist Architects to the Health and Wellbeing Steering Group in 2017. It was recognised that there was an opportunity to make improvements to Birchwood Care Home following an

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assessment that it was not a dementia friendly environment. There was also an opportunity to help people with dementia to stay at home for longer.

The outputs for the project had been difficult to define but it was noted that in Birchwood a reduction in challenging behaviour would be a good outcome in addition to an improved Care Quality Commission rating. In the community the desired output was a reduction in falls and an improved quality of life.

A full audit was undertaken of Birchwood care home which was grounded in evidence on dementia enabling environments. Recommendations were made which took into account the sensory and cognitive impairments experienced by residents with dementia. For example a threshold strip in a different colour to the floor could pose a trip hazard as the resident might assume there was a hole or a step. There were also opportunities to improve signage to be clear but un-patronising. There might also be scope to apply the principles in town centres.

Renovation of Birchwood had now commenced including remodelling each floor into smaller units. Doors would be improved to give better access to the garden which over 90 employees from Vodafone had volunteered to renovate. It would be an expensive project and not possible to meet every recommendation in one go but the recommendations could be applied across the Council's other care homes and ensure that Birchwood was a better place for residents to spend their final years.

It was also intended to develop an audit tool for residents and carers to use in their own home. James Lewis reported that he was due to meet with the Chief Executive and the Highways Team regarding embedding some of the dementia environment principles into the Market Street redevelopment. Hillcroft House, the site of the Memory Clinic, would also undergo refurbishment in accordance with dementia enabling principles.

Sue Brain concluded that the project was still in early stages. DDS architects had been helpful and flexible throughout the process. Ongoing senior management commitment would be essential to ensure the continuation of the project.

Councillor Boeck asked for more information regarding the reorganisation of accommodation, noting that there were 60 residents in Birchwood. Sue Brain advised that accommodation was over three floors including 10 step-down beds on the ground floor. Calm spaces would be created, as it was recognised that the 60 residents had not chosen to live together and it was important to offer more quiet spaces than just bedrooms.

Garry Poulson enquired after the lighting, noting from his work with the Ageing Well Partnership that there was a link between no lighting and falls. Sue Brain advised that the Council did not own the building and the owner had reinstalled lighting without consulting the Council. The work with DDA had raised awareness of the importance of natural light cycles.

Andrew Sharp noted that carers should be furnished with the information.

RESOLD that the report and presentation be noted.

10 Alcohol Harm Reduction Partnership - Final Report for 2017/18

The Board considered the final report from the Alcohol Harm Reduction Partnership (Agenda Item 10).

Jo Reeves reported that three projects had been initiated as a result of the Board choosing 'reducing alcohol related harm for all age-groups' as been a priority for the Board in 2017/18. A Young People's Substance Misuse Strategy had been appended to the report as appendix C and the Alcohol Harm Reduction Partnership would be

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expanding their remit to become the Substance Misuse Harm Reduction Partnership. Jo Reeves thanked the Board for the attention they had given to alcohol related harm as a lot of work had been undertaken which otherwise might not.

RESOLVED that the report be noted.

11 Homeless and Rough Sleepers Report 2018

The Board considered the Healthwatch Homeless and Rough Sleepers Report 2018 (Agenda Item 11).

Andrew Sharp, in presenting the report, thanked Nick Carter, Dr Bahia and Councillor Fredrickson for insisting that the report was discussed by the Board. The report presented the experiences of 14 rough sleepers who had been interviewed by Healthwatch and was not a complete picture of homelessness in West Berkshire. The average life expectancy of a rough sleeper was 47 years which was a significant health inequality.

Healthwatch had received complaints that primary care services were difficult to access for homeless people and even where they were accessible, homeless people often did not choose to use them due to a lack of self esteem or embarrassment about being unwashed.

Andrew Sharp welcomed the proposal to invite the Homelessness Forum to become a sub-group of the Board and stated that he hoped the Board applied the same rigour to them as they had to other groups. He concluded by requesting that the Health and Wellbeing Board agreed to a target to end rough sleeping by 2020 and not 2027 as per the government's target.

Jo Reeves outlined that the Health and Wellbeing Steering Group had discussed the report and made recommendations as outlined in section 2 of the report at page 45 of the agenda.

A/Supt Lindsey Finch advised that she had attended a recent meeting of the Homelessness Forum which brought together voluntary and statutory agencies. The Forum had been working on an operational basis and needed to become more strategic, with task and finish groups to complete any practical work. Councillor Boeck asked how the group would transition. A/Supt Finch advised that at present the Forum was chaired by the manager of a commissioned provider and would need to discuss whether they would like to maintain those chairing arrangements with a move to a more strategic way of working.

Dr Bahia expressed the view that the report had shed light on an important subject and it would help to have the Homelessness Forum involved. Dr Bahia reported that he had visited the night shelter set up over the winter and a long term view was needed. The health sector had not previously been represented at the Homelessness Forum and he would like to see the membership expand to include different parties. He hoped that the Forum would respond adequately.

Andrew Sharp again raised the matter of a zero target for homelessness and highlighted that West Berkshire did not enjoy services such as street outreach such as the services operating in Reading and Bracknell. Councillor Boeck recognised that 2027 was a long time away and stated that he would be uncomfortable in agreeing a zero target before the Homelessness Forum had recommended ways in which to achieve such a target. Councillor Jaques noted that the issue might not be that West Berkshire had fallen behind but that the overall scale of the problem had increased.

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Andrew Sharp recognised that there were national forces at play but there needed to be a local discussion regarding what could be done to prevent any lives being lost through homelessness.

The Board discussed the chairing arrangements for the Forum and concluded that the Forum should take a view, sensitive to conflicts of interest that may arise for a commissioned provider in the chair. One board member suggested a co-chairing arrangement.

RESOLVED that:

1. The Board invites the Homelessness Forum to become a sub-group.
2. The Chair of the Homelessness Forum to join the Health and Wellbeing Steering Group.
3. The Homelessness Forum should be requested to revise its name, terms of reference, membership and governance in order to operate as a strategic group.
4. The Homelessness Forum should review the data and recommendations presented by Healthwatch regarding rough sleeping in West Berkshire.
5. The Homelessness Forum should develop a long term strategy and action plan on behalf of the Health and Wellbeing Board to respond to homelessness and rough sleeping in West Berkshire. This should include 'quick wins' and a winter plan for 2018/19.

12 Members' Question(s)

No questions were submitted by Members.

13 Future meeting dates

Health and Wellbeing Problem Solving Session – 28 June 2018

Health and Wellbeing Development Session – 5 July 2018

Health and Wellbeing Board – 4 October 2018

(The meeting commenced at 10.00 am and closed at 11.42 am)

CHAIRMAN

Date of Signature

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Health and Wellbeing Board Forward Plan 2018/19 (All meetings start at 9.30am in the Council Chamber except where otherwise stated)

Item	Purpose	Action required by the H&WB	Deadline date for reports	Lead Officer/s	Those consulted	Is the item Part I or Part II?
18th October 2018- Health and Wellbeing Problem Solving Session: Ageing Well Partnership/ Suicide Prevention Action Group (Shaw House)						
22nd November 2018 Development Session						
System Resilience conversation	For members of the Board to share good news and challenges facing their organisations.	For discussion	13th November 2018	All	n/a	
Delivering the Health and Wellbeing Strategy 2018/19 Q2	To provide the performance dashboard for the delivery of the health and wellbeing strategy and highlight any emerging issues.	For information and discussion	13th November 2018	Jo Reeves	Health and Wellbeing Steering Group	
Health and Wellbeing Strategy 2020	For the Board to agree a process for the development of the new Health and Wellbeing Strategy.	For information and discussion	13th November 2018	Matt Pearce	Health and Wellbeing Steering Group	
Update on Priority One (Mental Health) for 2018/19	To receive an update of progress made regarding Priority One (Mental Health) for 2018/19.	For information and discussion	13th November 2018	Matthew Braovac	Health and Wellbeing Steering Group	
Update on Priority Two (Employment for Vulnerable People) for 2018/19	To receive an update of progress made regarding Priority Two (Employment for Vulnerable People) for 2018/19.	For information and discussion	13th November 2018	Fadia Clarke	Health and Wellbeing Steering Group	
LGA DTOC Review	For the Board to receive a report to outline the review undertaken by the LGA into delayed transfers of care (DTOC) including the recommended actions and progress to implement changes so far	For information and discussion	13th November 2018	Jo Reeves	Health and Wellbeing Steering Group	
22nd January 2019 - Board meeting						
Programme Management						
Update on Priority One (Mental Health) for 2018/19	To receive an update of progress made regarding Priority One (Mental Health) for 2018/19.	For information and discussion	15th January 2019	Matthew Braovac	Health and Wellbeing Steering Group	Part I
Update on Priority Two (Employment for Vulnerable People) for 2018/19	To receive an update of progress made regarding Priority Two (Employment for Vulnerable People) for 2018/19.	For information and discussion	15th January 2019	Fadia Clarke	Health and Wellbeing Steering Group	Part I
Strategic Matters						
West Berkshire Vision 2036	For the Board to approve the final version of the Vision 2036 and agree an implementation plan.	For decision	15th January 2019	Gabrielle Mancini/ Nick Carter	Health and Wellbeing Steering Group	Part I
Items for Information						
2017/18 Annual West of Berkshire Safeguarding Adults Annual Report	For the Board to receive the Annual Report from the West of Berkshire Safeguarding Adults Board.	For information	15th January 2019	Alex Waters	Health and Wellbeing Steering Group	Part I
21st February 2019- Health and Wellbeing Problem Solving Session: WB Locality Integration Board/ ? (Council Chamber)						
28 March 2019 Development Session						
System Resilience conversation	For members of the Board to share good news and challenges facing their organisations.	For discussion	19th March 2019	All	n/a	n/a
Educational Attainment of Children from Vulnerable Families	For the Children's Delivery Group to present the latest educational attainment figures and to inform the Board of partnership work to improve children's educational attainment.	For information and discussion	19th March 2019	Ian Pearson/ Tessa Ford	Health and Wellbeing Steering Group	
Delivering the Health and Wellbeing Strategy	To provide the performance dashboard for the delivery of the health and wellbeing strategy and highlight any emerging issues.	For information and discussion	19th March 2019	Jo Reeves	Health and Wellbeing Steering Group	
Update on Priority One (Mental Health) for 2018/19	To receive an update of progress made regarding Priority One (Mental Health) for 2018/19.	For information and discussion	19th March 2019	Matthew Braovac	Health and Wellbeing Steering Group	
Update on Priority Two (Employment for Vulnerable People) for 2018/19	To receive an update of progress made regarding Priority Two (Employment for Vulnerable People) for 2018/19.	For information and discussion	19th March 2019	Fadia Clarke	Health and Wellbeing Steering Group	

30 May 2019 - Board meeting**Programme Management**

Update on Priority One (Mental Health) for 2018/19	To receive an update of progress made regarding Priority One (Mental Health) for 2018/19.	For information and discussion	21st May 2018	Matthew Braovac	Health and Wellbeing Steering Group	Part I
Update on Priority Two (Employment for Vulnerable People) for 2018/19	To receive an update of progress made regarding Priority Two (Employment for Vulnerable People) for 2018/19.	For information and discussion	21st May 2018	Fadia Clarke	Health and Wellbeing Steering Group	
Delivering the Health and Wellbeing Strategy Q4	To provide the performance dashboard for the delivery of the health and wellbeing strategy and highlight any emerging issues.	For information and discussion	21st May 2018	Jo Reeves	Health and Wellbeing Steering Group	Part I
Strategic Matters						
<i>No items at present.</i>						

Actions arising from Previous Meetings of the Health and Wellbeing Board

RefNo	Meeting	Action	Action Lead	Agency	Agenda item	Comment
109	29/03/18 (Development Session)	work with the Mental Health Action Group to identify reportable actions and measures.	Matt Pearce	WBC/ CCG/ HWWB	Delivering the Health and Wellbeing Strategy Q3	Work is being undertaken to develop project briefs for each of the MHAG's key themes.
110	05/07/18 (Development Session)	Ian Mundy to join the Mental Health Action Group	n/a	BHFT	Actions arising from previous meetings	Completed.
111	05/07/18 (Development Session)	Circulate link to Bicester Healthy New Town information	Shairoz Claridge	CCG	Annual Report from the DPH	Completed.
112	05/07/18 (Development Session)	Circulate link to DPH report	Jo Reeves	WBC	Annual Report from the DPH	Completed.
113	05/07/18 (Development Session)	Respond to SEND Strategy consultation	All HWBB members	HWBB	SEND Strategy	Completed.
114	05/07/18 (Development Session)	SENd Strategy to return to a future HWBB meeting	Jo Reeves	WBC	SEND Strategy	On the forward plan for 4 October
115	05/07/18 (Development Session)	Include criteria that funding should be used to promote service user involvement.	Jo Reeves	WBC	HWBB Priority Fund	Completed.
116	05/07/18 (Development Session)	Share the Berkshire West DTOC review with HWBB members	Jo Reeves	WBC	Delivering the Health and Wellbeing Strategy Q4	On the forward plan for November

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Delivering the Health and Wellbeing Strategy - Quarter One 2018/19 - Summary Report

Committee considering report: Health and Wellbeing Board

Date of Committee: 4 October 2018

Portfolio Member: Councillor Rick Jones

Report Author: Jo Reeves

Forward Plan Ref: n/a

1. Purpose of the Report

1.1 The purpose of this report is to review the progress made by the Health and Wellbeing Board's sub-groups to deliver the Health and Wellbeing Strategy.

