

Notice of Meeting



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Executive

Thursday 19 March 2026 at 6.00 pm

**in the Council Chamber, Council Offices,
Market Street, Newbury**

Note: This meeting can be streamed live here: <https://www.westberks.gov.uk/executivelive>

Date of despatch of Agenda: Wednesday 11 March 2026

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Sadie Owen (Principal Democratic Services Officer) on 01635 519052 e-mail: sadie.owen1@westberks.gov.uk

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



Agenda - Executive to be held on Thursday 19 March 2026 (continued)

| | |
|------------|--|
| To: | Councillors Jeff Brooks (Chairman), Patrick Clark, Heather Codling (Vice-Chairman), Iain Cottingham, Nigel Foot, Denise Gaines, Stuart Gourley, Tom McCann, Justin Pemberton and Vicky Poole |
|------------|--|

Agenda

Part I

| | Pages |
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| 1. Apologies for Absence To receive apologies for inability to attend the meeting (if any). | 5 - 6 |
| 2. Portfolio Holder Announcements A Member of the Executive to provide an update on their Portfolio to Members. | 7 - 8 |
| 3. Minutes To approve as a correct record the Minutes of the meeting of the Executive held on 12 February 2026. | 9 - 16 |
| 4. 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 . | 17 - 18 |
| 5. 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. | 19 - 20 |
| 6. 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. | 21 - 22 |

Items as timetabled in the Forward Plan

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| 7. Motion to Council: decisions following public consultation (EX4761) Purpose: to consider the response to a Motion submitted to Council on 16 October 2025, which proposed 'that where a decision is made contrary to the majority of residents' opinions via a public consultation, then an explanatory statement should be made explaining the reasons for doing so' | 23 - 30 |



Agenda - Executive to be held on Thursday 19 March 2026 (continued)

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| 8. | 2025/26 Performance Report Q3 (EX4712) Purpose: to provide assurance that the priority areas in the Council Strategy 2023-2027 are being managed effectively as at the end of the third quarter (December 2025), and where performance has fallen below the expected level, present information on the remedial action taken and the impact of that action. | 31 - 82 |
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| 9. | Oral Health Needs Assessment Recommendation (EX4773) Purpose: to provide a proposed response to Health and Adult Social Care Scrutiny Committee recommendations related to oral public health. | 83 - 90 |
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| 10. | Children's Mental Health and Emotional Wellbeing - Management Response to Task & Finish Group Recommendations (EX4740) Purpose: the report written by the Children and Young People's Emotional Wellbeing and Mental Health Task and Finish Group, dated July 2025, was prepared to present the findings of a Health Scrutiny Committee Task and Finish Group established to review Children and Young People's Mental Health and Emotional Wellbeing in West Berkshire. This report is written to set out the Council's management response to the Children's Mental Health and Emotional Wellbeing Task and Finish Group recommendations, clarifying respective responsibilities between the Council and health partners, and outlining the limitations on implementation arising from the lack of available resources | 91 - 146 |

Items not timetabled in the Forward Plan

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| 11. | Proposed development of a Resource Base at Victoria Park Nursery School, Newbury Purpose: to seek approval to develop an existing space at Victoria Park Nursery School into a SEND Resource Base, following the formal public consultation period, which ended on 25 February 2026. | 147 - 172 |
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| 12. | Members' Questions Members of the Executive to answer questions submitted by Councillors in accordance with the Executive Procedure Rules contained in the Council's Constitution. | 173 - 174 |

Sarah Clarke

Sarah Clarke
Executive Director: -Resources

Agenda - Executive to be held on Thursday 19 March 2026 (continued)

If you require this information in a different format or translation, please contact Sadie Owen on telephone (01635) 519052.



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Item 1 – Apologies for absence

Verbal Item

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Item 2 – Portfolio Holder Announcements

Verbal Item

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Agenda Item 3.

DRAFT

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

EXECUTIVE

MINUTES OF THE MEETING HELD ON THURSDAY 12 FEBRUARY 2026

Councillors Present: Jeff Brooks (Chairman), Patrick Clark, Heather Codling (Vice-Chairman), Iain Cottingham, Nigel Foot, Denise Gaines, Tom McCann, Justin Pemberton and Vicky Poole

Also Present: Councillors Ross Mackinnon, Dominic Boeck, Richard Somner, Jo Stewart, Howard Woollaston, Clive Hooker, David Marsh, Adrian Abbs, Phil Barnett and Billy Drummond

Officers Present: Melanie Booth (Group Executive), Sarah Clarke (Executive Director – Resources), Paul Coe (Executive Director – Adult Social Care), Shannon Coleman-Slaughter (Service Lead – Financial, Reporting and Property), Joseph Holmes (Chief Executive), Sadie Owen (Principal Democratic Services Officer), April Peberdy (Service Director – Community Services), Thomas Radbourne (Democratic Services Officer), Nicola Thomas (Service Lead – Legal and Democratic)

Apologies for inability to attend the meeting: Councillor Stuart Gourley

1. Minutes

The Minutes of the meetings held on 18 December 2025, and 29 January 2026 were approved as a true and correct record and signed by the Leader.

2. Declarations of Interest

There were no declarations of interest received.

3. Public Questions

A full transcription of the public and Member question and answer sessions is available from the following link: [Transcription of Q&As](#).

4. Petitions

Councillor Phil Barnett presented a petition on behalf of a resident containing 70 signatures which requested the creation of Community Nature Reserve in Newtown Road, Newbury. The petition was referred to officers for review.

5. Medium- Term Financial Strategy: Financial Years 2026-2030 (C4678)

Councillor Jeff Brooks stated that as Agenda Items 6 -10 had already been debated at Resources and Place Scrutiny Committee and would be further debated at Council on 26 February, the Executive would not debate the reports at the meeting but would accept questions of clarification.

Councillor Iain Cottingham introduced and proposed a report (Agenda Item 6), which set out the financial planning assumptions for future years and aligned them with the Council Strategy to ensure that strategic objectives were delivered.

Councillor Ross Mackinnon referred to Figure 2 in the report (core spending impact adjusted for council tax base), and queried whether the 4.99% assumed council tax growth correctly produced the figures shown and suggested that there may be an apparent mismatch and an implied cumulative difference. Shannon Coleman-Slaughter,

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s151 Officer stated that the figures had been lifted from government core spending power data, with additional council tax base reset and adjustments, but committed to check and revert with confirmed figures.

Councillor Mackinnon referred to Figure 8 in the report (revenue budget summary), and queried whether out-year figures reflected stated assumptions for council tax and social care precept. Shannon Coleman-Slaughter clarified that it reflected tax base change methodology and agreed to provide follow-up detail.

Councillor Mackinnon referred to Appendix A (Revenue Support Grant) and queried inconsistencies between the revenue support grant totals and the growth table. Shannon Coleman-Slaughter reported that the figure factored in some ring-fenced grant funding and offered to discuss the matter following the meeting.

Councillor Dominic Boeck requested clarification in relation to the SEND deficit funding. Joseph Holmes, Chief Executive, stated that in 2025/26 the government would fund 90% of the deficit, but beyond that (2026/27–2027/28) the percentage was unclear, and further detail was awaited.

Councillor Adrian Abbs expressed concern at the accuracy of the papers presented.

Sarah Clarke, Monitoring Officer, clarified that if a substantial change were required to the papers between Executive and Council, officers would consider whether it was material enough to require returning to Executive; otherwise, responses to the raised questions would be provided.

Councillor Brooks seconded referral of the report to Council to consider the below recommendation.

Recommendation:

- Unlike the Capital Strategy and Investment and Borrowing Strategy, the Council is not required to establish a Medium-Term Financial Strategy (MTFS). However, it is a matter of best practice to undertake longer-term financial planning in support of the annual budget setting process.
- It is recommended that Council approve the Medium-Term Financial Strategy (MTFS). The MTFS is detailed in this report and appendices.

6. Treasury Management: Investment and Borrowing Strategy (C4679)

Councillor Iain Cottingham introduced and proposed a report (Agenda Item 7), which sought to consolidate the investment and borrowing strategy for the year ahead by detailing how and where the Council would invest and borrow in the forthcoming year, within a particular framework.

Councillor Adrian Abbs raised concerns about the accuracy and certainty of figures within the papers, specifically the Exceptional Financial Support (EFS) requirement and noted the short timeframe to ensure clarity ahead of the forthcoming Council meeting.

Councillor Cottingham clarified that the EFS figure in the report was a borrowing facility up to a specific amount, and that the actual amount would be determined when it was drawn down.

Councillor Jeff Brooks seconded referral of the report to Council to consider the below recommendation.

Recommendation:

- It is recommended that Council approve and adopt the proposed Investments and Borrowings Strategy for 2026/27.

7. Capital Strategy and Supporting Programme: Financial Years 2026/27 - 2029/30 (C4681)

Councillor Iain Cottingham introduced and proposed a report (Agenda Item 8), which outlined the Capital Strategy period and the supporting funding framework, providing a high-level overview of how capital expenditure, capital financing and treasury management activity contributed to the provision of local public services along with an overview of how associated risk was managed and the implications for future financial sustainability.

Councillor Ross Mackinnon referred to the Executive meeting on 25 September 2025 which had agreed a £1.2m allocation (profiled £600k in 2025/26 and £600k in 2026/27) for a 3G pitch at Faraday Road and queried why the project did not appear in the capital programme for 2026-2027. Shannon Coleman-Slaughter, s151 Officer, clarified that whilst the provision was set up in the current financial year, it was expected to slip into 2026/27 and was described as externally funded. Shannon Coleman-Slaughter acknowledged that for transparency the project would be restated in the following year's budget to show the expected slippage.

Councillor David Marsh referred to a new primary school at Sandalford and queried why the majority of its funding was not reflected until 2030/31, when the developer Bloor Homes had indicated that the school would be built much earlier. Councillor Denise Gaines commented that developer discussions had focused on infrastructure and roads and had not provided an indication as to when the school would be built. Councillor Jeff Brooks promised to revert with clarification.

Councillor Adrian Abbs queried why the Grazeley Solar Farm project was not included within the report. Councillor Cottingham responded that the solar farm was profiled in the current year and would be reprofiled depending on business case checks.

Councillor Brooks seconded referral of the report to Council to consider the below recommendation.

Recommendation:

- It is recommended that Council approve the Capital Strategy appended to this report and its sub appendices:
 - Appendix A – Capital Strategy
 - Appendices B & C – Capital Programme for financial years 2026/27-2029/30
 - Appendix D – Flexible Use of Capital Receipts Policy

8. Financial Year 2026/27: Revenue Budget (C4680)

Councillor Iain Cottingham introduced and proposed a report (Agenda Item 9), which detailed the budget proposals for financial year 2026/27 and supporting Council Tax proposals and resolutions.