2. Recommendation

2.1 The Health and Wellbeing Board note the progress made to deliver the Health and Wellbeing Strategy in Quarter One of 2018/19 and identify any matters of which they would like to receive more information.

Will the recommendation require the matter to be referred to the Executive for final determination?

Yes:

No:

3. Implications

3.1 **Financial:** Activities associated with delivering the Health and Wellbeing Strategy are met from existing budgets.

3.2 **Policy:** There are no policy implications arising from this report.

3.3 **Personnel:** There are no personnel implications arising from this report.

3.4 **Legal:** There are no legal implications arising from this report.

3.5 **Risk Management:** There are no risk management implications arising from this report.

3.6 **Property:** There are no property implications arising from this report.

3.7 **Other:** There are no other implications arising from this report.

4. Other options considered

4.1 N/A

Executive Summary

5. Introduction / Background

- 5.1 The [West Berkshire Joint Health and Wellbeing Strategy 2017-2020](#) was adopted by the Health and Wellbeing Board in November 2016.
- 5.2 The Board's sub-groups have developed delivery plans to monitor implementation of the Strategy. These delivery plans outline the activities of each sub-group and includes the measures that they will monitor to ensure their work is having an impact. These combined delivery plan is attached as Appendix B.
- 5.3 The Board will receive detailed reports at each of its meetings regarding the activities around its priorities for 2018/19.

6. Proposal

- 6.1 The Board should particularly note the following from the Delivery Plan:
 - (1) The Mental Health Action Group has not yet completed their Delivery Plan and may require support from the Health and Wellbeing Board to generate more pace.
 - (2) Skills and Enterprise Partnership have set three actions as part of their Delivery Plan. The SEP is at the stage of agreeing sub-leads on each of the action and reviewing the SEP membership.
 - (3) The Education and Public Health Services, which provide data for a number of measures on the Delivery Plan, have not completed their return for quarter one. As a result there are gaps across a number of areas of the HWBB Delivery Plan, these are highlighted yellow.
 - (4) Measures associated with the delivery of the Homelessness Strategy Group's Winter Plan and Strategy will be added once they have been developed.
 - (5) Performance relating to Delayed Transfers of Care is now showing as 'green' which is a significant improvement and should be celebrated.

7. Conclusion

- 7.1 The Health and Wellbeing Board are invited to consider the progress made to implement the Health and Wellbeing Strategy as outlined in the supporting information and the Delivery Plan.
- 7.2 The Health and Wellbeing Steering Group should identify any matters that warrant further discussion and invite chairs of the Board's sub-groups to run Problem Solving Sessions in order to resolve any issues identified.

8. Appendices

- 8.1 Appendix A – Supporting Information
- 8.2 Appendix B – Health and Wellbeing Delivery Plan 2018/19

Delivering the Health and Wellbeing Strategy - Quarter One 2018/19 – Supporting Information

1. Introduction/Background

- 1.1 The [West Berkshire Joint Health and Wellbeing Strategy 2017-2020](#) was approved by the Health and Wellbeing Board (the Board) on 24 November 2016 and adopted by the Council on 2 March 2017.
- 1.2 The Strategy set out that the Board would choose two priorities for each year. For 2018 these are:
- (1) Support mental health and wellbeing of adults
 - (2) Improve access to employment, education, training and volunteering for vulnerable people.
- 1.3 The Strategy sets out five strategic aims that the Board is working towards. Under each aim, three to five objectives specify what the Board wants to do to achieve its aims. Two objectives have been chosen as the Board's priorities for 2018/19 (above). The Health and Wellbeing Board wants to achieve measurable progress against these aims by the end of the period covered by the Strategy (2020). The aims are:
- (1) Give every child the best start in life
 - (2) Support mental health and wellbeing throughout life
 - (3) Reduce premature mortality by helping everyone live healthier lives
 - (4) Build a thriving and sustainable environment in which communities can flourish
 - (5) Help older people maintain a healthy, independent life for as long as possible
- 1.4 When the Strategy was written, the author intended that the full list of objectives would encapsulate the aspects of health and wellbeing which had been identified as significant issues following analysis of the Joint Strategic Needs Assessment. The author also intended that the Health and Wellbeing Board would choose annually a small number of objectives to be its priorities for the forthcoming year.
- 1.5 The purpose of this report is to provide an update on the progress made at quarter one of 2018/19.

2. Priority for 2018/19: Support mental health and wellbeing for adults

- 2.1 Supporting mental health and wellbeing for adults has been chosen as a priority for 2018/19. It became clear in 2017/18 that there was a lack of clarity regarding

activity being undertaken locally to support residents' mental health. As a result, the Mental Health Action Group (MHAG) was established.

2.2 The MHAG gave a presentation to the Board on 18 May 2018 to outline the four themes of their work programme:

- (1) Celebrate, promote and connect existing resources especially those who provide Community Navigation and Peer Support.
- (2) Explore the introduction of a digital community resource directory for prevention, recovery and self-care
- (3) Investigate preventable deaths from physical health conditions of people with serious mental illness
- (4) Work with users and BHFT to co-produce improvements to patients experience when in crisis

2.3 In quarter one, the MHAG received the results of an audit into preventable deaths of people with serious mental illness. The audit found that the top three causes of deaths were cancer, suicide and stroke. Alcohol was a factor in 28% of the cases reviewed. Recommendations were made regarding physical health screening and an action plan is being developed.

2.4 The MHAG also received the final report from the Thinking Together for Mental Health event held on 22 March 2018. The report found a separation between professionals' and service users' interpretation of what a 'crisis' was. There was also a difference between the feedback received at the event and the results of a satisfaction survey undertaken of patients known to the Crisis Resolution and Home Treatment Team. A number of recommendations were made and a project plan is being developed to outline a structured review of crisis services.

3. Priority for 2018/19: Improve access to employment, education, training and volunteering for vulnerable people.

3.1 The Board chose the above priority at the Annual Conference held in April 2018 which is being led by the Skills and Enterprise Partnership (SEP). The SEP has continued to meet since the Local Strategic Partnership was disbanded in 2014 largely as an information sharing network. The new Chair, Fadia Clarke, has worked over quarter one to reformulate the group's governance framework and achieve stakeholder buy-in to support the SEP's new focus.

3.2 The SEP has determined that its role will be to support local employers to create work environments that are accessible and supportive to all people, including vulnerable people.

3.3 An action plan is in development and included in a separate item on the Board's agenda.

4. Strategic Aim: Give Every Child the Best Start in Life

4.1 The aim to give every child the best start in life carries the following objectives:

- (1) Decrease the educational attainment gap between children on free school meals and the rest

- (2) Reduce childhood obesity
- (3) Improve educational and health outcomes for Looked After Children
- (4) Support the health and wellbeing of young carers

4.2 The Children's Delivery Group is focusing its activity on objectives (1), (3) and (4) above. The Board have previously suggested that partnership work on childhood obesity, objective (2), should be undertaken by the Children's Delivery Group, although the Council's Public Health team have the operational duty.

4.3 Pete Campbell, the new Chair of the Children's Delivery Group and Head of Children and Family Services, came into post in April 2018 and held his first meeting in May 2018. Three workstreams around prevention, educational attainment and self-harm will commence in 2018/19 with further reportable actions and measures to be identified.

4.4 The action plan to deliver the new SEND Strategy will also be reported to the Health and Wellbeing Board through the Children's Delivery Group.

5. Strategic Aim: Support mental health and wellbeing throughout life

5.1 The aim to support mental health and wellbeing throughout life carries the following objectives:

- (1) Promote the emotional health and wellbeing of children
- (2) Promote positive mental health and wellbeing for adults
- (3) Prevent suicide and self-harm for adults and young people
- (4) Decrease social isolation
- (5) Ensure early assessment of and good provision of care for those with dementia

5.2 The Council's Public Health and Adult Social Care Services, Berkshire West CCG Federation, Berkshire Healthcare Foundation Trust and Berkshire's Shared Public Health Team conduct a variety of activities on Berkshire-wide, Berkshire West and West Berkshire footprints in support of the above objectives.

5.3 The Children's Delivery Group will be designing a work programme to address increasing levels of self-harm by children.

5.4 The update regarding the Mental Health Action Group has been provided elsewhere on the agenda.

5.5 The Suicide Prevention Action Group has begun an awareness campaign in barbershops and continues to work with the Council's Highways Team to identify high-risk sites for people who seek to end their lives. More employer training courses will be held later in the year.

5.6 Regarding objective (5), ensure early assessment of and good provision of care for those with dementia, the Board received a presentation on the Dementia Enabling Environments Project in Adult Social Care. These principles are being used to

improve the environment at Birchwood Care Home and a community audit tool for residents is being developed. The dementia enabling principles are also influencing planning policy and decisions around the redevelopment of Market Street.

6. Strategic Aim: Reduce premature mortality by helping everyone live healthier lives

6.1 The aim to reduce premature mortality by helping everyone live healthier lives carries the following objectives:

- (1) Reduce alcohol related harm across the district for all age groups
- (2) Increase uptake of NHS Health Checks
- (3) Support residents to stop smoking and reduce substance misuse
- (4) Support residents to be more physically active, achieve a healthy weight and eat a healthy diet

6.2 The Substance Misuse Harm Reduction Partnership relaunched in June 2018. It continues to oversee the Alcohol Identification and Brief Advice training project in addition to the Blue Light Project. The group is identifying priorities in respect of substance misuse to work on through 2018/19.

6.3 The Council's Public Health Team and the Berkshire West CCG Federation, as part of the Accountable Care System, are responsible for business as usual activities in support of objectives (2), (3) and (4).

7. Strategic Aim: Build a thriving and sustainable environment in which communities can flourish

7.1 The aim to 'build a thriving and sustainable environment in which communities can flourish' carries the following objectives:

- (1) Increase the number of Community Conversations through which local issues are identified and addressed
- (2) Ensure that housing is of good quality, accessible and affordable
- (3) Improve rural access to services
- (4) Decrease levels of air pollution in areas that need it
- (5) Increase the number of reports of Domestic Abuse and reduce repeat incidents of abuse reported to Thames Valley Police

7.2 The Building Communities Together (BCT) Partnership and Team are responsible for work which supports objectives (1), (2) and (5). The Domestic Abuse Strategy Group reports its progress to the BCT Partnership and domestic abuse is also a priority for the Local Children's Safeguarding Board.

7.3 15 community conversations were held in 2017/18 and the BCT Partnership's ambition is to increase these numbers.

- 7.4 The Delivery Plan now includes the performance of the Making Every Adult Matter programme.
- 7.5 Following the publication of the Healthwatch Homeless and Rough Sleepers Report 2018, the Board invited the Homelessness Strategy Group, to become a sub-group. The Group has been asked by the Board to revise its governance and develop a long term plan. Measurable activity will be reported within the Delivery Plan once identified.
- 7.6 Performance of programmes to decrease air pollution is reported to the Joint Public Protection Partnership.
- 7.7 The Council's Planning Advisory Group have agreed to incorporate Health Impact Assessments into the next Local Plan. In the meantime, further opportunities to integrate health and wellbeing with planning are being explored.

8. Strategic Aim: Help older people maintain a healthy, independent life for as long as possible

- 8.1 The aim to help older people maintain a healthy, independent life for as long as possible carries the following objectives:
- (1) Prevent falls and ensure integrated care for those who have sustained a fall
 - (2) Maximise independence for older people and those with long-term conditions
 - (3) Ensure good end of life care is available and residents are able to die where they choose
- 8.2 The Ageing Well Task Group (AWTG) is responsible for activities to support objective (1). The Group's achievements in Q1 include :
- (1) A meeting with Care Quality to strengthen the falls prevention aspects - eg seating, walking aids and physical activity - of the yearly care home checklist
 - (2) On-going preparation for a Safe and Well pilot that will commence in 2018/19 to support people in their homes to address their home safety and wellbeing needs
 - (3) A video demonstrating falls hazards at home and how to rectify them to use as a training/awareness tool for the public and professionals
 - (4) Contribution to the Berkshire West Task and Finish Group meeting, overseen by the Long-term Conditions Board, to evaluate the support provided by Health, Social Care and prevention services
 - (5) An online campaign promoting the need for good hydration and it's link to keeping well and helping to prevent falls
 - (6) Two new Steady Steps classes, for balance and strength, so that they are available in east, west and central West Berkshire

- (7) Updated Joint Strategic Needs Assessment profile for Falls and Mobility using the most recently available data.

9. Integration

- 9.1 Integration is a cross cutting theme across the priorities, aims and objectives in the Health and Wellbeing Strategy and each sub-group needs to pursue integrated ways of working.
- 9.2 The West Berkshire Locality Integration Board (LIB) oversees the performance of the Better Care Fund (BCF) projects locally. Indicators for the four national conditions under the BCF Plan are reported in the dashboard.
- 9.3 DTOC performance showed improvements at the end of 2017/18 and continued into quarter one 2018/19. This is a significant success for the local health and wellbeing system which has worked hard to achieve improvements.
- 9.4 While non-elective admissions are shown as 'red', the Berkshire West CCG area is still in the top 10 performing areas nationally.

10. Communication and Engagement

- 10.1 Good communication and public engagement is also a cross cutting theme across the priorities, aims and objectives in the Health and Wellbeing Strategy.
- 10.2 The Patient and Public Engagement Group (PPE) has been responsible for 'Your Health Matters' articles in the Newbury Weekly News, covering a variety of health topics.
- 10.3 The PPE has refreshed the Board's Communication and Engagement Strategy and is still discussing the actions that will form its Work Programme for 2018/19.

11. Conclusion

- 11.1 The Health and Wellbeing Strategy Delivery Plan contains an incomplete picture of performance at quarter one. Some groups are yet to confirm their work programmes and others have not provided performance information.
- 11.2 The Health and Wellbeing Steering Group should identify any matters that warrant further discussion and invite chairs of the Board's sub-groups to run Problem Solving Sessions in order to resolve any issues identified.

12. Consultation and Engagement

- 12.1 Health and Wellbeing Steering Group

Background Papers: West Berkshire Joint Health and Wellbeing Strategy 2017-2020

Strategic Aims and Priorities Supported:

The proposals will help achieve the following Council Strategy aims:

- BEC – Better educated communities**
 - P&S – Protect and support those who need it**
 - HQL – Maintain a high quality of life within our communities**
 - MEC – Become an even more effective Council**
-

The proposals contained in this report will help to achieve the following Council Strategy priorities:

- BEC1 – Improve educational attainment**
 - BEC2 – Close the educational attainment gap**
 - P&S1 – Good at safeguarding children and vulnerable adults**
 - HQL1 – Support communities to do more to help themselves**
 - MEC1 – Become an even more effective Council**
-

Officer details:

Name: Jo Reeves
Job Title: Principal Policy Officer (Executive Support)
Tel No: 01635 519486
E-mail Address: Joanna.Reeves@westberks.gov.uk

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Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
2018/19 Priority: Support mental health and wellbeing for adults			Celebrate, promote and connect existing resources especially those who provide Community Navigation and Peer Support.	Matthew Braovac (MHAG)	Apr-18	A1/6.m1	tbc	tbc	data not available	MHAG have invited Berkshire West CCG to discuss delays to the launch of the Berks West Your Way peer support service.
			Explore the introduction of a digital community resource directory for prevention, recovery and self-care	Matthew Braovac (MHAG)	Apr-18	A1/6.m2	tbc	tbc	data not available	The new-look West Berkshire Directory was launched in July 2018. Recruitment of a volunteer to run the Emotional Wellbeing West Berkshire website is ongoing.
			Investigate preventable deaths from physical health conditions of people with serious mental illness	Matthew Braovac (MHAG)	Apr-18	A1/6.m3	tbc	tbc	data not available	An action plan is currently being developed. Appropriate measures will be included in the Delivery Plan once completed.
			Work with users and BHFT to co-produce improvements to patients experience when in crisis	Matthew Braovac (MHAG)	Apr-18	A1/6.m4	tbc	tbc	data not available	A project plan is in development to outline a process for a review of crisis experiences.
2018/19 Priority: Improve access to employment, education, training and volunteering for vulnerable people.			Raise local employers' understanding of regional skills needs and challenges of promote local employment opportunities to all, including vulnerable people.	Fadia Clarke (SEP)	Sep-18		Facilitate a 'Business & Wellbeing' conference for local employers, local authority representatives, business skills representatives and other stake holders to raise awareness of: 1. skills required to address the economic development strategy of the region 2. challenges facing vulnerable people when seeking employment	tbc March 2019	data not available	An action plan is currently being developed.
			Run events to engage local employers in promoting sustainable employment pathways for local people at all levels of work.	Fadia Clarke (SEP)	Sep-18		Hold an annual work and careers fair (Job Fair), promoted to local employed / unemployed people and schools / College age students (16+ years of age). The Job Fair to include local stakeholders promoting wellbeing and mental health support agencies	17th October 2018	data not available	In planning stage and format agreed.
				Fadia Clarke (SEP)	Sep-18		Hold a Skills Awareness day for vulnerable people, including those with learning difficulties and disabilities promoting employment pathways.	tbc July 2019	data not available	An action plan is currently being developed.
			Support local employers to create accessible and supportive work environments to all people, including vulnerable people.	Fadia Clarke (SEP)	Sep-18		Local stakeholders produce a tool kit for employers that enable them to support vulnerable people in employment or support vulnerable people to employment.	Date/ milestones tbc	data not available	An action plan is currently being developed.

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
3 Strategic Aim: Give every child the best start in life	Objective 1	Decrease the educational attainment gap between children who are eligible for Pupil Premium Grant and the rest	Organise a conference event for West Berkshire schools on managing autistic types of behaviours in school - promoting inclusion	Pete Campbell (CDG)	Summer 17	A1/1.m1	Number of schools that attended the conference	tbc	28.0 Q1	RAG'd as 'on target', as the overall action has been completed. No target has been set as to the number of schools expected to attend. The Autism conference for schools was held on the 24th May. 28 schools were represented at the event, feedback from schools attending the event was very positive, they found the practical learning and behaviour management advice provided on the day very helpful. Learning from the event is being disseminated to other schools unable to attend by Children's Delivery Group partners. Schools progress in implementing these strategies will be reviewed by December 17. Exclusions related to types of behaviour associated with autism will be monitored more longitudinally.
				Pete Campbell (CDG)		A1/1.m2	% of schools that are implementing the techniques for managing autistic types of behaviour	tbc	data not available	There is no methodology for collating this data. We need to use this output type measure as an evaluation of the input activity above and because the impact on exclusions is expected towards the end of the year and longer term.
			Schools promote inclusion with focus on managing autistic types of behaviour	Pete Campbell (CDG)	Mar-18	A1/1.m3	To be determined	tbc	data not available	Awaiting new measure from group
			To be determined			A1/1.m4	To improve on 2015/16 Academic year rankings for reading, writing and maths combined expected standard for disadvantaged pupils in KS2 in 2016/17 Academic Year	Rank higher than 122/152	#N/A	More information regarding actions to improve this measure can be found in the performance report to the Executive. The Children's Delivery Group have not explained what work they are undertaking as a partnership to drive improvement.
	Objective 2	Reduce childhood obesity				A1/2.m1	To be determined		data not available	Childrens Delivery Group to determine appropriate reportable actions following consideration of Berkshire West Healthy Weight Strategy in Q4
	Objective 3	Improve educational and health outcomes for Looked After Children	Support the physical health of Looked After Children	Pete Campbell (CDG)		A1/3.m1	Percentage of LAC with completed health assessments on time	90%	95.2% Q4	YTD: 102/103
			Increase the number of LAC who have had a mental health assessment	Pete Campbell (CDG)		A1/3.m2	% of LAC (aged 4-16 and in care for more than 12 months) who have had a SDQ (Strengths and Difficulties Questionnaire) assessment within the last year	100%	100.0% Q3	Q1: 79/80. Below target but within 2% tolerance. Q2 data not available Q3: 78/78
			Outcome: Improve the emotional wellbeing and mental health of LAC who have had a mental health assessment	Pete Campbell (CDG)		A1/3.m3	Reduction of SDQ scoring at subsequent assessments	17	data not available	No update at Q2 or Q3 February 2017 data. An alternative measure for this to be used is: 'reduction of SDQ scoring at subsequent assessments'. Availability of this information is being explored.

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
HWE	Objective 4	Support the health and wellbeing of young carers	Increase the number of young carers that have been identified and receive support	Pete Campbell (CDG)		A1/4.m1	Number of Young Carers being supported	Increase nos (baseline = ?)	83.0 Q2	<p style="color: red;">Not RAGd as there is no baseline figure or target set.</p> <p>Young carers workshop was conducted with the Children's Delivery Group on Monday 12th June. The workshop identified that we have 60 Young Carers currently identified by the Family Resource service, but our most recent Census indicated 834 Young Carers in the District. The discussion and points of elaboration in the workshop will inform the structure and design of a Young Carers Strategy, which will be founded upon the following framework:</p> <ul style="list-style-type: none"> a) Identification of young carers b) Raising Awareness c) Assessment and analysis of need d) Community Transport and volunteering e) Listening to the voice and experience of our children and young people <p style="color: red;">Q2 update: Since April the Young Carers Project has received 37 young carer's referrals and completed 37 assessments. 27 of those which were assessed are now accessing the project and 10 did not meet the criteria.</p> <p style="color: red;">No update has been recieved form the Children's Delivery Group since Q2.</p>
				Pete Campbell (CDG)		A1/4.m2	Number of Young Carers engaged with support service	tbc	66.0 Q3	<p style="color: red;">Not RAGd as no target has been set.</p> <p style="color: red;">No data for Q4 has been provided by the CDG.</p>
HWB Strategic Aim: Support mental health and wellbeing throughout life	Objective 5	Promote the emotional health and wellbeing of children	Helping children, young people and families find support for emotional well-being earlier, faster and more easily	Pete Campbell (CDG)		A1/5.m1	Number of referrals to the Emotional Health Academy triage	tbc	150.0 Q4	<p>Not RAGd as no target has been set.</p> <p style="color: red;">Year end total = 591</p>
				Pete Campbell (CDG)		A1/5.m2	Number of children that have worked with the Emotional Health Academy professionals	tbc	243.0 Q4	<p>Not RAGd as no target has been set.</p> <p style="color: red;">Year end total = 880</p>
				Pete Campbell (CDG)		A1/5.m3	% of children and young people that have improved their outcomes following support from the Emotional Health Academy	tbc	89.9% Q4	<p>Not RAGd as no target has been set.</p> <p>Q3: 71/79</p> <p>Year end total: 223/276</p>
	Objective 7	Prevent suicide and self-harm for adults and young people	Organise training for employers regarding suicide awareness and the signs of stress	Garry Poulson (SPAG)	Oct-18	A1/7.m1	Number of events held per year	2	1.0 Q3	The employer training events have not yet been organised.
					Oct-18	A1/7.m2	Number of employers who attend each training event	30	50.0 Q3	The employer training events have not yet been organised.
					Oct-18	A1/7.m3	Proportion of participants who report an increased level of confidence of suicide prevention on training evaluation form	0.75	100.0% Q3	The employer training events have not yet been organised.
			Reduce access to the means of suicide	Garry Poulson (SPAG)	Apr-18	A1/7.m4	Identify suicide risk sites at which to promote Samaritans with appropriate signage.	6	0.0 Q1	Work is ongoing in partnership with the Council's Highways Team and Samaritans to identify suicide risk sites across the District.
			Reduce the risk of suicide in key high-risk groups	Garry Poulson (SPAG)	Apr-18	A1/7.m5	Run a suicide awareness campaign to target men in places such as the rugby club, pubs, comedy nights, etc.	1	1.0 Q1	A campaign is being run in barber shops to target men. The SPAG's Chair has also performed at the Hungerford comedy Club to raise awareness in a rural communitiy.
	Garry Poulson (SPAG)	Apr-18	A1/7.m6	Run events to raise awares of suicide among men.	2	0.0 Q1	Due to commence April 2018.			