Councillor Jeff Brooks seconded referral of the report to Council to consider the below recommendation.

Recommendation:

Council Tax

- That Council approves the 2026/27 Council Tax requirement of £136.28 million, requiring a Council Tax increase of +2.99% with a +2.0% Council Tax precept ringfenced for Adult Social Care.

Revenue Budget

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- That the proposed General Fund net budget requirement of £210.9 million itemised in Appendix B is approved.
- That the fees and charges disclosed in Appendix C are approved.
- That the proposed savings disclosed in Appendix F and investments disclosed in Appendix E are approved.
- To note that a budget consultation was undertaken between 1st December 2025 and 12th January 2026. The consultation responses are disclosed in Appendix I.
- To note the Dedicated Schools Grant (DSG) allocations totalling £139.99 million and agree that the schools block of £74.09 million is allocated to schools using the local formula agreed by The Schools Forum on 19th January 2026. The outline DSG budget by block is detailed in Appendix H. Members are asked to note that the expenditure budget set is more than income funding available, and it is therefore anticipated that the cumulative High Needs Block (HNB) deficit will be increased by +£16.98 million in 2026/27 to £31.53 million. The cost of financing the HNB is factored into the revenue capital financing requirement for 2026/27 and drives part of the Council's EFS request.
- That the Executive ratifies the EFS request to Central Government of £50 million, split between £20 million attributable to 2025/26 to provide resilience to the reserves position, and £30 million required to balance the 2026/27 revenue budget.
- It is further proposed that Council approve a 100% Council Tax discount for Care Leavers aged 18- 25 who reside in West Berkshire.

9. **2025/26 Q3 Financial Performance Report (EX4676)**

Councillor Iain Cottingham introduced the report (Agenda Item 10), which reported the financial performance of the Council's Revenue and Capital budgets following the Q3 2025/26 outturn.

It was noted that there was an £8.5 million overspend, which was £1.7 million worse than at Q2, and with a forecast year-end net revenue outturn of £192 million versus an original budget of £183.4 million.

Councillor Cottingham explained that the main causes of the overspend were Adult Social Care pressure with both volume and price increases as the key pressures; and Children's Services pressure with increased costs due to high-cost residential placements.

Councillor Jeff Brooks adjourned the meeting for 10 minutes to speak privately with Councillor Ross Mackinnon. Councillors Richard Somner, Jo Stewart, Clive Hooker, David Marsh and Adrian Abbs left the meeting during the adjournment.

Councillor Mackinnon noted the demand growth in Adult Social Care and pressures in Children's Services, and queried what changes were being made to financial modelling to avoid a repeat of the scale of overspend. Councillor Brooks responded that provider price inflation was far higher than anticipated.

Paul Coe, Executive Director Adult Social Care, commented that market-management work was underway with providers with an aim to improve general efficiency, competition and innovation.

RESOLVED that: Executive were informed

- Revenue: The forecast Q3 revenue outturn is £8.5m/ 4.5% adverse to Budget. Total net revenue is forecast at £192.0m in the Q3 outturn, vs £183.4m in the Budget.
- Capital: Following the Q2 reprofiling of £22.5m of capital budget, approved by the S151 officer in consultation with the portfolio holder for Finance, the revised position at Q3 for the expected capital expenditure in 2025/26 is £50.8m against an updated

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budget of £59.2m resulting in an underspend of £8.4m. Members are also informed of the budget adjustments to the 2025/26 capital programme

10. **Contract for Award Under Delegated Authority from Executive (EX4751)**

As Councillor Vicky Poole was not present in the Chamber, Councillor Jeff Brooks proposed the recommendations within the report.

Councillor Poole introduced the report (Agenda Item 11) which detailed forthcoming supply, service and works contract awards that would have a contract value in excess of £2.5m and as such would require approval from Executive during the next quarter.

Councillor Ross Mackinnon queried which board governed and had oversight of the procurement process. Councillor Poole responded that there was a Procurement Board, of which she was a member, and that the precise governance route would depend on the contract value and duration.

Councillor Mackinnon raised concerns about an apparent conflict of interest linked to Councillor Poole's professional activity. Sarah Clarke, Monitoring Officer, commented that Members were bound by the Code of Conduct and it was for individual Members to consider whether they were conflicted and act accordingly. Further it was noted that there was a formal process for raising complaints should someone believe a Member had acted inappropriately.

Councillor Poole responded that she declined any work connected to West Berkshire (and most Berkshire agencies) and that clients were checked for any West Berkshire contracts prior to engaging, and she offered to share details with the Monitoring Officer.

Councillor Howard Woollaston queried whether there was sufficient detail behind the contract awards and referred to past practice where contract awards had more detailed reporting. Councillor Brooks acknowledged the point and said the Council would ensure more detail and clarity on individual contracts going forward.

Councillor Iain Cottingham seconded the recommendations within the report.

RESOLVED that: Executive

- Delegate authority to the relevant Service Director in consultation with the Section 151 Officer and Portfolio Holder to proceed with award of the forthcoming contract that has been identified in this report for award approval during the next quarter of the financial year.
- Delegate authority to the Service Lead - Legal and Democratic in consultation with the relevant Service Director to finalise the terms of any agreement as set out in the procurement documents and make any necessary drafting or other amendments (such amendments not to be substantial or material) to the terms of the agreement necessary to produce a final agreement for execution and to enter into that agreement.

11. **2025/26 Performance Report Q2 (EX4710)**

As Councillor Vicky Poole was not present in the Chamber, Councillor Jeff Brooks proposed the recommendations within the report

Councillor Poole introduced the report (Agenda Item 12), which provided assurance that the priority areas in the Council Strategy 2023-2027 were being managed effectively as at the end of September 2025, and where performance had fallen below the expected level, detailed remedial action taken and the impact of that action,

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Councillor Brooks noted that the format and layout of the report was being improved over time, and that the report now increasingly included not just RAG status but also what the remedial actions were being taken.

Councillor Heather Codling referred to high priority measure HP2 (eligible 2-year-olds taking up free nursery entitlement) and reported that significant outreach work had been undertaken including contacting families, and working through family hubs, libraries, and communications to encourage take-up.

Councillor Brooks referred to pothole repairs and highlighted that Q1 performance was affecting the overall position, but the trend had improved strongly.

Councillor Dominic Boeck referred to HP2 and queried whether analysis had been undertaken by geography and socio-economic group, including whether the issue was worse in rural wards. Councillor Codling agreed to revert back with data.

Councillor Nigel Foot further added that the matter was also a priority of the Health and Wellbeing Board which was focusing on reviewing early years and deprivation/rural isolation.

Councillor Ross Mackinnon queried why there were no metrics relating to recycling. Beatriz Teixeira, Performance Research and Consultation Manager, commented that the main report focused on exceptions (amber or red indicators), but was confident that there was a recycling KPI in the 'green list', and would circulate to Members following the meeting.

Councillor Iain Cottingham seconded the recommendations within the report.

RESOLVED that: Executive

- To note the progress made in delivering the Council Strategy Delivery Plan 2023-2027 priorities scheduled for this financial year.
- To review those areas where performance is below target i.e., reporting as 'Red' or 'Amber', and note that the appropriate remedial action is in place.
- To approve the updated list of High Priority measures, which refer to the Areas of Focus for the implementation of the Council Strategy

12. **Expansion, remodelling and development of the SEND (McKee) Resource Unit (Phase 1) at Westwood Farm Schools Federation (EX4766)**

Councillor Heather Codling introduced and proposed a report (Agenda Item 13), which sought approval for the expansion and remodelling of the McKee Resource Unit at Westwood Farm Schools Federation, increasing its capacity from 12 to 18 places and extending provision to Key Stage 2.

Councillor Dominic Boeck commended the proposal and queried whether there were the necessary resources to support the expansion. Councillor Codling acknowledged challenges in recruiting specialist SEND staff but expressed confidence due to the existing experienced staff and the unit being an expansion.

Councillor Denise Gaines seconded the recommendations within the report.

RESOLVED that: Executive

- Approves the expansion and remodelling of the McKee Resource Unit at Westwood Farm Schools Federation from 12 to 18 places, including the extension of provision into Key Stage 2.

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- Notes that the proposal supports the Council's SEND Sufficiency and Inclusion Strategy, delivering cost avoidance through reduced reliance on independent and out-of-area placements.
- Delegates authority to the Head of SEND, in consultation with the Portfolio Holder for Education, to oversee the implementation and ongoing monitoring of the expanded provision.

13. Members' Questions

A full transcription of the public and Member question and answer sessions is available from the following link: [Transcription of Q&As](#).

(The meeting commenced at 6.00 pm and closed at 7.40 pm)

CHAIRMAN

Date of Signature

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Item 4 – Declarations of Interest

Verbal Item

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Executive – 19 March 2026

Item 5 – Public Questions

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Executive – 19 March 2026

Item 6 – Petitions

Verbal Item

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Motion to Council: decisions following public consultation

| | |
|---|---|
| Committee considering report: | Executive |
| Date of Committee: | 17 March 2026 |
| Portfolio Member: | Councillor Vicky Poole |
| Date Portfolio Member agreed report: | 22 January 2026 |
| Report Author: | Martyn Sargeant, Service Director – Strategy and Governance |
| Forward Plan Ref: | EX4761 |

1 Purpose of the Report

- 1.1 To consider the response to a Motion submitted to Council on 16 October 2025, which proposed ‘that where a decision is made contrary to the majority of residents’ opinions via a public consultation, then an explanatory statement should be made explaining the reasons for doing so’. A copy of the full Motion is attached as appendix A.

2 Recommendations

- 2.1 That the Executive is informed that The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 require local authorities to provide a record of relevant decisions, the reasons for decisions and any options considered but rejected.
- 2.2 That the Executive resolves to strengthen how the outcomes of consultations are reported through the Council’s consultation database.