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targeted)	Narrative
HWB Strategic Aim: Reduce premature mortality by helping people lead healthier lives	Objective 10	Reduce alcohol related harm across the district for all age groups	Monitor uptake of Identification & Brief Advice (IBA) training	Denise Sayles (SMHRP)	Jan-18	A3/10.m 1	Total number of WBC staff, GP staff, volunteers and staff from Lifestyle Intervention Providers trained in Identification & Brief Advice (IBA) - by June 2019	381 by end of March 2019	118.0 Q1	118 people were trained in Alcohol IBA in Q1, meaning that 187 of the total 450 target are now trained.
				Denise Sayles (SMHRP)		A3/10.m 2	Number of WBC staff trained in Identification & Brief Advice (IBA)	(Not targeted)	21.0 Q1	Attendance by WBC staff at the training continues to be good.
				Denise Sayles (SMHRP)		A3/10.m 3	Number of GP practices trained in Identification & Brief Advice (IBA)	(Not targeted)	41.0 Q1	The provider ran a Time for Improving Patient Services (TIPS) event for the CCG therefore attendance by GPs was particularly strong this quarter.
				Denise Sayles (SMHRP)		A3/10.m 4	Number of volunteers trained in Identification & Brief Advice (IBA)	(Not targeted)	3.0 Q1	The training has been advertised in the Volunteer Centre's newsletter and will continue to be publicised.
				Denise Sayles (SMHRP)		A3/10.m 5	Number of Lifestyle Intervention Providers trained in Identification & Brief Advice (IBA)	(Not targeted)	0.0 Q4	Further promotion of the training to Solutions4Health is required and has been pushed in quarter two. Attendance should increase from quarter 3.
			Monitor how many staff incorporate Identification & Brief Advice (IBA) into their practice	Denise Sayles (SMHRP)	Jan-18	A3/10.m 6	Proportion of IBA trained people who have used training (3 month survey) - by June 2018	75%	50.0% Q1	Further work may be required to support staff to implement the training. This data was based on a small cohort so further information will be collected before agreeing actions with the provider.
			Outcome: Improve knowledge and confidence of those receiving Identification & Brief Advice (IBA) training	Denise Sayles (SMHRP)	Jan-18	A3/10.m 7	Proportion of participants who report an increase level of confidence of IBA on training evaluation form (Identification & Brief Advice (IBA)) - by June 2018	75%	data not available	Indicative target set at 75% in recognition that not all those who are trained might achieve a higher level of confidence to deliver IBA. Reporting expected from Q2 2018/19
			Monitor training in the Blue Light approach	Denise Sayles (SMHRP)	May-18	A3/10.m 8	Number of Blue Light (BL) project training sessions and 'train the trainer' sessions delivered	7	4.0 Q4	Q3 update: Procurement completed and training commenced November 2017 Q4 update: YE: 7
				Denise Sayles (SMHRP)		A3/10.m 9	Number of health, social care, housing and criminal justice staff who have attended Blue Light (BL) training	(Not targeted)	75.0 Q4	Q3: Training commenced in November 2017. Reporting from Q4
			Develop and agree action plans to support treatment resistant drinkers in the Blue Light (BL)	Denise Sayles (SMHRP)	May-18	A3/10.m 10	Number of identified treatment resistant drinkers on Blue Light project, with an agreed action plan	15	data not available	Q3: Plans to be finalised March 2018 and cohort to be identified following this meeting Update Q4: The Operational group has not yet been established. The cohort has not been identified. The first meeting is scheduled for June 2018.
			Outcome: Reduce the cost to other WBC services for ongoing support by engaging treatment resistant drinkers in the Blue Light approach	Denise Sayles (SMHRP)	May-18	A3/10.m 11	£ cost saved per client (at end of project)	(Not targeted)	data not available	Baseline for each client required. Q4 update: The Operational group has not yet been established. The cohort has not been identified. The first meeting is scheduled for June 2018.

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
HWB Strategic Aim: Build a thriving and sustainable environment in which communities can flourish	Objective 14	Increase the number of Community Conversations through which local issues are identified and addressed	Increase the number of community conversations held	Susan Powell (BCT)	Apr-18	A4/1.m1	Number of new community engagements facilitated (BCT)	>10	8.0 Q1	<i>This measure has been changed from 2017/18 to better reflect the BCT Team's role.</i> 8 community engagement events were facilitated in quarter one including: Parish Clerks workshop, H&WB problem solving session, Peer Mentors coordinators conversation, Lambourn Parish Council, Burghfield and Mortimer Door knock, Homeless Conference, Berkshire School of English and Royal Berkshire Fire & Rescue engagement in schools
	Objective 15	Ensure that housing is of good quality, accessible and affordable.	Support people experiencing multiple needs including homelessness, substance abuse, contact with the criminal justice system and mental ill health through a coordinated approach	Susan Powell (BCT)	Apr-18	A4/15.m2	Number of individuals accepted into the Making Every Adult Matter (MEAM) cohort	Not targetted	6.0 Q1	<i>New for 2018/19</i>
				Susan Powell (BCT)	Apr-18	A4/15.m3	Number of individuals helped by / moved on from the Making Every Adult Matter (MEAM) cohort	Not targetted	1.0 Q1	<i>New for 2018/20</i>
	Objective 18	Increase reporting of domestic abuse and decrease repeat incidents of domestic abuse	Monitor number of repeat incidents of Domestic Abuse reported to Thames Valley Police	Susan Powell (BCT)	Apr-18	A4/18.m1	Number of Domestic Abuse incidents reported to Thames Valley Police (recorded crimes)	Not targetted	274.0 Q1	<i>New for 2018/19 to provide context for Repeat Victimization Rate.</i>
						A4/18.m2	Number of Domestic Abuse incidents reported to Thames Valley Police (non crime)	Not targetted	330.0 Q1	<i>New for 2018/19 to provide context for Repeat Victimization Rate.</i>
						A4/18.m3	Domestic Abuse Repeat Victimization Rate reported to Thames Valley Police	Not targetted	45.8% Q1	<i>No comment provided.</i>
			Improve staff awareness of domestic abuse	Susan Powell (BCT)	Jul-18	A4/18.m4	Number of multi-agency staff trained in Domestic Abuse Awareness	Not targetted	0.0 Q1	<i>Amended for 2018/19. Awareness training will still include DASH/MARAC.</i> Train the Trainer scheduled for Qtr2 to enable training to be implemented.
						A4/18.m5	Number of multi-agency staff trained in Domestic Abuse Champions	Not targetted	0.0 Q1	<i>Amended for 2018/19. Awareness training will still include DASH/MARAC.</i> Train the Trainer scheduled for Qtr2 to enable training to be implemented.

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
HWB Strategic Aim: Help older people maintain a healthy, independent life for as long as possible	Objective 19	Prevent falls and ensure integrated care for those who have sustained a fall	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)	Ongoing	A5/19.m 1	Increase the proportion of people aged 65+ at risk of falling who take part in a 'Fall Prevention' class (Steady Steps) (At risk 35% of population aged 65-84 = 7,188 45% of population aged 85+ = 1389)(Total = 8,577)	1%	1.7% Q4	Q2/YTD = 199/8,577 Q3/YTD = 182/8,577 Q4: 147 / 8,577 YE: 528/8577 = 6.2%
			Increase the number of people aged over 65 who are at risk of a fall who have attended a Tai Chi course	April Peberdy (AWTG)	Ongoing	A5/19.m 2	Increase the proportion of people aged 65+ at risk of falling who take part in a Tai Chi for Falls Prevention class (At risk 35% of population aged 65-84 = 7,188 45% of population aged 85+ = 1389)(Total = 8,577)	0.50%	.4% Q4	Q1: 23/8,577 Q2: 46/8,577 Q3: 27/8,577 Q4: 32/8,577 YTD = 128/8,577 = 1.5%
			Conduct campaigns to increase public awareness of falls and how to prevent falls.	April Peberdy (AWTG)	Ongoing	A5/19.m 3	Number of Falls Prevention Awareness Campaigns	3	1.0 Q4	One campaign on Falls and Hydration was completed in June 2017, with an accompanying webpage with another in Q4 Year end total = 3 campaigns
			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)	Jan-18	A5/19.m 4	Number of Falls Prevention Awareness Training sessions delivered	3	1.0 Q4	One training delivered by AP at the Commissioning Provider forum. Training was planned for RBFRS but pilot on hold
			Develop and implement a multi-factorial falls risk assessment tool (FRAT)	April Peberdy (AWTG)	Jan-18	A5/19.m 5	Number of risk assessments conducted using FRAT tool	tbc	0.0 Q4	Pilot was ready to start but the RBFRS have put on hold due to compliance with GDPR. They will update asap.
			Conduct an Early Intervention Project to identify those most at risk of falls.	April Peberdy (AWTG)	Jan-18	A5/19.m 6	Number of people aged over 65 identified as at risk of falls.	tbc	8,577.0 Q4	No comentprovided.
			Conduct a Home Safety Check Pilot with RBFRS	April Peberdy (AWTG)	Jan-18	A5/19.m 7	Number of Home Safety Checks	tbc	0.0 Q4	Pilot was ready to start but the RBFRS have put on hold due to compliance with GDPR. They will update asap.

Health and Wellbeing Strategy Delivery Plan

HWB Strategy Priority/ Strategic Aim	Objective Reference	HWB Strategy Objective	Action	Chair/ Group	Start Date	Ref.	Measure	Target	Latest/YE RAG (grey=not targetted)	Narrative
How we will deliver the Strategy: Integration	Batter Care Fund National Condition 1	Delayed transfers of care	Decrease the number of bed days due to Delayed Transfers of Care (DTC) from hospital	Tandra Forster/ Shairoz Claridge (WBLIB)	Mar-17	BCF1/m 1	Decrease the number of bed days due to Delayed Transfers of Care (DTC) from hospital	429	349.0 Q1	Q1 performance has been strong with overall delays below the agreed BCF target, this despite increased demand and continued challenges with the market. (See below for published expectations). 2018/19 expectations Per day NHS ASC Joint Total 6.7 3.2 6.5 16.4 Monthly target for June 2018: 429 days.
	Better Care Fund National Condition 2	Non-elective admissions (General and Acute)	Monitor the number of non-elective admissions (General and Acute)	Tandra Forster/ Shairoz Claridge (WBLIB)	Mar-17	BCF2/m 1	Number of non-elective admissions (General and Acute) per 100k population	3249	3,598.0 Q1	[Target (Aim to be lower than)]/ Actuals: Q1: [3249]/ 3598 Q2: [3269] Q3: [3462] Q4: [3442] [YE total]/ YTD actuals: [13422] / 3598
	Better Care Fund National Condition 3	Admissions to residential and care homes	Monitor the number of permanent admissions of older people aged 65+ to residential and care homes (per 100,000 of population)	Tandra Forster/ Shairoz Claridge (WBLIB)	Mar-17	BCF3/m 1	New permanent admissions of older people aged 65+ to residential and care homes (per 100,000 of population) (ASCOF 2A (part 2))	tbc	602.0 Q1	No RAG as target tbc Provisional data - to be confirmed ASCOF 2A presented as per 100,000. Numerator just shows number of new admissions We focus on helping people home wherever possible and were disappointed to see an increase in admissions last year. We will continue to focus on promoting community options.
	Better Care Fund National Condition 4	Effectiveness of reablement	Increase the percentage of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Tandra Forster/ Shairoz Claridge (WBLIB)	Mar-17	BCF4/m 1	% of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	83%	85.2% Q1	Performance has improved as a result of a more targeted approach, but given the small numbers maintaining this will always be a challenge.
			Increase the percentage of new clients where service following enablement was Ongoing Low Level Support, STS (Other), Universal Services/IAS or No identified needs (ASCOF 2D)	Tandra Forster/ Shairoz Claridge (WBLIB)	Mar-17	BCF4/m 2	% of new clients where service following enablement was Ongoing Low Level Support, STS (Other), Universal Services/IAS or No identified needs (ASCOF 2D)	60%	67.0% Q1	No comment provided.
How we will deliver the strategy: Public Engagement		Raise the profile of the Health and Wellbeing Board and its workstreams using a range of platforms.	Use local print media to promote the work of the Health and Wellbeing Board, its sub-groups or any pertinent issues	Kamal Bahia (PPE)	May-18		Number of articles published in the Newbury Weekly News per year	12	3.0 Q1	No comment provided.