3 Implications and Impact Assessment

| Implication | Commentary |
|------------------------|---|
| Financial: | There are no financial implications arising from this decision. The approach proposed is already managed within the Council’s existing resources. |
| Human Resource: | None. |

Motion to Council: decisions following public consultation

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| Legal: | The rationale for the proposed decision is in accordance with The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the Local Government Act 1972 and the Openness of Local Government Bodies Regulations 2014. | | | |
| | Sarah Clarke, Monitoring Officer, 23 Dec 2025 | | | |
| Risk Management: | No new risks have been identified in relation to the proposed decision. | | | |
| Property: | None. | | | |
| Policy: | None. | | | |
| | Positive | Neutral | Negative | Commentary |
| Equalities Impact: | | | | |
| A Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality? | | X | | There are no equalities implications arising from the proposed decision. Individual decisions made by the Council are subject to consideration of the equality implications. |
| B Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users? | | X | | |
| Environmental Impact: | | X | | None. |
| Health Impact: | | X | | None. |

Motion to Council: decisions following public consultation

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|-------------------------------------|--|---|--|--|
| ICT Impact: | | X | | None. |
| Digital Services Impact: | | X | | None. |
| Council Strategy Priorities: | X | | | This decision supports the strategy priority 'Services we are proud of' and the goal within it to 'treat our residents with respect, be transparent in our decision-making'. |
| Core Business: | | X | | This relates to business as usual, as the Council routinely publishes its decisions and the reasons for them. |
| Data Impact: | | X | | None. |
| Consultation and Engagement: | As the report relates to a general working principle rather than a specific issue, and was referred to the Executive by Council, no public engagement has been undertaken. | | | |

4 Executive Summary

- 4.1 Transparency is a key principle of public life and administration – openness is one of the seven Nolan Principles (standards in public life). The Motion presented to the Council in October 2025 seeks to uphold that and ensure the public is informed about the decisions made on its behalf by the Council and the reasons for them.
- 4.2 Transparency in local authority decision-making is underpinned by The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, which set out the requirements for publicising key executive decisions. This is a legal requirement for the Council to which it already adheres. Although the decisions of Full Council sit outside the scope of the legislation, a similar approach has been adopted, publicising information related to those decisions as well, in accordance with the Local Government Act 1972 and the Openness of Local Government Bodies Regulations 2014.
- 4.3 Whilst the Council will welcome any opportunity to uphold openness and enable the public to understand options considered and decisions made, the information for publication suggested in the Motion is already routinely published for all decisions, whether supported by public consultation or not. Consequently, a further statement reiterating the same information is not required. However, there is scope to make a clearer link for the public so they can see whether and how consultation has informed the decision-making process.

5 Supporting Information

Background

- 5.1 At the Council meeting on 16 October 2026, a Motion was presented advocating that an explanatory statement should be published when a decision is made that is contrary to the option preferred by public consultation. The Council referred the Motion to the Executive for more detailed consideration. This report sets out the proposed response to the Motion and rationale for it.
- 5.2 The Council routinely consults on a wide range of issues. During 2024/25, there were 35 public consultations via the Council's consultation portal (2023/24: 43). This included consultations on the draft waste management strategy in 2024/25 and the draft domestic abuse strategy in 2023/24. So far in 2025/26, there have been 28 public consultations, including on the potential proposals for local government reorganisation in Berkshire/Oxfordshire. This is in addition to regular consultations required on regulatory matters (planning, licensing, etc.).
- 5.3 The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 set out requirements for all councils in relation to executive decision-making. In particular, Part 4, s12 states:
- 12.— (1) As soon as reasonably practicable after any meeting of a decision-making body at which an executive decision was made, the proper officer, or if the proper officer was not present at the meeting, the person presiding, must ensure that a written statement is produced for every executive decision made which includes the information specified in paragraph (2).*
- (2) The statement referred to in paragraph (1) must include—*
- (a) a record of the decision including the date it was made;*
 - (b) a record of the reasons for the decision;*
 - (c) details of any alternative options considered and rejected by the decision-making body at the meeting at which the decision was made;*
 - (d) a record of any conflict of interest relating to the matter decided which is declared by any member of the decision-making body which made the decision; and*
 - (e) in respect of any declared conflict of interest, a note of dispensation granted by the relevant local authority's head of paid service.*
- 5.4 Section 13 goes on to reiterate these requirements for individual executive decisions.
- 5.5 After an Executive decision-making meeting (individual or by the Executive members acting collectively), the Council publishes both the minutes of the meeting, which set out a summary of the discussion leading to a decision, together with a decision statement. This is in addition to the report published in advance of the meeting, which sets out the detail of any proposal, together with analysis of its implications, a summary of any related consultation and an explanation of alternative options considered. All of

Motion to Council: decisions following public consultation

this information is available on the Council's website and also in hard copy for public inspection. Together, these practices broadly fulfil the objectives of the Motion.

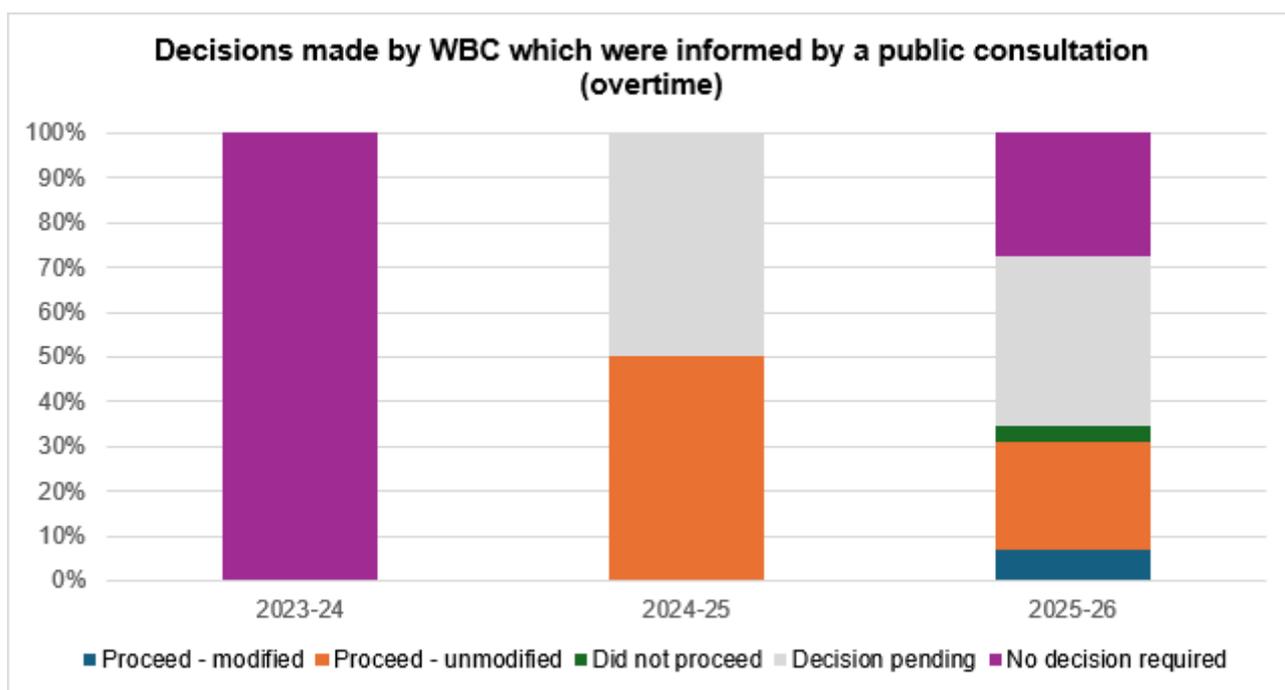
5.6 The Council's web-based database provides a comprehensive overview of consultations undertaken, providing details of the background, any proposals, the implications and impact, how somebody can contribute and what will happen following the consultation. However, it's not possible to see at a glance, looking at the list of consultations, what the broad outcome was in relation to the public's feedback. This can be easily rectified by categorising each consultation with an outcome as follows:

- Proceed - modified: proposal amended following consultation feedback.
- Proceed - unmodified: implemented as originally proposed following consultation.
- Did not proceed – this may be linked to the consultation or for other reasons.
- Decision pending: yet to be determined.
- No decision required: not linked to a specific decision but providing contextual feedback that informs future service delivery.

Proposal

5.7 In light of the Council's existing approach, set out above, which is in accordance with the legal framework, it is considered that producing a further statement providing the same information is unlikely to be any more helpful to members of the public. This could, potentially, create confusion by having multiple sources of the same material.

5.8 However, in order to enable members of the public to more easily understand the decision that has arisen following consultation, the published list can be given an outcome classification. A graph (example below) will be placed on the consultation page to provide a summary, with a link to more detail on the outcomes in relation to individual consultations.



Motion to Council: decisions following public consultation

5.9 The legislative requirements set out above only relate to Executive decision-making and not to any decisions reserved to the Council. However, the Council adopts a similar approach, making reports relating to decisions available publicly, which detail alternative options considered and, once a decision is made, minutes of the meeting summarising that decision. This is in accordance with the legal framework detailed above.

6 Other options considered

6.1 The current arrangements could be maintained as explanatory information is already provided to the public, meeting the legislative requirements.

6.2 It would be possible for the Council to issue an additional statement setting out information relating to the decision, the alternative options considered and the rationale for that decision. However, this option was rejected as it represented duplication of information already made available to the public.

7 Conclusion

7.1 The Council welcomes any opportunity to communicate more effectively with residents and to support understand of decisions made about West Berkshire. Whilst the motion is therefore welcomed, providing duplicate information is not considered to be helpful for members of the public but it has highlighted a simple way in which the Council can communicate more effectively.

8 Appendices

8.1 Appendix A – Motion to Council, 16 October 2025

Background Papers:

None

Subject to Call-In:

Yes: No:

Wards affected: All

Officer details:

Name: Martyn Sargeant
Job Title: Service Director – Strategy and Governance
Tel No: 01635 503076
E-mail: martyn.sargeant1@westberks.gov.uk

Motions submitted for debate at the Council meeting on 16 October 2025

(d) The following Motion has been submitted in the name of Councillor Ross Mackinnon:

That where a decision is made contrary to the majority of residents' opinions via a public consultation, then an explanatory statement should be made explaining the reasons for doing so

1. This Council considers that individual members, the Executive, and the Council itself should always be honest and transparent with, and accountable to, the residents of West Berkshire.
2. This Council notes with approval that the foreword to the Liberal Democrats' manifesto for the 2023 West Berkshire Council elections included the following commitment:

"A Liberal Democrat administration will be one that listens to you, and gives you a real say in the decisions that affect our area."

3. This Council recognises that in the event that:
 - i. residents are asked for their views on a particular proposal or policy via a public consultation, and
 - ii. residents' responses indicate a majority either for their approval or for their disapproval of that proposal or policy, and
 - iii. following the consultation process the relevant decision-making body (Council, Executive or Individual Executive Member) makes a decision not in accordance with the majority of residents' responses, then

there is a risk that public trust in the Council, the public's feeling that they are listened to, and the public's feeling that they have a real say in the decisions that affect our area, will be diminished.

4. This Council therefore considers that in the event a decision is made contrary to the majority of residents' opinions expressed via a public consultation, then a statement should be published on the Council's public website no more than 14 days after the making of the decision, written by:
 - the Chairman of Council in respect of a Council decision, or
 - the Leader of the Council in respect of an Executive decision, or
 - the relevant Individual Executive Member in respect of an Individual Executive Member decision,

clearly informing residents that a decision has been made contrary to the majority of residents' opinions expressed via a public consultation, and explaining the decision-maker's rationale for making that decision not in accordance with that majority of residents' opinions.