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Update on Priority Two (Employment for Vulnerable People) for 2018/19

Report being considered by:	Health and Wellbeing Board on 4 October 2018
Report Author:	Health and Wellbeing Steering Group on 6 September 2018
Item for:	Fadia Clarke
	Discussion

1. Purpose of the Report

To update the Health and Wellbeing Board on the progress of the Skills and Enterprise Partnership (SEP) regarding priority two – promoting employment for vulnerable people.

2. Recommendation

The SEP has set three actions to deliver the Health and Wellbeing Strategy regarding improving employment for vulnerable people. The Health and Wellbeing Board are asked to endorse these actions.

3. How the Health and Wellbeing Board can help

Review the SEP actions, expected outcomes and measures of impact to ensure they are aligned with the Health and Wellbeing Board's priority.

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

The SEP is a board representing several local employers and stakeholders focused on understanding the local economic development strategy and on the identification and promotion of local employment.

5. Proposal

5.1 The SEP has agreed to support the Health and Wellbeing Board with the focus of supporting local employers to create work environments that are accessible and supportive to all people, including vulnerable people.

5.2 For the SEP to achieve its new agreed focus, members have set the following actions:

- (1) Raise local employers' understanding of regional skills needs and challenges of promoting local employment opportunities to all, including vulnerable people.
- (2) Run events to engage local employers in promoting sustainable employment pathways for local people at all levels of work.
- (3) Support local employers to create accessible and supportive work environments to all people, including vulnerable people.

6. Next steps

- 6.1 The SEP is aiming to deliver these actions within the period of September 2018 and July 2020 and will be seeking financial support from the Health and Wellbeing Board's Priority Fund.
- 6.2 The expected outcomes of the set actions are to:
- (1) Facilitate a 'Business & Wellbeing' conference for local employers, local authority representatives, business skills representatives and other stakeholders to raise awareness of:
 - (a) Skills required to address the economic development strategy of the region
 - (b) Challenges facing vulnerable people when seeking employment.
 - (2) Hold an annual work and careers fair (Job Fair), promoted to local employed / unemployed people and schools / College age students (16+ years of age). The Job Fair to include local stakeholders promoting mental health and wellbeing support agencies.
 - (3) Hold a Skills Awareness day for vulnerable people, including those with learning difficulties and disabilities promoting employment pathways.
 - (4) Local stakeholders produce a tool kit for employers that enable them to support vulnerable people in employment or support vulnerable people to employment.
- 6.3 The impact of these outcomes will be measured by:
- (1) From the 'Business & Wellbeing' conference: Participating employers and mental health and wellbeing stakeholders engage in promoting employability skills and support for vulnerable people, through providing work placements, being speakers at schools & the College events, running career events, etc.
 - (2) From the 'Job Fair' and 'Skills Awareness Day': Raising awareness amongst a significant number of employers and mental health and wellbeing stakeholders, through them running the event as well as through the number of local participants attending the event.
 - (3) From the development of a 'Tool Kit': Employers' evaluation of the tool kit developed confirms that the 'Tool Kit' has a positive contribution to vulnerable people and employers.

7. Conclusion

The Health and Wellbeing Board is asked to agree the SEP's proposed course of action.

8. Consultation and Engagement

- 8.1 SEP members, HWBB Steering Group, Jo Reeves

9. Appendices

There are no appendices to this report.

Background Papers:

None

Health and Wellbeing Priorities 2018/19 Supported:

- Promote positive mental health and wellbeing for adults.
- x Improve opportunities for vulnerable people to access education, employment, training and volunteering.

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 proposals contained in this report will help to achieve the above Health and Wellbeing Strategy aim by engaging with employers to raise awareness of the issues faced by vulnerable people in the workplace.

Officer details:

Name: Fadia Clarke
Job Title: Deputy Principal, Newbury College and Chair of the Skills and Enterprise Partnership
Tel No: 01635 845210
E-mail Address: f-clarke@newbury-college.ac.uk

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Homelessness Strategy Group Winter Action Plan 18/19

Report being considered by: Health and Wellbeing Board

On: 04 October 2018

Report Author: Sam Headland

Item for: Information

1. Purpose of the Report

1.1 To present the Homeless Strategy Group’s Winter Action Plan, which seeks to provide extra support to rough sleepers, and to reduce the number of individuals needing to rough sleep over Winter.

2. Recommendation

2.1 That the Health and Wellbeing Board agree, endorse and promote the Winter Action Plan.

3. How the Health and Wellbeing Board can help

3.1 The Health and Wellbeing Board can support the winter plan by raising awareness of ways to support rough sleepers in their advertising and media opportunities.

3.2 Individual members can support the plan by encouraging and guiding their relevant organisation to complete their areas of the action plan and commit to this on an on going basis.

Will the recommendation require the matter to be referred to the Executive for final determination?		No: <input checked="" type="checkbox"/>
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4. Introduction/Background

4.1 Over the winter of 2017/18, various groups raised the profile of homelessness and rough sleeping in West Berkshire, including Healthwatch through the publication of their Homeless and Rough Sleepers Report 2018. In May 2018, The Homeless Forum was invited to become a sub-group of the Health and Wellbeing Board and requested to produce a Winter Plan, in addition to reviewing the recommendations arising from the Healthwatch report.

4.2 The Homelessness Forum, a multi-agency operational group, has been run by the homelessness service provider Two Saints for a number of years. The Forum took the decision in early 2018 to revise its terms of reference and membership as it had become clear that a more strategic approach would be required. The Health and Wellbeing Board will also be well aware of the multi-agency approach of the Making Every Adult Matter programme to support individuals with multiple needs, including homelessness.

4.3 The Winter Action Plan provides clarity on the support available and the activities to be undertaken to reduce the number of people sleeping rough over winter and to ensure that there was sufficient emergency support in place. The Winter Action Plan is appended to this report which the Health and Wellbeing Board are asked to endorse.

5. Supporting Information

5.1 A review of the provision made available for rough sleepers winter 2017/18 was undertaken and it was identified that a main area of improvement was communication between partner agencies. It was clear that there had been a breakdown in communication and agencies were working in silo, despite all working towards the same goal. This created confusion for individuals who were rough sleeping and for agencies when trying to support those individuals.

5.2 The process of producing the Winter Action Plan has led to relationships across statutory and voluntary organisations being rebuilt. The Winter Plan is also reinforced by a Communications Plan which sets out a proactive and collaborative approach to information sharing and service promotion. The HSG is now confident that stronger communication channels will lead to an improved level of service to rough sleepers.

5.3 There have already been improvements in partnership working with all parties making a valuable contribution towards completing actions laid out in the Winter Action Plan. Agreements are already in place around combining sources of voluntary support to assist existing emergency bed provision. A programme of day time activities and shelter over winter is also in process.

5.4 Additional funding has been successfully bid for West Berkshire Council, from the Rough Sleeper Initiative (RSI) grant, and a Winter Outreach Worker has already been recruited. They are due to start on 1st October 2018. Extended provision for individuals being released from prison as no fixed abode (NFA) is also in place. Recruitment is underway for a homelessness prevention co-ordinator who will be overseeing the funding and completing performance reporting as required to the Ministry for Communities, Housing and Local Government.

6. Options for Consideration

6.1 The actions within the plan have been agreed to be realistic and achievable by a range of partners across the HSG. As part of the RSI grant, monthly numbers of people rough sleeping will need to be reported to the MCHLG, and this will contribute to understanding of the success of the Winter Plan.

7. Proposal(s)

7.1 It is proposed that the Health and Wellbeing Board accept the HSG's Winter Action Plan and support through communications and expertise where appropriate.

8. Conclusion(s)

8.1 The Homeless Strategy Group was requested to produce a Winter Action Plan by the Health and Wellbeing Board for approval. Over winter the HSG will focus on implementing the plan and hopes to focus on supporting the delivery of West Berkshire Council's wider Homelessness strategy in the new year.

9. Consultation and Engagement

9.1 The Winter Actions Plan subgroup consisted of representatives from: West Berkshire Council Housing Options; Two Saints; Healthwatch; Thames Valley Police; Loose Ends; West Berkshire Homeless. Feedback was also sought from within the meetings of the HSG, which alongside the aforementioned agencies also has representatives from: CCG; Salvation Army; Swanswell; Public Health; Adult Social Care; Mental Health; Sovereign; Building Communities Together; SEAP and young people's services.

10. Appendices

Appendix A – Winter Action Plan 2018/19

Background Papers:

Homeless and Rough Sleepers Report 2018 (presented to the Health and Wellbeing Board on 18 May 2018)

Rough Sleepers Strategy

Health and Wellbeing Priorities 2018/19 Supported:

- Promote positive mental health and wellbeing for adults.
- Improve opportunities for vulnerable people to access education, employment, training and volunteering.

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 proposals contained in this report will help to achieve the above Health and Wellbeing Strategy aim by ensuring good services and emergency provision are available for people sleeping rough in West Berkshire this winter.

Officer details:

Name: Sam Headland
Job Title: Contracts and Performance Manager, Two Saints
Tel No: 01635 569 000
E-mail Address: Sam.Headland@twosaints.org.uk

Appendix A

Data Protection Impact Assessment – Stage One

The General Data Protection Regulations require a Data Protection Impact Assessment (DPIA) for certain projects that have a significant impact on the rights of data subjects.

Should you require additional guidance in completing this assessment, please refer to the Information Management Officer via dp@westberks.gov.uk

Directorate:	
Service:	
Team:	
Lead Officer:	
Title of Project/System:	
Date of Assessment:	

Do you need to do a Data Protection Impact Assessment (DPIA)?

	Yes	No
<p>Will you be processing SENSITIVE or “special category” personal data?</p> <p>Note – sensitive personal data is described as “<i>data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person’s sex life or sexual orientation</i>”</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be processing data on a large scale?</p> <p>Note – Large scale might apply to the number of individuals affected OR the volume of data you are processing OR both</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will your project or system have a “social media” dimension?</p> <p>Note – will it have an interactive element which allows users to communicate directly with one another?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will any decisions be automated?</p> <p>Note – does your system or process involve circumstances where an individual’s input is “scored” or assessed without intervention/review/checking by a human being? Will there be any “profiling” of data subjects?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will your project/system involve CCTV or monitoring of an area accessible to the public?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be using the data you collect to match or cross-reference against another existing set of data?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be using any novel, or technologically advanced systems or processes?</p> <p>Note – this could include biometrics, “internet of things” connectivity or anything that is currently not widely utilised</p>	<input type="checkbox"/>	<input type="checkbox"/>

If you answer “Yes” to any of the above, you will probably need to complete [Data Protection Impact Assessment - Stage Two](#). If you are unsure, please consult with the Information Management Officer before proceeding.