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2025/26 Performance Report Q3

| | |
|--------------------------------------|------------------------|
| Committee considering report: | Executive |
| Date of Committee: | 19 March 2026 |
| Portfolio Member: | Councillor Vicky Poole |
| Report Author: | Beatriz Teixeira |
| Forward Plan Ref: | EX4712 |

1 Purpose of the Report

- 1.1 To provide assurance that the priority areas in the [Council Strategy 2023-2027](#) are being managed effectively as at the end of the third quarter (December 2025), and where performance has fallen below the expected level, present information on the remedial action taken and the impact of that action.

2 Recommendations

- 2.1 To note the progress made in delivering the Council Strategy Delivery Plan 2023-2027 priorities scheduled for this financial year.
- 2.2 To review those areas where performance is below target i.e., reporting as ‘Red’ or ‘Amber, and note that the appropriate remedial action is in place.
- 2.3 To note an error in the previously reported target date for the High Priority measure HP18 Undertake a strategic asset review with associated disposal plan, which should read 31/03/26 not 31/01/26.

3 Implications and Impact Assessment

| Implication | Commentary |
|-------------------------|---|
| Financial: | To be highlighted and managed by individual services. |
| Human Resource: | To be highlighted and managed by individual services. |
| Legal: | To be highlighted and managed by individual services. |
| Risk Management: | To be highlighted and managed by individual services. |

| | |
|------------------|---|
| Property: | To be highlighted and managed by individual services. |
| Policy: | To be highlighted and managed by individual services. |

| | Positive | Neutral | Negative | Commentary |
|--|----------|---------|----------|--|
| Equalities Impact: | | | | |
| A Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality? | | X | | |
| B Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users? | | X | | |
| Environmental Impact: | | X | | |
| Health Impact: | | x | | |
| ICT Impact: | | x | | |
| Digital Services Impact: | | x | | |
| Council Strategy Priorities: | x | | | Supports all priorities areas of the Council Strategy 2023-27. |

| | | | | |
|----------------|---|---|--|--|
| Core Business: | x | | | |
| Data Impact: | | x | | |

| | | | | |
|------------------------------|---|--|--|--|
| Consultation and Engagement: | The information provided for this report, has been submitted for sign-off by the relevant Service Directors before its submission into the Executive reporting cycle. | | | |
|------------------------------|---|--|--|--|

4 Executive Summary

- 4.1 This paper provides assurance on year-to-date performance as at the end of the December 2025 (Q3) for measures used to monitor the [Council Strategy Delivery Plan 2023-2027](#). It contains two main sections: **Council Strategy Delivery Plan (CSDP)**, and **Core Performance Indicators (CPI)**.
- 4.2 The remaining sections contain a brief analysis of the contextual measures themed as Economy, Social Care and Place, and assurance of overall corporate health with regards to turnover, sickness absence and completion of mandatory training.

5 Council Strategy Delivery Plan (CSDP) Progress Update: High Priority Measures

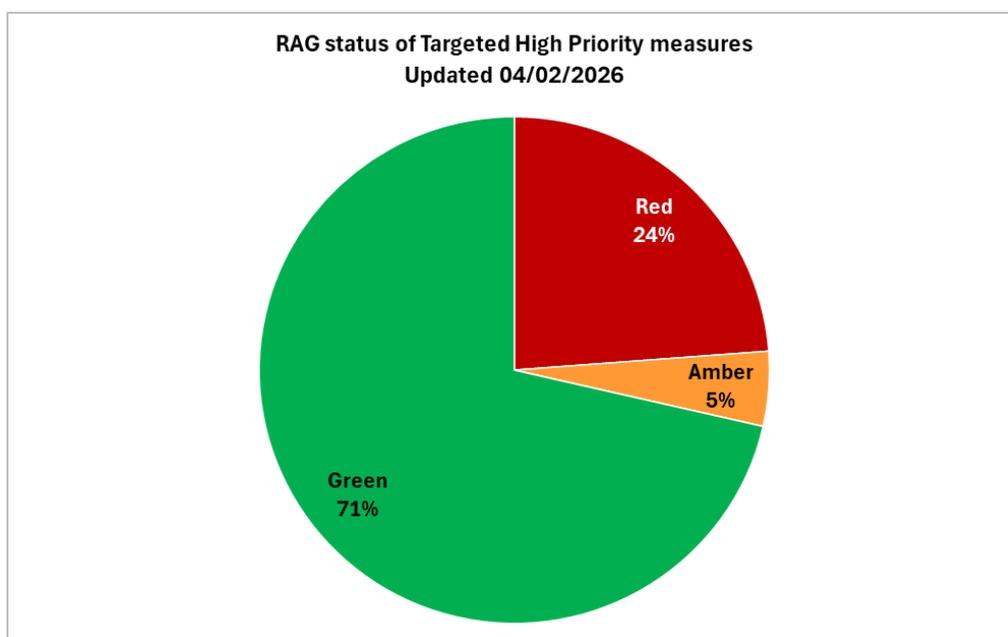


Figure 1. Year-to-date status of High Priority Measures

- 5.1 From the 22 High priority measures, 21 are targeted. Among the targeted measures, 15 were reported as Green, 1 as Amber and 5 as Red.

5.2 The following cards show the year-to-date progress for each of the 22 High Priority measures. The direction of travel icon in each card shows the progress compared to last quarter.

HP1

No. of weeks taken to be assessed by the Emotional Health Academy (Average)

3.7 

Target 6

HP2

% of eligible 2-year-olds on DWP list accessing free nursery entitlement¹

65.6% 

Target = 75%

HP3

% of Persistent Absentee pupils (10% or more possible school sessions missed) (Annual)

15.1%

Target = 19.5%

HP4

% of 16–17-year-olds participating in education or training

90.1% 

Target = 95%

HP5

No. of affordable homes completed and ready for occupation

134 

Target = 112

HP6

Refresh the Playing Pitch Strategy

Behind schedule

Target = 30/06/2025

HP7

Commission the next phase of the Thatcham Community Hub feasibility

Completed in October 2025

Target = 31/12/2025

HP8

Develop a Delivery Plan for Newbury Town Centre from the Master Plan

On schedule

Target = 31/03/2026

HP9

Complete the second phase of works on Newbury Wharf

On schedule

Target = 31/03/2026

HP10

% of permanent pothole/road edge repairs completed within 28 days of order date, excl. exemptions

89.2% 

Target = 95%

HP11

Go live with Grazeley solar farm

Behind schedule

Target = 31/12/2025

HP12

No. of additional kWp installed for generating renewable energy

594 

Target = 450/year

HP13

Submit Planning Application for the replacement of the sheet piling on the north side of the canal

On schedule

Target = 31/03/2026

HP14

Complete the construction work to replace the sheet piling on the north side of the canal

On schedule

Target = 31/12/2026

HP15

% of referrals allocated in the previous 12 months without any waiting time (rolling 12 months)

61.5%



Target = 60%

HP16

% of new customers who concluded Reablement and need no ongoing care from the Council

66.1%



Target = 60%

HP17

Develop and adopt the Corporate Transformation Programme

On schedule

Target = 31/03/26

HP18

Undertake a strategic asset review with associated disposal plan

On schedule

Target = 31/03/26

HP19

No. of attendances at Outreach sessions (i.e. locations other than Leisure Centres)

3,074

Not targeted - baseline monitoring

HP20

Complete the work of the Policy Development Group on Viable Villages and consider the recommendations

On schedule

Target = 31/07/2026

HP21

Develop and deliver a Rural Business Forum

Completed in September 2025

Target = 31/12/2025

HP22

Commission and complete a marketing exercise for Bond Riverside

Behind schedule

Target = 31/12/2025

- 5.3 Notable achievements in this quarter were: the **completion of the commissioning phase of the Thatcham Community Hub project**, the time taken to be assessed by the Emotional Health Academy was shortened from an average of 5.1 weeks to **3.7**, the **annual rate of persistent absenteeism in West Berkshire Schools was better than last year's national average (19.5%), at 15.1%**.
- 5.4 For an explanation of the measure categories and the RAG rating methodology, please refer to Appendix D: Purpose and Methodology.

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|----------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP2 % of eligible WB 2-year-olds on DWP list accessing free nursery entitlement | 75% | (176 / 285) 61.8% | Red | 75% | 61.6% | Red | 75% | 61.6% | Red | 75% | 65.6% | Red |

Education and SEND Department (People (CFS) Directorate)

YTD: 164 / 250

Context:

If eligible for the families receiving additional support (FRAS) 2-year-old funding and WPE (working parent entitlement) then the eligibility for both is recorded. Our experience has been that families entitled to FRAS are often slower to seek places and sometimes are unable to secure places at their preferred provider. Some providers prefer offering places to parents with WPE as they may have had their children in their setting from 9 months old and consider that these parents are more likely to take up additional hours over and above the entitlement funding.

The Early Years Team sends out emails to potentially eligible families as soon as the information is received from DWP/DfE. We currently have 17 2-year-olds who are receiving WPE (working parent entitlement) who also have an eligible EYPP check. These children would have also been eligible for the 2-year-old funding (the earnings threshold for EYPP is actually lower, so there could be more than just these children eligible) however the parents have not applied for the 2-year-old funding, as they are now deciding to apply straight for the WPE, which gives them 30 hours of funding vs 15.

Moving forward:

Going forward, we are considering whether we could add a section to the parent declaration form, to get parents' consent for a 2 year old funding check (similar to what we currently have for the EYPP consent check) so we can perform these checks on the parents/providers behalf, so these children can also be counted towards the additional support 2 year old funding figures.

Family Hubs will be encouraged to increase their support to potentially eligible families to apply for the FRAS funding. We will send additional comms to Early Years Providers.

As most children are in their places for this term, the expectation is that there will not be much of a change in the position by year-end.

2025/26 Performance Report Q3

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|--------------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP4 % of 16- to 17-year-olds participating in education and training | 95% | (3,533 / 3,848) 91.8% | Amber | 95% | 90.7% | Amber | 95% | 90.4% | Amber | 95% | 90.1% | Red |

Education and SEND Department (People (CFS) Directorate):

YTD: 3,561/3,953

Context:

Updated to reflect December NCCIS return. National comparisons to follow (not available until 25th January). Factors include significant decrease in low level provision from all local FE providers leading to a low initial starting rate of participation, challenges around the SEN cohort and downturn in opportunities within apprenticeships meaning any young people leaving education from December onwards struggle to access further education/training.

Moving forward:

Further Education settings are being challenged to broaden their curriculum to provide accessible courses for those with lower qualifications. We are also supporting West Berkshire Training Consortium to expand their capacity on their Great Start programme to take on more young people. Schools are being pressed to be more diligent and systematic with those leaving school this year to ensure options for their young people are realistic and achievable. Further Education settings are being challenged to broaden their curriculum to provide accessible courses for those with lower qualifications. We are also supporting West Berkshire Training Consortium to expand their capacity on their Great Start programme to take on more young people.