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Homelessness Strategy Group

Winter Action plan 2018

Objective	Actions	Lead organisation(s)	Target date	Completed?
Access Rough Sleeper Initiative funding to provide additional outreach worker over winter months to increase support to access accommodation.	Recruit Winter Outreach Worker Establish contact and build rapport with people who are rough sleeping Establish good working relationships with other agencies Identify and support individuals to access accommodation options	Two Saints	1 st October 2018	
Provide extended Severe Weather Emergency Protocol provision between November and March to rough sleepers with a local connection, additional to the statutory provision available to all rough sleepers, from 1 st November 2018 to 31 st March 2019.	Provision to be advertised via Outreach, WBC communications and Health and Wellbeing Board communications. West Berkshire Council Housing Options (WBC) to authorise extended SWEP to eligible rough sleepers subject to risk assessment. Individuals without local connection to be offered statutory provision. Voluntary sector to support extended provision through serving of refreshments and facilitating recreational activities.	WBC, Two Saints, Health and Wellbeing Board WBC Voluntary sector	1 st November	
Develop intensive, short term accommodation plans with rough sleepers who do not wish to access the main homeless pathway.	Outreach workers to liaise with voluntary agencies working with rough sleepers to establish interim plans for those who do not want to use the Homelessness Pathway long term.	Two Saints, Voluntary organisations	1 st November 2018	
Develop a full timetable of day time activities/shelter for rough sleepers across organisation	Agencies/organisations working with those who are rough sleeping to provide a programme of day time activities and shelter to go alongside the extended provision. Two Saints to host at least 3 days a week for day time activities. Agreement to be reached over	All partners	1 st November	

	<p>host location for remaining days</p> <p>Homelessness prevention co-ordinator work with local businesses and community groups to identify opportunities to support.</p>	<p>Two Saints</p> <p>WBC</p>	<p>1st October</p> <p>1st November</p>	
<p>Provide enough emergency accommodation units to match the number of rough sleepers between November and March.</p>	<p>Outreach team to continue to provide regular updates of identified rough sleeper numbers to WBC.</p> <p>Individuals who are rough sleeping to be directed to WBC to present as rough sleeping and be authorised SWEP accommodation.</p> <p>Two Saints 24 hour supported accommodation to be used as primary SWEP accommodation.</p> <p>West Berkshire Homeless to provide overflow facility where necessary.</p>	<p>Two Saints</p> <p>WBC</p> <p>Two Saints/West Berkshire Homeless</p>	<p>Ongoing</p> <p>Ongoing</p> <p>1st November</p>	
<p>Raise awareness of ways to support rough sleepers</p>	<p>StreetLink number and website to be advertised on partner websites and via social media.</p> <p>SWEP process to be advertised on partner websites and social media, and through local media where appropriate.</p>	<p>All partners</p>	<p>Mid October</p>	
<p>Increase awareness and access to healthcare for rough sleepers</p>	<p>West Berkshire CCG and Swanswell to continue to work with WBC and the Homelessness Strategy group to implement the health outreach provision as funded by the Rough Sleeper Initiative.</p> <p>Healthwatch to continue to work with Community Dental to identify way of increasing provision to rough sleepers.</p>	<p>CCG and Swanswell</p> <p>Healthwatch</p>	<p>1st November</p>	
<p>Identify move on plan for all rough sleepers accessing SWEP provision over Winter.</p>	<p>Outreach team and Two Saints duty worker to look at move on options with individuals.</p> <p>Partner agencies to provide support in move on options.</p>	<p>Two Saints</p>	<p>1st February</p>	

West Berkshire Vision 2036

Report being considered by: Health and Wellbeing Board

On: 4 October 2018

Report Author: Gabrielle Mancini

Item for: Discussion

1. Purpose of the Report

- 1.1 To present the West Berkshire Vision 2036 which is currently out for consultation. The document is the culmination of an evidence review and workshops to agree aspirations of partners for the future of West Berkshire.

2. Recommendation

- 2.1 The Board note the Vision.

3. How the Health and Wellbeing Board can help

- 3.1 Share the draft document widely through communication and engagement channels.
- 3.2 Respond to the consultation if any additions are required, including the referenced evidence base.
- 3.3 Consider ways in which organisational strategies will align to the ambitions set out in the Vision.

Will the recommendation require the matter to be referred to the Executive for final determination?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>
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4. Introduction/Background

- 4.1 West Berkshire is a thriving district in Southern England. It is seen as a fantastic place to live by its residents, who benefit from good educational, health and employment opportunities. It has also received, in recent years, significant investment which has allowed it to flourish as a well-connected, prosperous and desirable local economy with world-class digital infrastructure.
- 4.2 That isn't to say it's without its problems. Evidence suggests that these benefits are not being enjoyed by all residents across West Berkshire. There are significant inequalities in wealth, life expectancy and health as well as education and employment prospects within the district.
- 4.3 West Berkshire, and the world around it, is always changing. Of course, some of this is planned, but much of it is because of national and international trends and events. Regardless of how it comes about, we must be ready for it and take every opportunity to harness the best possible results for residents.

- 4.4 A number of West Berkshire organisations, working under the umbrella of the West Berkshire Health and Wellbeing Board (HWBB), have started a fresh discussion about what the district might want to look like in 2036. The draft West Berkshire Vision 2036 is the product of these discussions and contains evidence which sets out the sort of place West Berkshire is now, and the sort of place it could aspire to be. This conversation has encouraged us to focus on how the HWBB can contribute to the development of the districts existing attributes, whilst embracing the change the future brings.

5. Supporting Information

- 5.1 The Vision is supported by a fully referenced evidence base, which HWBB members have scrutinised and verified.

6. Proposals

- 6.1 The consultation on West Berkshire Vision 2036 will close on 31 October 2018. HWBB members are asked to respond where necessary to the consultation and to encourage participation by sharing through their communication and engagement channels.
- 6.2 All comments will be considered following the closure of the consultation period and will be assimilated into the final version.
- 6.3 The final version will be submitted to all partner organisations and be presented to the Health and Wellbeing Board for formal approval on 19 January 2019.
- 6.4 The Council will approve the document on 5 March 2018.

7. Conclusion

- 7.1 Over the next six months the draft Vision will be shaped and amended through discussion, debate and consultation with a wide range of stakeholders from across the district, including residents, businesses and organisations. From this, a consensus will emerge as to what the people of West Berkshire would like their district to look like in 2036.

8. Consultation and Engagement

- 8.1 The Health and Wellbeing Board and wider stakeholders have been engaged throughout the development of the Vision 2036 including at the Annual Health and Wellbeing Conference on 19 April 2018 and a workshop on 30 August 2018.
- 8.2 Partners and the public can respond to the consultation on the Council's website by 31 October 2018, at <https://www.surveymonkey.co.uk/r/WBVision2036> .

9. Appendices

Appendix A – West Berkshire Vision 2036

Background Papers:

West Berkshire Vision 2036 – The Evidence

<http://info.westberks.gov.uk/CHttpHandler.ashx?id=46236&p=0>

Health and Wellbeing Priorities 2018/19 Supported:

- Promote positive mental health and wellbeing for adults.
- Improve opportunities for vulnerable people to access education, employment, training and volunteering.

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 proposals contained in this report will help to achieve the above Health and Wellbeing Strategy aim by

Officer details:

Name: Gabrielle Mancini
Job Title: Economic Development Officer
Tel No: 01635 519449
E-mail Address: gabrielle.mancini@westberks.gov.uk

Appendix A

Data Protection Impact Assessment – Stage One

The General Data Protection Regulations require a Data Protection Impact Assessment (DPIA) for certain projects that have a significant impact on the rights of data subjects.

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Service:	
Team:	
Lead Officer:	
Title of Project/System:	
Date of Assessment:	

Do you need to do a Data Protection Impact Assessment (DPIA)?

	Yes	No
<p>Will you be processing SENSITIVE or “special category” personal data?</p> <p>Note – sensitive personal data is described as “<i>data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person’s sex life or sexual orientation</i>”</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be processing data on a large scale?</p> <p>Note – Large scale might apply to the number of individuals affected OR the volume of data you are processing OR both</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will your project or system have a “social media” dimension?</p> <p>Note – will it have an interactive element which allows users to communicate directly with one another?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will any decisions be automated?</p> <p>Note – does your system or process involve circumstances where an individual’s input is “scored” or assessed without intervention/review/checking by a human being? Will there be any “profiling” of data subjects?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will your project/system involve CCTV or monitoring of an area accessible to the public?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be using the data you collect to match or cross-reference against another existing set of data?</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will you be using any novel, or technologically advanced systems or processes?</p> <p>Note – this could include biometrics, “internet of things” connectivity or anything that is currently not widely utilised</p>	<input type="checkbox"/>	<input type="checkbox"/>

If you answer “Yes” to any of the above, you will probably need to complete [Data Protection Impact Assessment - Stage Two](#). If you are unsure, please consult with the Information Management Officer before proceeding.

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A West Berkshire
where everybody
has what they
need to fulfil
their potential



A West Berkshire
with a housing
mix with
something
for everyone



2036

WEST BERKSHIRE

A West Berkshire
with both beautiful
and diverse natural
landscapes and
a strong
cultural
offering



A West Berkshire
that welcomes
business,
enterprise and
industry into
a productive,
growing and
dynamic
local
economy



A West Berkshire
where the health and
wellbeing of
residents of all
ages and
backgrounds
is prioritised



Foreword

A number of West Berkshire organisations, working under the umbrella of the West Berkshire Health and Wellbeing Board, have decided that at this time of major national and international change it is timely to start a fresh discussion about what we all want West Berkshire to look like in 2036.

2036 has been chosen for this purpose because it aligns with the timetable for the new West Berkshire Local Plan and also because it sets a realistic time period over which an agreed long term ambition can be realised. Aside from setting out an inclusive aspiration for West Berkshire in 2036, the Vision also has a role in setting a framework within which other strategies and plans will be developed. These include the West Berkshire Health and Wellbeing Strategy and the West Berkshire Economic Development Strategy.



Over the next six months this first draft will be shaped and amended through discussion, debate and consultation with a wide range of stakeholders from across the District. From this will emerge a consensus as to what the people of West Berkshire want to strive for over the coming decades.

Accompanying this Vision are two other documents. One of them is a fully-referenced base of evidence which links every challenge or opportunity we have identified in **bold** to its source. The other is an outcomes framework which every interested partner will be encouraged to take away and complete in recognition of the collective nature of the Vision.

It is through collaborative working that we will achieve our aspiration that West Berkshire is a place where everyone is given the chance to thrive, regardless of their background.



Rick Jones
Chair of the Health and Wellbeing Board

West Berkshire should be a place where everyone is given the chance to thrive



Introduction

Today, West Berkshire is a **thriving district** in Southern England which, it has been said, boasts both the economic advantages of the South East and the excellent lifestyle opportunities of the South West. It is seen as a fantastic place to live by its residents, who benefit from good educational, health and employment opportunities. It has also received, in recent years, significant investment which has allowed it to flourish as a **well-connected, prosperous and desirable** local economy with world-class digital infrastructure.

That isn't to say it is without its problems. Evidence, which will be explored later, suggests that these good outcomes are not being enjoyed by all residents across West Berkshire. When travelling a relatively short distance within the district, it is possible to encounter significant inequalities in wealth, life expectancy and health as well as education and employment prospects.

In the years to come, West Berkshire, and the world around it, will change significantly. Of course, some of this change will be planned, but much of it will be based on national and international trends and events. Regardless of how this change manifests itself, we must ensure that **we are ready** for it and we take every opportunity available to harness the best possible outcomes for residents.

This Vision contains evidence which sets out the sort of place West Berkshire is now and the sort of place we, as partners, aspire for it to be. As such, it encourages partners to focus very clearly on how they can continue to develop West Berkshire's existing attributes whilst embracing the change the future brings. It is hoped that this focus will bring about an **inclusive growth**, where everyone sees the advantages of our economic success in every aspect of their lives; whether it is in their health outcomes, their educational opportunities, their job prospects or their quality of life.

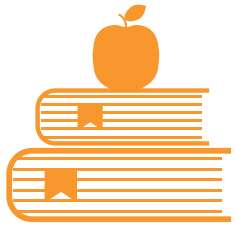
At the heart of this first draft is a meaningful commitment to **future-proof** West Berkshire across five key areas. Together, we will deliver:

- A West Berkshire where everybody has what they need to fulfil their potential
- A West Berkshire with a housing mix with something for everyone
- A West Berkshire that welcomes business, enterprise and industry into a productive, growing and dynamic local economy
- A West Berkshire where the health and wellbeing of residents of all ages and backgrounds is good
- A West Berkshire with both beautiful and diverse natural landscapes and a strong cultural offering

These priorities demonstrate a **collective aim** of maintaining West Berkshire's status as a great place to live, work and learn whilst rising to the challenges we will face in the years to come.

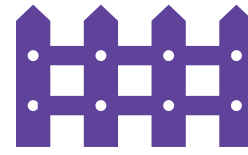
This will not be a Vision created by a small number of people. Instead, it is hoped that this initial document will start a conversation which will enable West Berkshire's communities to decide where the district goes next. Together as partners we will facilitate the change that West Berkshire needs to grow, both economically and socially, at a rate that **benefits all of its residents**, regardless of age, socio-economic status, health, gender or race.

Where are we now



95%
of schools **good**
or **outstanding**

In **bottom half** of Local Authorities for barriers to housing and services



Newbury is the **'top tech'** town



Part of Thames Valley **'Turbo Economy'**



Less than **an hour's** drive from Heathrow



4 working age people per retired person

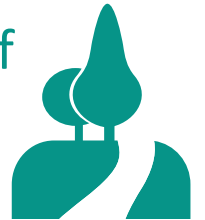


50%
educated to degree level



Best residential care in England

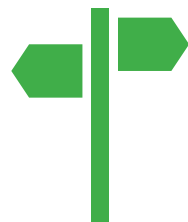
74% Area of Outstanding Natural Beauty



10,000 homes built 2000-2018



One of the best places to be a **woman**



Strategic **crossroads** of Southern England

Population of **156,000**



One of the **happiest** places



Best rural broadband



Life expectancy
for women **84** for men **81**



Average house price **£338,316**

Our hopes for the future



We will have delivered a West Berkshire where everybody has what they need to fulfil their potential.