Currently, there is no additional education provision until September 2026, as such the number of NEET young people is likely to continue to increase over the remainder of the academic year.

2025/26 Performance Report Q3

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|--------------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP6 Refresh the Playing Pitch Strategy (30/06/25) | Jun-25 | On track | Green | Jun-25 | Feb-26 | Red | Jun-25 | Feb-26 | Red | Jun-25 | Mar-26 | Red |
| <p>Community Services Department (Place Directorate)</p> <p><u>Context:</u> The public consultation will close at the start of January.</p> <p><u>Moving forward:</u> Following review of feedback, the final Strategy is due to be considered by Executive on 19 March 2026. To note – the scope of the project has expanded from a refresh of the existing 2019 strategy, to develop a completely new 2026-2041 strategy, following feedback from stakeholders, and the completion date has been adjusted accordingly. Two new artificial pitches have been delivered at Cotswold Sport Centre and Henwick Worthy.</p> | | | | | | | | | | | | |
| HP10 % of permanent pothole/road edge repairs completed within 28 days of order date, excl. exemptions | 95% | (1,818 / 2,084) 87.2% | Red | 95% | 76.8% | Red | 95% | 84.2% | Red | 95% | 89.2% | Red |
| <p>Environment Department (Place Directorate):</p> <p>YTD: 995 / 1,115</p> <p><u>Context:</u> Supply chain issue in Q1 still affecting YTD figure. Performance for Q2 and Q3 actuals have been above the target at 99.6% and 100% respectively. Unfortunately, this has not been enough to raise the cumulative year to date figure above the 95% target.</p> <p><u>Moving forward:</u> Action plan put in place by contractor still effective as performance was 100% for this indicator in Q3. If current performance maintained, it is anticipated that year end will be at least 90%. Mitigation and contingency put in place by the Council's Contractor, Volker Highways, will continue to be monitored weekly</p> | | | | | | | | | | | | |

2025/26 Performance Report Q3

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP11 Go live with Grazeley solar farm (31/12/25) | May-25 | Delayed | Red | Dec-25 | Mar-26 | Amber | Dec-25 | Oct-26 | Red | Dec-25 | Oct-26 | Red |

Environment Department (Place Directorate):

Context:

Successful procurement exercise has been completed, however the rise in interest rates and the fall in green energy wholesale prices is impacting on the viability of the scheme. A full review of the business case must be undertaken prior to a contractor being appointed to ensure the scheme remains viable. This is currently being undertaken and will be reported through Executive.

Moving forward:

Alternative off-take options for the electricity and procurement options are being considered as part of the business case review.

| | | | | | | | | | | | | |
|---|-----|-----------------|-----|--------|--------|-------|--------|--------|-------|--------|--------|-------|
| HP22 Commission and complete a marketing exercise for Bond Riverside (31/12/25) | n/a | New for 2025/26 | n/a | Dec-25 | Dec-25 | Green | Dec-25 | Dec-25 | Green | Dec-25 | Jan-26 | Amber |
|---|-----|-----------------|-----|--------|--------|-------|--------|--------|-------|--------|--------|-------|

Development and Housing Department (Place Directorate):

To ensure it was meaningful, the marketing exercise was extended until 16 January 2026, as it included the Christmas stand-down period.

2025/26 Performance Report Q3

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|-------------------|---------------|----------------|-------------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP1 No. of weeks taken to be assessed by the Emotional Health Academy (Average) | 6 | 6 | Green | 6 | 5.6 | Green | 6 | 5.1 | Green | 6 | 3.7 | Green |
| HP3 % of Persistent Absentee (PA) pupils (10% or more possible school sessions missed) | n/a | 18% | n/a | | Reports in Q3 | Data not required | | Reports in Q3 | Data not required | 19.5% | 15.1% | Green |
| HP5 No. of affordable homes completed and ready for occupation | 150 | 185 | Green | 37 | 52 | Green | 74 | 83 | Green | 112 | 134 | Green |
| HP7 Commission the next phase of the Thatcham Community Hub feasibility (31/12/2025) | n/a | New for 2025/26 | n/a | Dec-25 | Dec-25 | Green | Dec-25 | Mar-26 | Amber | Dec-25 | Oct-25 | Green |
| HP8 Develop a Delivery Plan for Newbury Town Centre from the Master Plan (31/03/26) | n/a | New for 2025/26 | n/a | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green |
| HP9 Complete the second phase of works on Newbury Wharf (31/03/26) | n/a | New for 2025/26 | n/a | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green |
| HP12 No. of additional Kilowatt peak (kWp) installed for generating renewable energy | 350 | 126 | Red | 0 | 0 | Green | 300 | 478 | Green | 450 | 594 | Green |
| HP13 Submit Planning Application and completed detailed design for the replacement of the sheet piling on the north side of the canal (31/03/2026) | n/a | New for 2025/26 | n/a | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green |

2025/26 Performance Report Q3

| High Priority Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|----------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| HP14 Complete the construction work to replace the sheet piling on the north side of the canal (31/12/2026) | n/a | New for 2025/26 | n/a | Dec-26 | Dec-26 | Green | Dec-26 | Dec-26 | Green | Dec-26 | Dec-26 | Green |
| HP15 % of referrals allocated in the previous 12 months without any waiting time (rolling 12 months) | n/a | New for 2025/26 | n/a | 60% | 64% | Green | 60% | 62% | Green | 60% | 61.5% | Green |
| HP16 % of new clients with no identified need/low level support requirements following enablement | 60% | (121 / 190) 63.7% | Green | 60% | 64.7% | Green | 60% | 66.4% | Green | 60% | 66.1% | Green |
| HP17 Develop and adopt the Corporate Transformation Programme (31/03/26) | n/a | New for 2025/26 | n/a | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green |
| HP18 Undertake a strategic asset review with associated disposal plan (31/01/26) | n/a | New for 2025/26 | n/a | Mar-26 | Jan-26 | Green | Mar-26 | Jan-26 | Green | Mar-26 | Mar-26 | Green |
| HP20 Complete the work of the Policy Development Group on Viable Villages and consider the recommendations (31/07/2026) | n/a | New for 2025/26 | n/a | Jul-26 | Mar-26 | Green | Jul-26 | Mar-26 | Green | Jul-26 | Jul-26 | Green |
| HP21 Develop and deliver a Rural Business Forum (31/12/25) | n/a | New for 2025/26 | n/a | Dec-25 | Sep-25 | Green | Dec-25 | Sep-25 | Green | Dec-25 | Sep-25 | Green |
| HP19 No. of attendances at Outreach sessions (i.e. locations other than Leisure Centres) | n/a | New for 2025/26 | n/a | Base-line | 989 | Base-line | Base-line | 2,036 | Base-line | Baseline | 3,074 | Base-line |

5.5 Please note the amendment of the following:

| Measure Description | Target | Comment/Decision Pending |
|---|-------------------|---|
| <p>HP 18 Undertake a strategic asset review with associated disposal plan (31/01/26)</p> | <p>31/01/2026</p> | <p>To note an error in the previously reported target date of 31/01/26, which should be 31/03/26 to match the Financial Improvement Plan approved by Executive at the meeting held on 18 December 2025.</p> <p>Proposed action:</p> <ul style="list-style-type: none"> ➤ To note the amendment of the target |

6 CSDP Progress Update: Business as Usual Measures

6.1 Only those measures with a RAG status of Red or Amber are published as part of this report.

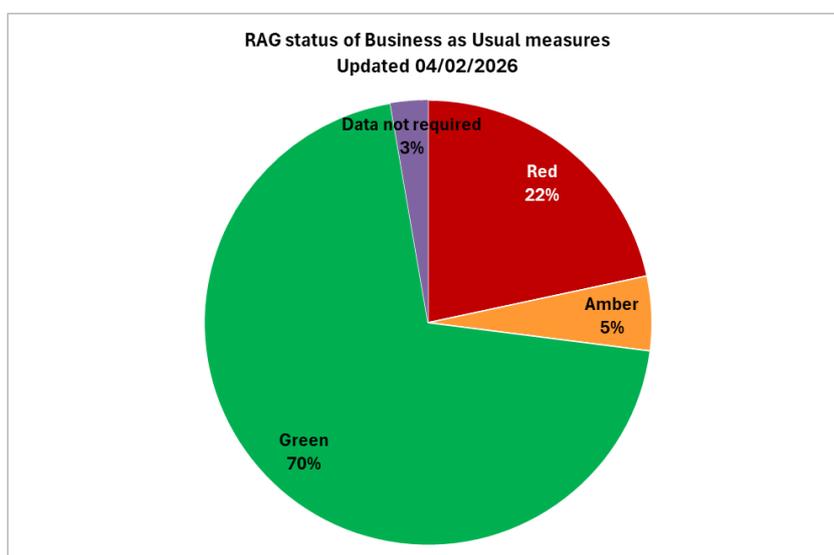


Figure 1. Year-to-date status of Business-as-Usual Measures

6.2 Out of the 37 BaU measures, 26 were reported as Green, 2 as Amber, and 8 as Red, and 1 was not due to be reported this quarter.

6.3 Notable achievements in this quarter were the **number of people attending culture and library events was 25% above target**, and **Northcroft Leisure Centre was rated as Excellent** by Sport England’s leading national quality scheme, Quest.

6.4 For an explanation of the measure categories and the RAG rating methodology, please refer to Appendix D: Purpose and Methodology.

2025/26 Performance Report Q3

| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| BaU 1 No. of people subscribed to WBC e-newsletters | 76,000 | 73,258 | Amber | 76,000 | 63,004 | Red | 76,000 | 63,643 | Red | 76,000 | 64,699 | Red |

Transformation, Customer and ICT Department (Resources Directorate):

Context:
A data cleanse when moving to a new email marketing system removed old email addresses which reduced the number of subscribers. It can also fluctuate based on customer data where the system is used to communicate with customers.

Moving forward:
The Council is continuing to promote these newsletters and has added 1,695 new subscribers in the past quarter. Attendance at a workshop held by our system provider has provided areas of best practice to help inform future use, and new newsletter options are being considered to expand use, including a new bulletin launching in January 2026 to support out Let's Talk outreach programme.

| | | | | | | | | | | | | |
|--|-----|-----------------|-----|--------|--------|-----|--------|--------|-----|---------------|---------------|------------|
| BaU 4 Produce a Council Strategy Delivery Plan for review by Executive Members | n/a | New for 2025/26 | n/a | Jun-25 | Dec-25 | Red | Jun-25 | Dec-25 | Red | Jun-25 | Mar-26 | Red |
|--|-----|-----------------|-----|--------|--------|-----|--------|--------|-----|---------------|---------------|------------|

Strategy and Governance Department (Resources Directorate):

Context:
The methodology for incorporation of the 12 new Areas of Focus proposed by the performance team was submitted for Executive deliberation on the Q2 Performance Report.

Moving forward:
The performance team is currently developing a gap analysis of the Council Strategy delivery, which should inform the ongoing discussions regarding the scope and format of the review. The review of the Strategy should be submitted to full Council at the end of Q4.

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| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| BaU 7 % of WBC provider services inspected by Care Quality Commission (CQC) and rated as good or better | 100% | (4 / 5) 80.0% | Red | 100% | 80.0% | Red | 100% | 80.0% | Red | 100% | 80.0% | Red |

Adult Social Care Department (People (Adults) Directorate):

YTD: 4 / 5

Context:

Birchwood has yet to be inspected by the Care Quality Commission so therefore its rating remains 'requires improvement' (RI).

Moving forward:

We are continuing to anticipate an inspection at any point and as such we are constantly working to improve and amend working practices to offer the best opportunity to move from RI to GOOD. The role of the Quality and Operations Manager and the introduction of quality champions is really assisting this course of action.

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| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| BaU 10 % of Education, Health and Care plans issued within the 20-week timeframe (including exceptions) | 60% | (142 / 242)58.7% | Green | 60% | 25.4% | Red | 60% | 24.1% | Red | 60% | 19.4% | Red |

2025/26 Performance Report Q3

| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|--------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| <p>Education and SEND Department (People (Children) Directorate:</p> <p><u>Context:</u> The reason for underperformance is due to the increasing numbers of requests for EHCPs, whilst the size of the team has remained the same. This is reflected over most other local authorities. In 2024, we lowered the threshold for agreeing to assess for an EHCP. This was due to being taken to Tribunal by parents and losing all cases. The consequence of this has been to drive up the number of EHCP assessments. The speed of EHCP completions has been further hindered by the delay in receiving assessments from Educational Psychologists. There is a national shortage of EPs, and WBC has struggled to recruit. An EHCP cannot be issued without an EP assessment. Delays are further caused by the number of consultations the SEN Team are undertaking as the 'no' response from mainstream school has increased. Before Christmas, the team sent out 220 consultations, of which 67 came back with a 'yes'. Most recently, there have been some significant absences in the SEN Team which has led to further delays.</p> <p><u>Moving forward:</u> Mitigation</p> <ul style="list-style-type: none"> • Additional resource has been brought into the EP service to tackle the backlog of assessments • Schools generally put in place the support and provision a child needs, even before the EHCP is finalised, so delays to EHCP should not impact on a child's ability to learn and progress • From this week, we have agreed, for EHCPs that have been finalised, to backdate payment to schools to the date of the 20-week deadline. Schools will therefore not lose out financially • We are awaiting agreement for a small amount of temporary additional resource into the SEN Team for three months to help us improve the 20-week deadline. <p>Future performance</p> <ul style="list-style-type: none"> • In the short term, with the additional resource we should be able to improve our KPI slightly. • In the medium term, we will be restructuring the SEN Team to improve efficiency and ensure there is more overlap in key areas to minimise disruption due to staff absence. • In the longer term, we need to work with schools, health and social care to reduce the demand for EHCPs by meeting need earlier. <p>It is difficult to predict, with the level of demand, when we might get to 60% of EHCPs completed on time.</p> | | | | | | | | | | | | |
| BaU 12 % of council light vehicle fleet that are ultra-low emission | 77% | (10 / 21) 47.6% | Red | 50% | 47.6% | Amber | 50% | 43.5% | Red | 55% | 47.8% | Red |

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| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| Environment Department (Place Directorate): YTD: 11 / 23 <u>Context:</u> One electric vehicle for Highways has been received (and the diesel equivalent returned). In the meantime, three of the non-fully electric light fleet vehicles are hybrids and we have three electric minibuses on the Council's fleet with two more due to be ordered in FY 2025/26. Overall, some difficulty has been experienced in sourcing appropriate and affordable electric alternatives that meet the needs of the services. Alternatives will continue to be explored. <u>Moving forward:</u> We are expecting by year end to return one more diesel light vehicle (and not replace it). Hybrid options are being explored in some circumstances. | | | | | | | | | | | | |
| BaU 19 No. of district-wide initiatives to enable local action on carbon reduction | 4 | 4 | Green | 1 | 1 | Green | 2 | 2 | Green | 3 | 2 | Red |
| Environment Department (Place Directorate): <u>Context:</u> Lack of resource within the team meant this activity was deprioritised. <u>Moving forward:</u> Plans to replace existing vacancies including maternity cover for the Energy and Carbon Officer role, and Senior Environment Delivery Officer role which has been held vacant for several months to aid the 'in year' financial position. | | | | | | | | | | | | |
| BaU 27 No. of Community forums held | 3 | 3 | Green | 0 | 0 | Green | 1 | 1 | Green | 2 | 1 | Red |
| Community Services Department (Place Directorate): No specific 'Community Forums' have taken place in Q3, however engagement with the community has taken place via an 'Ask the Leader Q&A' session in Burghfield in September, and the District Parish Conference in October. | | | | | | | | | | | | |
| BaU 28 Retender the outcomes based Voluntary Sector Prospectus (31/03/26) | Mar-25 | Delayed | Red | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Mar-27 | Red |

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| Business as Usual Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| Finance, Property and Procurement Department (Resources Directorate): | | | | | | | | | | | | |
| A paper is going to Procurement board to extend for another year. | | | | | | | | | | | | |
| BaU 23 Review Adverse Weather plan to ensure the Drought Framework is up to date (31/03/26) | Oct-24 | Delayed | Red | Mar-26 | Mar-26 | Green | Mar-26 | Mar-26 | Green | Mar-26 | Jul-26 | Amber |
| Community Services Department (Place Directorate): | | | | | | | | | | | | |
| Due to staffing resource issues, due to work on flood risks and a major emergency planning exercise, this is not a priority at the moment. | | | | | | | | | | | | |
| BaU 25 Adopt the Highway Asset Management Plan (31/12/25) | Dec-25 | On schedule | Green | Dec-25 | Dec-25 | Green | Dec-25 | Dec-25 | Green | Dec-25 | Mar-26 | Amber |
| Environment Department (Place Directorate): | | | | | | | | | | | | |
| This work has had to be postponed whilst the team focuses on the re-tendering of the Term Contract. The new Highway Asset Management Plan (HAMP) will be adopted by August 2026. This represents a low risk as the current HAMP is fit for purpose as reflected by the DfT's recent green rating of WBC's Highways | | | | | | | | | | | | |

7 CPI Progress Update: Key Operational Performance Indicators (KoPIs)

7.1 Only those measures with a RAG status of Red or Amber are published as part of this report.

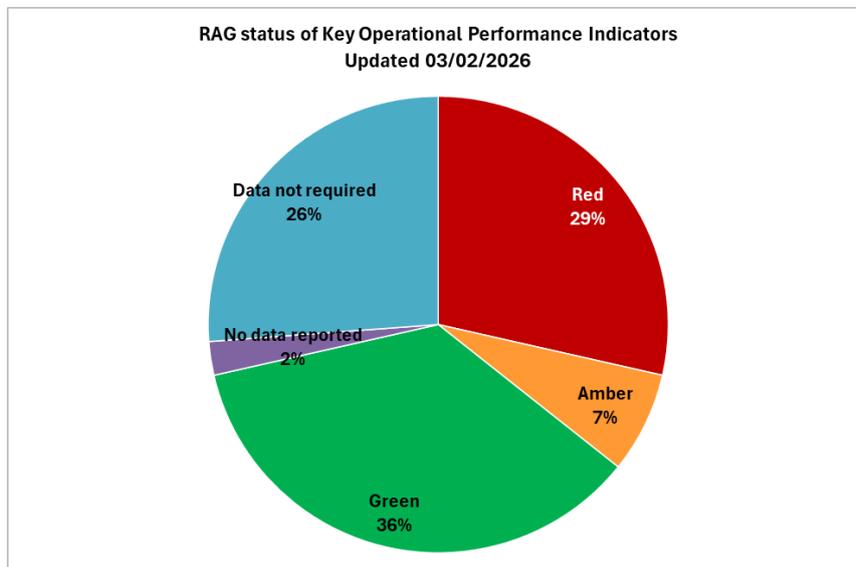


Figure 2. Year-to-date status of Key Operational Performance Indicators

7.2 Out of the 42 KoPI measures, 15 were reported as Green, 3 as Amber, and 12 as Red, and 11 were not due to be reported this quarter. Data was not available for the measure 'Maintain at least a satisfactory level of litter, detritus and graffiti (YTD)', as due to time pressures with the new three weekly waste collection service being launched, a survey was not carried out in Q2 or Q3. However, a survey is planned for Q4.

7.3 For an explanation of the measure categories and the RAG rating methodology, please refer to Appendix D: Purpose and Methodology.

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 7 % of total turnover in West Berkshire Council | 14% | 13% | Green | 13% | 13.3% | Amber | 13% | 14.7% | Red | 13% | 14.2% | Red |

Strategy and Governance (Resources Directorate):

Whilst there has been an increase in leavers and as such turnover for 2025/2026 to date, this is only just over the target and has reduced by 0.5 percentage points in the last quarter. At this stage it doesn't create a concern for the Council as justifications exist for the increase. There has been a lot of organisational change during 2025 to date and that includes restructures and TUPE transfers that has impacted the leaver numbers. There is also a higher percentage of employees who have chosen to retire which is possibly impacted by the current change programme. It is likely this trend will continue during the remainder of the year and the figure remaining higher than the target. As such, and whilst such large-scale changes take place that impact on posts and employees, this is unlikely to be reduced by any proactive measures. Data continues to be monitored for trends and as such any possible mitigations considered.

| | |
|---|------------|
| Overall turnover in Local Government UK - May 2025 | 18% |
| Data Source: Local Government Workforce Data - May 2025 (LGA) | |

| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 8 % of repeat referrals to Children's Services within 12 months of a previous referral | 22% | (329 / 1,504) 21.9% | Green | 20% | 22.1% | Red | 20% | 19.8% | Green | 20% | 21.1% | Red |

Children's Social Care Department (People (Children) Directorate):

YTD: 234 / 1,10

Repeat referrals remain consistent at an acceptable 21.1% YTD, albeit above target. Repeats referrals are reviewed to consider any learning, and this is improvement on previous years.

We consider the development of Early Help and Family Hubs will in the future further support this area and reduce further repeat referrals as families will be able to access support earlier preventing a re-referral to statutory services.

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|----------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 9 % of repeat plans for children subject to a Child Protection Plans for a second subsequent time (within 2 years) | 15% | (205 / 726) 28.2% | Red | 15% | 21.4% | Red | 15% | 28.9% | Red | 10% | 19.1% | Red |

Children’s Social Care Department (People (Children) Directorate):

YTD: 66 / 345
Q3: 11.4%

This quarter repeats within 2 years are 11.4%, repeats regardless of timeframe sits at 32%.