All of our young people will be well-educated and the wealth of their parents will no longer be a major determinant of their educational outcomes and, by extension, their prospects for the future. We will have addressed the gaps in our employment market, so that the workforce has the skills it needs and that anyone, regardless of their age, health or ability is given a chance to participate in the workplace. West Berkshire's communities will be safer and residents will be more invested in the lives of those around them, as well as their own. Fundamentally, we will have ensured that everyone living in West Berkshire has the best possible start in life and has the opportunity to thrive.



We will have delivered a West Berkshire with a housing mix with something for everyone.

The evidence in this Vision quite clearly suggests that our demographics are projected to shift significantly, with only two working age people per retired person instead of four, as we have now. This will have implications for the number of care beds we require in West Berkshire and may also mean that adaptations will need to be made to homes and neighbourhoods to ensure our ageing population can access services. Our approach to housing will also, however, have sought to redress this generational imbalance and the concerns of our residents that their children would be priced out of the area where they grew up. There will be more affordable housing so that younger people and those on lower incomes can benefit from all that West Berkshire has to offer and so that their children after them will enjoy better outcomes as a result. In short, we will have focussed on providing a range of housing types and tenures that reflects the needs of the future population of West Berkshire.



We will have delivered a West Berkshire that welcomes business, enterprise and industry into a productive, growing and dynamic local economy.

West Berkshire will be even better-connected, with excellent transport links to London, Heathrow and other major locations. It will have become a hub for creativity, which encourages the entrepreneurial ideas of its people. The district will be known as a pro-business area, attracting the jobs and investment that we need to grow. Recruitment issues for our key industries will have been addressed, with significant investment in the skills of our people to meet demand. Through the provision of infrastructure we will have helped our residents to take up the latest and, where applicable, greenest technology that will enhance their lives and allow West Berkshire to compete internationally. In summary, we will have done all we can to secure the economic development the area needs to improve outcomes for all residents.



We will have delivered a West Berkshire where the health and wellbeing of residents of all ages is good.

We have discussed at length the fact that our population is ageing. By 2036 we will have committed to the principle that our residents should not merely be living longer, but living well for as long as possible. The importance of mental and physical health will be recognised, recognising that it can often be difficult to have one without the other. We will also have reduced the health inequalities within West Berkshire, so that where someone is born does not predetermine their health. In doing so, we will improve the wellbeing of our young people, giving them a strong foundation for their lives.



We will have delivered a West Berkshire with both beautiful and diverse natural landscapes and a strong cultural offering.

West Berkshire's cultural and historical assets will have been protected for generations to come but, in reflection of modern life, the way in which they are delivered will have changed. They will have become true community assets, so that the people of West Berkshire are given the opportunity to make a meaningful contribution to their future, so that the role of the past is not forgotten. We will have also done all within our power to mitigate the impact of climate change on our natural environment, making responsible choices in our own energy use and encouraging our residents and visitors to do the same in theirs. In short, we will have retained and enhanced our offering so that it can be enjoyed by as many people as possible. West Berkshire will be, as it is now, a beautiful place to live. Its status as a living landscape within an area of outstanding natural beauty will have been protected so that generations to come can appreciate it, just as those before them have done.



A West Berkshire
where everybody has
what they need to
fulfil their potential

West Berkshire is a well-connected, thriving district with low levels of unemployment, a very well-qualified workforce and, in many areas, a keenly-felt sense of community. Almost all of its schools have been judged good or better by Ofsted, levels of young people not in education, employment or training are lower than the national average and over half of residents have a qualification at degree level or higher. It is also a safe place to live, with crime rates below the national average and very favourable local conditions in the areas proven to drive positive wellbeing.

As with all areas, however, there is need for improvement to ensure that all residents, regardless of their background, are given the same educational, technological and employment opportunities as well as the right to feel safe and nurtured in their communities. It is this that will drive growth and deliver the outcomes our communities need.

Our challenges, our opportunities and our aspirations

Local authority budgets are facing significant pressures, with historically low central government grants leading to reductions in council budgets. Meanwhile, communities are becoming more engaged with their local services.

West Berkshire's communities will decide together what services they see as a priority and will, where they wish to, participate in how they are delivered.

With each generation more technologically capable than the last, there will be a growing demand for online learning as well as a need to acquire new skills, such as coding, that previous generations did not experience.

We will monitor technological change and give the district's young people the skills and equipment they need to compete in our changing world.

Engineering, technology, science and finance are among the areas that are likely to see high employment demand in the future.

We will seek to improve attainment in STEAM (science, technology, engineering, arts and maths) subjects and will explore the use of different educational models, including T Levels and apprenticeships, to meet demand.



In some ways, West Berkshire's levels of social mobility are significantly lower than other areas of the country. There remains a wide gap between the attainment of those on free school meals and those who are not.

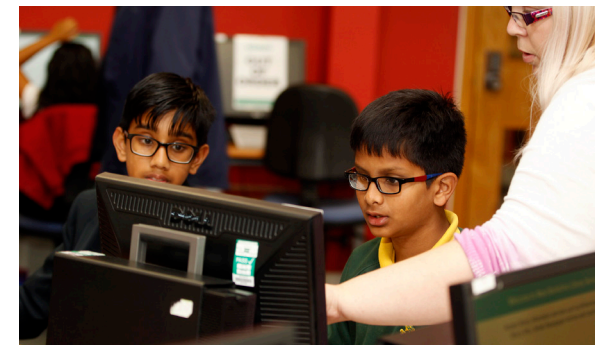
We will seek to become a national exemplar with the best opportunities for social mobility of any local authority area.

There are relatively low employment rates for certain vulnerable groups including those with mental health illness and learning disability when compared with other areas.

We will renew the focus on equality of opportunity and ensure that those who want to are given the chance to enter, or re-enter, the workplace.

There is a significant shift in West Berkshire's age groups and is estimated that by 2036, there will be one retired person for every two working age people.

We will provide an environment where the older generation are encouraged to stay in the work place longer, allowing them contribute to the local economy and their local communities whilst supported and enabled through the use of the best technology.



There has been an upward trend in crime levels in recent years, with the nature of crime changing. Child sexual exploitation, modern slavery, cybercrime and domestic abuse are among the increasingly significant issues.

We will educate residents as to how they can spot, prevent and discourage these crimes as well as taking all necessary action when they do occur.



Extremism has also become more prevalent nationally in recent years, with radicalisation now an increasing issue across the UK.

We will put further measures into place to protect communities, should a threat arise, and ensure that residents are aware of potential threats.

Drug and alcohol abuse also remain a local concern in West Berkshire and are significant contributing factors to crime and poor health.

We will work together to establish the root cause of these specific local concerns.

Social isolation, particularly rural isolation, is a growing concern and is proven to adversely affect personal wellbeing.

We will ensure that all residents are given the opportunity to participate in their communities and can access the services they need.

West Berkshire's
compassionate
commitment to equality
of opportunity and
safe, happy
communities
will remain



By 2036, there is a significant chance that education and training will look very different to the way it does today as a result of emerging technology and a shift towards internationalism in both the workplace and the classroom.

The profile of the population and its communities will change over time, as will attitudes and values, as economic and political events exert their influence. Regardless of this likely change, however, West Berkshire's compassionate commitment to equality of opportunity and safe, happy communities will remain, shaping every decision made by its partners.

We commit to creating a skilled West Berkshire where communities work and grow together.



A West Berkshire with a housing mix with something for everyone

Throughout this document, a recurring theme is that West Berkshire is a desirable place to live. In recent years, almost 10,000 homes have been built in the district, closely matching household growth. It is no wonder that this increase has been necessary, given the district's desirability, and that further homes will have to be built to meet demand in years to come.

With this desirability comes house prices that are significantly higher than those in many areas of the country and issues of affordability, particularly for those on low income. This is further exacerbated by the low level of homes available for affordable rent as well as a lack of social housing stock. To deliver our aspiration for the future, partners must work together to ensure that the homes built in West Berkshire, as well as the accompanying infrastructure, are the ones its residents need, want and can afford.

Our opportunities, our challenges and our aspirations

In recent years, there has been a focus on affordable housing within West Berkshire, as well as indications from central government that local authorities will face tougher requirements on housing delivery or risk losing delegated powers. With changing demographics, high house prices and skills shortages, we risk workers and young people being priced out of the district.

We will explore, and subsequently deliver, the types of homes and tenures required to address skills shortages as well as to encourage younger residents to remain in West Berkshire.

It is estimated that significant investment in homes available for social rent is necessary across the UK, particularly in areas with high rental values and house prices.

We will work together to establish delivery vehicles for appropriate housing for our residents on lower incomes.



Building an energy efficient new two bedroom home creates 80 tonnes of CO₂, which would take many years to cancel out through energy efficient living.

We will consider where existing buildings can be refurbished to create modern homes and business units.

The changing nature of the local population and in particular changing household structure will mean that demand will increasingly be for homes with different designs.

We will monitor these trends and review its approach where needed.

Although the majority of those with learning disabilities wish to live either alone or with friends, there is limited suitable housing available.

We will widen choice and opportunity to access housing that supports continued independence, such as cohousing or home sharing.

With the number of elderly residents requiring care set to increase by 60%, it is estimated that more residential care bed spaces per annum will be needed. Those who choose to stay in their home will be spending more time in their homes, thus requiring adaptations to their accommodation.

We will look to achieve a safe rebalancing of resources from in-hospital to community-based care, carrying out adaptations where necessary, and will encourage innovative approaches to meeting the housing and support needs of older people.



Homelessness, including rough sleeping, has increased in recent years across West Berkshire.

We will look continue to work together to alleviate rough sleeping as soon as possible.

together we will look to ensure that every household can afford to have a safe home and that the homes that are built reflect the future needs of our residents

The index of multiple deprivation indicates that access to services, particularly in our rural areas, can be challenging.

We will understand what facilities new neighbourhoods require to be truly ‘age friendly’ whilst supporting our naturally occurring retirement communities. We will also prioritise access to services essential to the health, wellbeing, education and employment for all residents.

In compiling the new Local Plan, together we will hope to ensure that every household can afford to have a safe home and that the homes that are built reflect the future needs of our residents with respect to care, education, health and employment, rather than more of the same. In doing so, we will allay residents’ concerns that West Berkshire’s communities will become unsustainable as when their children leave home, they will have no option other than to move away as they are priced out of their own area.

In turn, this will contribute to the establishment of communities that are secure, happy and have good standards of wellbeing. This will allow our biggest asset, the people of West Berkshire, to support our economic development objectives and deliver the growth the district needs.

We commit to creating a West Berkshire where residents are properly housed.





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A West Berkshire that
welcomes business
enterprise and industry into
a productive, growing and
dynamic local economy

Situated in the Thames Valley ‘turbo economy’, West Berkshire is, at its core, an ambitious and entrepreneurial district. It is home to over 7000 SMEs and is particularly renowned for its skilled and creative work force, low unemployment and its many locational advantages. Its infrastructure, both in highways and digital, contribute to make the district one of the best-connected areas of the country in terms of access to employment, technology and commercial markets, with excellent- and improving- services.

To sustain this, West Berkshire must cement its status as a dynamic district; one that recognises that we cannot stand still in an increasingly competitive world and that using our natural assets well is essential for our future. In doing so, however, we should also appreciate that the number of jobs in the area outstrips the working population and seek to mitigate this. In short, we must look for a way to take advantage of the opportunities that come our way and renew our focus on delivering infrastructure and economic development initiatives that both meet the demands of modern life and reflect the values and heritage of residents, for it is this that will deliver the inclusive growth needed for the future.

By ensuring we commit to the development of West Berkshire’s economy, we will help to create lively neighbourhoods and a strong and diverse sustainable economic base with much-needed employment land and flexible office space. This in turn will attract investment in cultural and recreational attractions, skills, training and sustainable infrastructure which allows residents to remain economically active and, by extension, to enjoy better health and wellbeing outcomes.

Our challenges, our opportunities and our aspirations

International markets will be opening up with evidence suggesting that 70% on international companies setting up in the UK will look to do so within 1 hour's drive of Heathrow.

We will attract funding for transport links and harness technological advances to ensure that West Berkshire is the destination of choice for these companies.