A dip sample was completed to explore this on a wider scale and to consider any learning. WBC is following along the same trajectory as our Statistical neighbours and England. seeing a slight spike, but this is showing as reducing at this current time.

Many repeat CP plans link to Domestic Abuse, either the non-abusive parent starting a new relationship where domestic abuse is a risk to the child/ren or insufficient levels of engagement by the abusive parent and insufficient threshold to escalate involvement into Court.

A more in-depth audit is currently being undertaken on families where there have been multiple repeats of CP plan. Further review and understanding of the current cohort will enable a further review of resource, it is anticipating these remains to Domestic Abuse, and we need to explore further support and intervention with DV.

If a child is a significant risk of harm and this requires a repeat CP plan, then a repeat plan will be followed, at this time this area may not fall in line with the target due to current number, current repeats but it remains under review.

| % of repeat plans for children subject to a Child Protection Plans for a second subsequent time (within 2 years) - 2024 | |
|---|-------|
| England | 24.7% |
| South East | 25.3% |
| WBC | 21.4% |
| Data Source: Children in Need - Reporting Year 2024 (DfE) | |

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 12 No. of households (including family and friends) | 93 | 87 | Red | 93 | 92 | Amber | 93 | 91 | Amber | 93 | 84 | Red |

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|--|--|---------|-------|-----|-------|---|--|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG | | | | | | | | |
| Children’s Social Care Department (People (Children) Directorate): | | | | | | | | | | | | | | | | | | | | |
| <p>YTD: 84</p> <p>No carers resignations during this period. Kinship approvals will vary each quarter. Our foster care performance figures are consistently one of the best in the SE and nationally.</p> <ul style="list-style-type: none"> 70% of all children in care live in a family placement rising to 79% when excluding separated YP aged 16&17 84% of children in a foster placement are placed with in-house carers 25% of all children in care are in a kinship placement compared to an average of 12% across SE 50% of children in foster care are in a kinship placement <p>The reduction is due to kinship fostering placements ending during the quarter with children achieving permanence outside of the care system either through a return home or through Special Guardianship Order. We continue to be active in recruiting new foster carers, with 6 currently going through training, the highest number we have had.</p> <p>SESLIP have undertaken a review of our recruitment activity, and we have an action plan in place to streamline and speed up the process to avoid losing any prospective carers.</p> <p>The West Berks ‘offer’ to foster carers is about to be reviewed to ensure we remain competitive and attractive to prospective carers.</p> <p>Being on or around the 93 target is good performance and we strive to reach this number. We hope to see this increase as we engage in stronger recruitment activity and streamlined assessments. NB: there is a shortage nationally in recruiting foster carers, and in comparison, West Berkshire is strong in this area.</p> | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="float: right; margin-left: auto;"> <thead> <tr> <th colspan="2">Fostering households (by 100,000 population)</th> </tr> </thead> <tbody> <tr> <td>England</td> <td>59.1%</td> </tr> <tr> <td>WBC</td> <td>56.7%</td> </tr> <tr> <td colspan="2">Data Source: Children in need - Reporting Year 2024 (DfE)</td> </tr> </tbody> </table> | | | | | | | | | | | | | Fostering households (by 100,000 population) | | England | 59.1% | WBC | 56.7% | Data Source: Children in need - Reporting Year 2024 (DfE) | |
| Fostering households (by 100,000 population) | | | | | | | | | | | | | | | | | | | | |
| England | 59.1% | | | | | | | | | | | | | | | | | | | |
| WBC | 56.7% | | | | | | | | | | | | | | | | | | | |
| Data Source: Children in need - Reporting Year 2024 (DfE) | | | | | | | | | | | | | | | | | | | | |
| KoPI 13 | 0 | 19 | Red | 0 | 24 | Red | 0 | 16 | Red | 0 | 25 | Red | | | | | | | | |

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| No. of children's social workers allocated more than 18 cases | | | Red | | | Red | | | Red | | | Red |

Children's Social Care Department (People (Children) Directorate):

YTD: 25

25 social workers have a case load above the target of 18, this equates to 25% of the social work workforce. Those with high caseloads, are our more experience social workers, and have support through their manager, their supervision and management oversight and guidance to support this. This can also be linked to larger sibling groups. Those on high caseloads are on an average of 22. This is a significant improvement to previous year when some were as high as 35. We continue to have a number of social workers on higher caseloads, and this continues to be reviewed, and addressed. Social Workers have regular supervision and support in place to ensure high caseloads are managed well. Managers meet weekly to review social workers caseloads and are aware of the volume of reports and evidence they need to complete ensuring timescales are being met.

Due to current volume of work and cases in court, it is expected that we will continue to have a number of social workers on caseloads over 18, all social workers have support in place but at this stage it is unlikely to reduce over the next quarter.

| Average caseload - per FTE (at 30 September 2024) | |
|---|------|
| England | 15.4 |
| South East | 15.5 |
| WBC | 15.3 |
| Data Source: Children's social work workforce - Reporting Year 2024 (DfE) | |

| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 14 No. of Children in Care aged under 16 placed in unregistered provision | 0 | 3 | Red | 0 | 0 | Green | 0 | 3 | Red | 0 | 2 | Red |

Children's Social Care Department (People (Children) Directorate):

YTD: 2

During Q3 there were 2 children in unregistered provision.

We continue to seek registered provision for both children, but due to their level of needs and level of support needed provision is not available. There is due diligence applied to unregistered provision which are sign off by Snr Leaders and increase in visits to children is in place. On a positive there is a plan to move one child to a registered provision in Q4

Next steps are to continue to monitor current provision and continue to seek registered provision

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|----------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 17 % of desired outcomes of a S42 safeguarding enquiry, expressed by the subject, 'fully' achieved | 68% | (346 / 515) 67.2% | Amber | 68% | 66.7% | Amber | 68% | 61.3% | Red | 68% | 63.3% | Red |

Adult Social Care Department (People (Adults) Directorate):

YTD: 200 / 316

Proportion that have fully achieved their stated outcomes, has dropped as numbers that are reported as 'partially achieved' have increased. This remains a subjective view.

Low numbers - only 4.8%, that have not met any stated outcomes.

| Percentage of desired outcomes of a S42 safeguarding enquiry, expressed by the subject, 'fully' achieved (of cases with recorded desired outcome) - 2023-2024 | |
|---|-----|
| England | 70% |
| South East | 65% |
| WBC | 74% |
| Data Source: Safeguarding Adults, England 2023-24 (NHS England) | |

| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 20 No. of rough sleepers at the end of each quarter (maximum) | 6 | 5 | Green | 6 | 7 | Red | 6 | 6 | Green | 6 | 7 | Red |

Development and Housing Department (Place Directorate):

We engage with 100% of rough sleepers and offer them accommodation.

The 7 rough sleepers identified are not entrenched long-term rough sleepers, and it is hoped our intervention will impact their lives positively. We continue to engage proactively through our outreach service.

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|----------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 21 % of households where relief duty ended with secure accommodation for at least 6 months | 55% | (208 / 440) 47.3% | Red | 55% | 38.7% | Red | 55% | 50.3% | Red | 55% | 50.7% | Red |

Development and Housing Department (Place Directorate):

YTD: 141 / 278

Shortage of affordable housing resulting in reduced number of households being able to secure settled accommodation for at least 6 months. We are reviewing incentives to be offered to private landlords. Supporting households to become tenancy ready and working with registered providers to match suitable households to available properties.

| % of households where relief duty ended with secure accommodation for at least 6 months | |
|---|-------|
| England | 31.2% |
| <u>South East</u> | 28.5% |
| WBC | 41.7% |
| Data Source: Statutory homelessness in England: July to September 2024 | |

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 22 Av. No. of days taken to make a full decision on new Housing Benefit claims | 19 | 19 | Amber | 19 | 19.3 | Amber | 19 | 20.8 | Red | 19 | 20 | Red |

Finance, Property and Procurement Department (Resources Directorate):

The current target of 18.5 days is not being achieved due to a combination of operational and external factors. New Housing Benefit (HB) claims have become increasingly complex and are now more frequently involve mixed working age and pension age households, temporary accommodation cases, changes in income patterns, and enhanced verification requirement all of which are complex and require additional staff processing times. In addition, the ongoing shift of the simpler caseload to Universal Credit has left Local Authorities with a disproportionately complex residual HB caseload. These claims typically require more detailed evidence gathering, third party verification and manual intervention, all of which extend processing times. In addition, due to a secondment post there was some periods in recent quarters when we have been running understaffed and when staffing levels have been restored (on a temporary basis) further training has been required to bring knowledge up to speed, particularly for more complex cases.

Workflow refinements to ensure that evidence requests are issued promptly and follow ups are actively monitored to avoid delays outside council control, for example we carry out a “new claims Wednesday” where new claims are prioritised over changes in circumstances to ensure the fastest turnaround possible. Cross training of assessment staff to increase resilience where possible, the team is a small group of officers so when there are absences for holiday and or sickness this can have a detrimental effect on processing times overall, we do our best to avoid this and cover where it is possible. Ongoing engagement with DWP, ensuring local processes align with best practice and national guidance, as previously mentioned these actions have enabled the service to maintain consistently strong performance relative to other Local Authority Benefit departments, even where the KPI target itself has not been met.

Average processing times are expected to remain consistently strong and stable, albeit slightly above the current target, reflecting the structural complexity of the remaining Housing Benefit caseload. Unless there is a significant reduction in claim complexity or a revision to the target to better reflect post Universal Credit operating conditions, achieving 18.5 days on a sustained basis is unlikely.

However, the service is expected to:

- Remain within the top quartile nationally
- Continue meeting statutory and customer service expectations
- Maintain positive external assurance from DWP
- Further marginal improvements may be realised through continued process refinement and digital efficiencies, but the primary focus will remain on accuracy, robustness of decision making, and safeguarding vulnerable claimants, rather than short term reductions in processing times that could increase error risk.

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|---|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 25 Increase in the number of shared lives carers (households) compared to Mar 2023 supporting West Berkshire residents | 45 | 39 | Red | 35 | 34 | Amber | 38 | 35 | Red | 42 | 35 | Red |

Adult Social Care Department (People (Adults) Directorate:

As with previous quarters, recruitment of Shared Lives households has been offset against those households that have left the service. Carer numbers have increased, however these are individuals rather than households (for example the number of support carers for one client (household) has increased by 4. Shared Lives continues to undertake advertising and actions relating to the promotion of shared lives as a model of care, they work closely with the foster team and attend regular shows and activities to try to drive recruitment. The cost of living is having some impact upon adult children leaving home, which historically would free up room for shared lives to be an option.