In line with an increasing recognition of the importance of Corporate Social Responsibility, companies will want to occupy greener buildings with lower emissions.

We will focus on high quality, sustainable builds in which companies are proud to do business.



Automation is likely to transform the way in which goods are delivered and transported.

We will make the best possible use of technology while monitoring the potential impact on the workforce.

Future demand, based on contribution to the local economy and job growth, will likely be in STEAM (science, technology, engineering, arts and maths) areas including digital, engineering, science, business and construction. There will also be increasing demand in hospitality and sales.

We will actively engage with and support these industries in locating premises, employees and partnerships.

With the democratisation of entrepreneurship via crowdfunding platforms, it is likely that opportunities for creativity will increase.

We will consider our role in facilitating this creativity so that those with ideas can work within an environment that enables them to succeed.

The workforce will become increasingly mobile, with traditional business delivery models making way for more at home and online working.

We will invest in infrastructure that will make it the best-connected, as well as one of the most desirable, business locations in the South East.



Recruitment issues in care, hospitality and education will pose problems in West Berkshire because of high housing costs and skills shortages.

We will invest in training and will consider developing low cost housing available for social rent.

Recruitment issues for West Berkshire's 7000 small businesses will continue.

We will support these businesses at every stage, from start-up advice, to location sourcing to ongoing engagement.

Employment projections for the years to 2036 suggest that there will not be enough supply.

We will do all we can to boost the size of the workforce, encouraging people from all demographics to remain economically active and attracting those with the skillsets we need to fill vacancies. We will also concentrate on retaining our talent, so that people who were born in West Berkshire and study elsewhere will aspire to return to live and work here.

Local authorities are expected to raise and spend more of their business rates locally. With this comes increased competition between neighbouring authorities, as business rates collection becomes an even more integral part of delivery of local services. To take advantage of these new powers, West Berkshire must do it all it can to be open for business.

We will be pro-active and explore every single opportunity to expand the district's business offering.

West Berkshire has a shortage of employment land and has not been able to accommodate new business enquiries in recent years. One of West Berkshire's biggest assets is its location within the Wessex Downs AONB. However, this also poses it challenges as one of the district's most marketable locations- the crossroads of the M4 and A34- lies within this area and may not be able to be developed.

We will start a meaningful conversation about how we can develop, including within the AONB where practical, to meet demand.



Use of electric cars is likely to increase exponentially, bringing with it a need for supporting infrastructure, while driverless vehicle technology may become more common.

We will work together to enable residents to take advantage of technological innovation in car use, prioritising the installation of the requisite charging points.

There is likely to be a transport modal shift away from single use car journeys which may, in some areas, decrease demand on our roads.

We will monitor this shift and, where necessary, will influence changes that promote environmental sustainability.

Our major roads are improving, with significant central government investment planned to increase capacity on the M4, addressing demand. Meanwhile, rail electrification will open new markets, with Reading, Heathrow and London more accessible than ever before.

We will work together to ensure that supporting infrastructure around our train stations allows all of our residents and businesses to access these markets so that they compete internationally.



The DfT's Oxford to Cambridge Expressway Strategic Study will include the A34 between the M4 and M40, which will see significant investment in the region.

We will forge closer links with neighbouring areas where this stimulates growth in the district.



The DfT's Oxford to Cambridge Expressway Strategic Study will include the A34 between the M4 and M40, which will see significant investment in the region.

We will forge closer links with neighbouring areas where this stimulates growth in the district.

There are strategic issues with roads managed by the local authority, including the A339 in Newbury, which must be addressed.

We will work together to both pro-actively and reactively address these issues.

Obesity levels, which are likely to increase, may dictate the public's appetite for journeys on foot or on bike.

We will put the pedestrian and the cyclist is at the heart of spatial planning, creating modern walkable and cycleable communities.

we will consider
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investment choices

In other areas of this document, the challenges facing West Berkshire have been discussed. We aspire to meet these head on, developing our economy in a way that is inclusive, green and sustainable. By implementing a comprehensive economic development strategy, West Berkshire will be well-placed to grow in a way that benefits all of its people and will also have the levels of connectivity that are essential to compete on the international stage. It will also make West Berkshire as attractive as possible to younger demographic, skilled workers and high tech industry.

West Berkshire is ambitious and must be well prepared for the future. As partners, we will consider the need for economic development in all we do, we will embrace technological change and we will support strategic investment choices, thereby future-proofing the district for generations to come.

We commit to creating a high tech, well-connected West Berkshire that is open for business.



A West Berkshire where the health and wellbeing of all residents of all ages and backgrounds is good

West Berkshire is generally a healthy, happy place to live. The district's life expectancy, at 81 years for men and 84 years for women, is above both the regional and national averages. By 2036, this is expected to increase by a further four years. The difference between healthy and overall life expectancy is also notably lower than across the South East and England.

These good outcomes should be expected for all residents in a prosperous area such as West Berkshire. However, we know that many people are not living as long as the wealthiest in society and spend longer in ill-health. This needs to change, and we have identified a number of issues and trends which will help address this inequality and ensure that all of our people are not merely living longer, but are living well for longer.

Our challenges, our opportunities and our aspirations

Many people engage in unhealthy behaviours (physical inactivity, poor diet, smoking, high alcohol consumption) leading to illness and early death related to chronic diseases and conditions such as obesity and type 2 diabetes.

We will empower individuals and communities to take greater responsibility for their health and provide support for those who need it.



An increasing number of children are not able to achieve their potential for example due to being overweight or obese from an early age and experiencing poor emotional wellbeing.

We will work with children, families, schools and nurseries to support every child to have the best start in life so they become healthy, resilient adults.

Mental health problems represent the largest single cause of disability in West Berkshire affecting people of all ages.

We will create a stigma-free West Berkshire where people have the tools they need to manage their mental wellbeing, while ensuring high quality services are there to help those who need more support.

There will be an increase in age-related diseases and conditions, putting pressure on our health and social care services.

We will invest in the wellbeing of our elderly residents ensuring that individuals, their carers and families take an active role in their health and wellbeing with greater choice and control over their care.

There are significant health inequalities within West Berkshire, with a life expectancy gap of up to ten years within the district.

We will reduce health inequalities by delivering interventions for everybody, but focussing on those who need more help.

Loneliness and social isolation will become increasingly common which can be damaging to both mental and physical health. Being cut off from social interaction affects people of all ages, especially young people and older adults.

We will work with our communities as equal partners to make the most of existing strengths and facilities to grow social networks and inclusion.

The environment we live in is a key determinant of health and it is increasingly important that we ensure it enables our ability to lead healthy and active lives.

We will put health at the heart of all we do and promote healthy schools, towns and workplaces to enable people to make healthy choices.

Social media has led to an increase in mental health issues and body dysmorphia among young people.

We will educate young people and support them and their families where they feel vulnerable, both on and offline.

Antibiotic resistance will make it harder to prevent and treat infection.

We will work with all partners to raise awareness of the importance of antibiotic resistance.

By 2036, good health and wellbeing will not be a fringe issue or a 'nice to have'. It will be at the heart of everything we do and will be woven carefully into the framework of all of West Berkshire's partners. To achieve this we will adopt a 'health in all policies' approach that will ensure that the decisions we make consider the health of our residents and reducing inequality.

Everyone will be given the opportunity to live a healthy lifestyle and experience the best physical health and emotional wellbeing. A successful, healthy district will, in turn, become a prosperous one. We must protect the health and wellbeing of our people as they are our biggest resource.

We commit to creating a West Berkshire where all residents are healthy and wellbeing is high.



We must protect the health and wellbeing of our people as they are our biggest resource





A West Berkshire with both beautiful and diverse natural landscapes and a strong cultural offering

West Berkshire's diverse environment and historical and cultural offerings are among its strongest assets. They are the reasons why West Berkshire is a popular place to live and have an important role in promoting the health and wellbeing of residents. They are valued and are protected so that they may be available for generations to come.

It is clear, however, that conserving and enhancing these assets will require action, as financial constraints and environmental concerns will become increasingly prevalent.

Our opportunities, challenges and aspirations

There is likely to be a further shift towards renewable energy, as alternatives to fossil fuels become cheaper and more accessible.

We will commit to using renewable energy where possible, thereby reducing their carbon footprint.

Greenhouse gas emissions, particularly CO₂, will continue to have an adverse effect on health and the natural environment.

West Berkshire partners will play their role in reducing CO₂ emissions and will introduce specific mitigation measures in problem areas.



Around 4.4% of the West Berkshire population are exposed to road, rail or air transport pollution during the day and 8.8% are exposed at night. To date, this has not been a source of complaints but should be considered in the future.

We will monitor this issue and take reactive measures where necessary.

There is a growing awareness of the impact of plastic use on our natural environment and our wildlife.

We will consider as partners how the use of materials harmful to the environment, including plastics, can be kept as low as possible.

West Berkshire produces a relatively large amount of household waste compared to the regional and national averages, which may increase still further as economic productivity grows. The area does, however, recycle more than the regional and national average.

We will, through education and incentivisation, encourage residents to make the most environmentally sound choices available and to eliminate unnecessary waste.

Reducing high CO₂ production and working towards a carbon-neutral way of working will be essential.

We will look beyond its borders and, in doing so, will play its part in supporting national and international change through its policies and actions.

Water availability may be an issue, which may have an economic impact on businesses and residents within West Berkshire, with the South East projected to be highly susceptible to supply-demand deficits

We will do all they can to manage demand while maintaining integrity of our supply of fresh water.



Our local government-owned cultural assets, such as Shaw House and the West Berkshire Museum, will remain as an important part of the community.

We will consider how we can further develop these assets and whether the creation of a community cultural and heritage hub is possible.



Our libraries have gone through a period of significant change and are increasingly being run by community-based volunteers.

We will ensure that all of our parishes continue to be empowered to run their libraries in a way that works for them so that become multi-functional hubs, at the heart of the community.

Online shopping is likely to outstrip high street retail, leading to further changes in our town centres.

We will consider how to boost the appeal of our centres, focusing on place-making, and ensure they are desirable to residents and visitors alike.

By 2036, we want to have ensured that the decisions we have made have contributed to a district with a low carbon footprint and one where people are empowered to make the most environmentally-conscious decisions available.

We will also have the best possible cultural offering, which reflects on our shared past and our optimism for the future of West Berkshire, and will have protected our beautiful natural environment so that generations to come can enjoy it as those before them have done.

We commit to sustaining an environmentally-conscious West Berkshire with a strong cultural offering.

We will have the best possible cultural offering, which reflects on our shared past and our optimism for the future of West Berkshire



Conclusion

In the coming years, a range of factors, both within our control and otherwise, will influence the future course of West Berkshire. Demographics will change, the implications of the biggest political change in generations will be manifested and trends will come and go. As partners, we are well-positioned to ensure that this course benefits all of our residents.

Throughout this document, we have identified the challenges facing West Berkshire in years to come, as well as our aspirations for 2036.

We will continue to work together over time to monitor these shifts to pave the way for an inclusive, prosperous, thriving West Berkshire. This may include amending parts of this Vision to reflect new challenges and new aspirations for our shared future.

At the heart of West Berkshire 2036 is our vision for **inclusive growth**. This must be driven by the outcomes of all of the people of West Berkshire and- above all else- it must be sustainable. It is precisely this commitment that will cement the district's status as a fantastic place to live, work and learn for generations to come.

We are ambitious for the future.

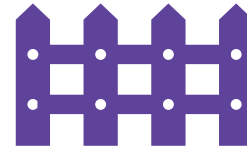
We are ambitious for West Berkshire.

Where we hope to be in 2036



ALL
of schools **good**
or **outstanding**

Housing and services
accessible to all



Newbury is an
internationally
recognised tech hub



Part of
Thames Valley
'Turbo Economy'

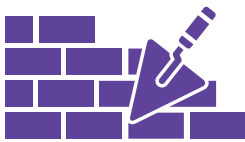


Less than
an hour's
drive or train ride
to Heathrow



3
working age people per
retired person

A range
of housing types
and tenures



A workforce
with a **wide**
range of skills



Best
residential
care in
England

74%
Outstanding
Natural Beauty

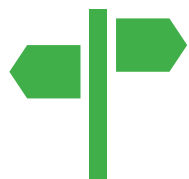


The best
place to be a
woman



Population of
167,000

One of the
happiest
places



Strategic
crossroads
of the South East



High Healthy
Life expectancy



Best
rural broadband



vision@westberks.gov.uk

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