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| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 1 Council Tax collected as a % of Council Tax due | 98% | 97.4% | Amber | 28% | 28.3% | Green | 56% | 55.1% | Amber | 83% | 81.9% | Amber |

Finance, Property and Procurement Department (Resources Directorate):

Performance against this KPI has been impacted by two principal factors during the reporting period.

Firstly, staffing capacity pressures, particularly at senior level, have reduced the team’s ability to focus on in year debt recovery. One senior FTE post remains vacant, which has limited strategic oversight, case progression, and escalation activity. As a result, operational staff have had reduced management capacity to drive recovery performance and prioritise higher value or more complex arrears cases.

Secondly, the ongoing cost of living pressures continues to affect customers’ ability to pay Council Tax, with a more pronounced impact during this quarter due to the Christmas period. Household budgeting priorities during this time typically shift towards essential living costs, leading to increased short-term non-payment, delayed instalments, and higher arrears levels. This seasonal effect has contributed to a temporary reduction in the in-year collection rate, but we are seeing continues trends with non-payment year on year.

Temporary redistribution of senior responsibilities within the service to maintain operational oversight and ensure critical recovery decisions continue to be progressed.

Targeted recovery activity focusing on higher value debts and cases where early intervention is most likely to prevent longer term arrears, particularly trying to focus on collection of in-year debts over prior years arrears.

Continued active use of payment arrangements, including revised instalment plans, to support customers while maintaining income collection.

Ongoing recruitment activity to fill the vacant senior post and restore full management capacity within the team.

Collection performance is expected to improve over the coming quarters as seasonal pressures ease and customers return to more stable budgeting patterns following the Christmas period. The appointment of the vacant senior post will further strengthen recovery performance by restoring full management capacity and enabling a renewed focus on in year debt recovery.

While wider economic pressures may continue to influence customer payment behaviour, the service expects to see a gradual recovery in collection rates, supported by targeted enforcement, sustained customer engagement, and improved operational resilience once we have the additional post filled. Performance is anticipated to move closer to target as these factors take effect.

2025/26 Performance Report Q3

| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 2 Non domestic rates collected as a % of non-domestic rates due | 98% | 98.9% | Green | 33% | 33.4% | Green | 61% | 59.6% | Amber | 87% | 83.6% | Amber |

Finance, Property and Procurement Department (Resources Directorate):

Performance against this KPI has been impacted by two principal factors during the reporting period.

Firstly, staffing capacity pressures, particularly at senior level, have reduced the team's ability to focus on in year debt recovery. One senior FTE post remains vacant, which has limited strategic oversight, case progression, and escalation activity. As a result, operational staff have had reduced management capacity to drive recovery performance and prioritise higher value or more complex arrears cases. Secondly, the ongoing cost of living pressures continue to affect businesses' ability to pay.

Temporary redistribution of senior responsibilities within the service to maintain operational oversight and ensure critical recovery decisions continue to be progressed.

Targeted recovery activity focusing on higher value debts and cases where early intervention is most likely to prevent longer term arrears, particularly trying to focus on collection of in-year debts over prior years arrears.

Continued active use of payment arrangements, including revised instalment plans, to support customers while maintaining income collection.

Ongoing recruitment activity to fill the vacant senior post and restore full management capacity within the team.

Collection performance is expected to improve over the coming quarters. The appointment of the vacant senior post will further strengthen recovery performance by restoring full management capacity and enabling a renewed focus on in year debt recovery.

The service expects to see a gradual recovery in collection rates, supported by targeted enforcement, sustained customer engagement, and improved operational resilience once we have the additional post filled. Performance is anticipated to move closer to target as these factors take effect.

| Key Operational Performance Measure Name | 2024/25 | | | 2025/26 | | | | | | | | |
|--|-----------------|------------------|--------------|---------------|----------------|------------|---------------|----------------|------------|---------------|----------------|------------|
| | Year End Target | Year End Outturn | Year End RAG | Q1 YTD Target | Q1 YTD Outturn | Q1 YTD RAG | Q2 YTD Target | Q2 YTD Outturn | Q2 YTD RAG | Q3 YTD Target | Q3 YTD Outturn | Q3 YTD RAG |
| KoPI 42 No. of visits to West Berkshire sports and leisure centres | 1,000,000 | 878,989 | Red | 250,000 | 237,612 | Amber | 525,000 | 512,827 | Amber | 750,000 | 739,947 | Amber |

Community Services Department (Place Directorate):

Increased from 187,400 (2024) to 227,120 (2025) (+21%) - quarter v quarter - and exceeding target. This continues to reflect the increase in usage from the development at Northcroft and Kennet. Year-to-date is affected by the Northcroft refurbishment and by inaccuracies in attendance tracking data in Q1 which has now been resolved. Year-end result may be close to target but will continue to be affected by the Q1 issues.

8 Contextual measures

- 8.1 Overall, the local **economy remained strong**. The unemployment and claimant rates remained relatively stable (reflecting [the national position](#)¹). Empty business rated properties were 8.2% fewer than the same period last year.
- 8.2 The sale of parking tickets in WBC managed car parks increased by 9.5% on the same period last year. Footfall data for Newbury, Hungerford and Thatcham Town centres remained stable. The number of valid planning applications received decreased by 4% on the same period last year.
- 8.3 The **social care indicators**, for children's social care referral and enquiries, stabilised to pre 2020/23 levels. These children are a high priority and progressed in a timely manner to ensure they are safeguarded.
- 8.4 Although a slight increase on last quarter, number of first-time entrants into the Youth Justice System remains lower than the national and regional rates.
- 8.5 The number of households on the Housing Register is lower than in previous quarters. There was a significant reduction (-28.1%) in the number of households in temporary accommodation, which reflects the great amount of work that has been undertaken by the service to get families into suitable accommodation.
- 8.6 Within the **Place** indicators, the number of library issues decreased by 9.5%, which can be attributed to several unavoidable building closures across the service. All libraries experienced additional shutdowns over the Christmas period, with seven sites closed from 25 December to 1 January. In addition, Newbury Library was closed on 15 and 16 December, and Burghfield Library was closed for a two-week period to allow essential asbestos-removal works to take place. These combined closures significantly reduced the number of opening hours available in Q3, resulting in fewer issues overall.
- 8.7 Incidents of fly-tipping reported to the Council, have remained similar to other years with an average of around 265 a quarter over the last 12 months.

9 Corporate Health

- 9.1 Staff turnover remains just over 14% with a vacancy rate of 16%.
- 9.2 The annualised number of working days used for sickness absence is 9.2, with 2.4 being attributed to general stress, depression and mental health sickness, and 0.5 specifically to work related stress.
- 9.3 The overall completion rate for mandatory training courses was 77.0%, an improvement on 74.5% last quarter. The target is 95%.

¹ Source: ONS. Important note: These are official statistics in development and the ONS advises caution when using the data. Ongoing challenges with response rates and levels mean that LFS-based labour market statistics will be badged as official statistics in development until further review.

10 Proposals

- 10.1 To note the progress made in delivering the [Council Strategy Delivery Plan 2023-2027](#), maintaining a strong outcome for the majority of the measures, and remedial actions taken where performance is below target.
- 10.2 To review those areas where performance is below target i.e., reporting as 'Red' or 'Amber, and note that the appropriate remedial action is in place.
- 10.3 To note the rectification the target date for the High Priority measure HP18 Undertake a strategic asset review with associated disposal plan (31/01/26).

11 Other options considered

- 11.1 No other options were considered.

12 Conclusion

- 12.1 This quarter's results show that good progress had been made towards the delivery of the measures under all five Council Strategy Priority Areas.
- 12.2 Action plans are in place to address performance for measures rated Amber and Red. Councillors are asked to note these actions and overall performance.

13 Appendices

- 13.1 Appendix A: Q3 25-26 CSCM (High Priority) – All status
 - 13.2 Appendix B: Q3 25-26 CSDM (Business as Usual) - All status
 - 13.3 Appendix C Q3 25-26 KOPIs - All status
 - 13.4 Appendix D: A Purpose and methodology
-

Background Papers:

None

Subject to Call-In: Yes: No:

The item is due to be referred to Council for final approval

Delays in implementation could have serious financial implications for the Council

Delays in implementation could compromise the Council's position:

2025/26 Performance Report Q3

Considered or reviewed by Scrutiny Commission or associated Committees, Task Groups within preceding six months

Item is Urgent Key Decision

Report is to note only

Wards affected: All

Officer details:

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E-mail: beatriz.teixeira1@westberks.gov.uk

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|------|---|------------|-------------------------|------------|------------------|------------|------------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| HP 1 | No. of weeks taken to be assessed by the Emotional Health Academy (Average) | 6 | 6 ★ | 6 | 5.6 ★ | 6 | 5.1 ★ | 6 | 3.7 ★ | |
| HP 2 | % of eligible West Berkshire 2-year-olds on DWP list accessing free nursery entitlement | 75% | (176 / 285) 61.8% ■ | 75% | 61.6% ■ | 75% | 61.6% ■ | 75% | 65.6% ■ | <p>YTD: 164 / 250</p> <p>If eligible for the families receiving additional support (FRAS) 2 year old funding and WPE (working parent entitlement) then the eligibility for both is recorded. Our experience has been that families entitled to FRAS are often slower to seek places and sometimes are unable to secure places at their preferred provider. Some providers prefer offering places to parents with WPE as they may have had their children in their setting from 9 months old and consider that these parents are more likely to take up additional hours over and above the entitlement funding.</p> <p>The Early Years Team sends out emails to potentially eligible families as soon as the information is received from DWP/DfE. We currently have 17 2-year-olds who are receiving WPE (working parent entitlement) who also have an eligible EYPP check. These children would have also been eligible for the 2-year-old funding (the earnings threshold for EYPP is actually lower, so there could be more than just these children eligible) however the parents have not applied for the 2-year-old funding, as they are now deciding to apply straight for the WPE, which gives them 30 hours of funding vs 15.</p> <p>Going forward, we are considering whether we could add a section to the parent declaration form, to get parents' consent for a 2 year old funding check (similar to what we currently have for the EYPP consent check) so we can perform these checks on the parents/providers behalf, so these children can also be counted towards the additional support 2 year old funding figures.</p> <p>Family Hubs will be encouraged to increase their support to potentially eligible families to apply for the FRAS funding. We will send additional comms to Early Years Providers.</p> <p>As most children are in their places for this term, the expectation is that there will not be much of a change in the position by year-end.</p> |
| HP 3 | % of Persistent Absentee (PA) pupils (10% or more possible school sessions missed) | n/a | 18% ⬆️ | | Reports in Q3 ⬆️ | | Reports in Q3 ⬆️ | 19.5% | 15.1% ★ | |
| HP 4 | % of 16 to 17 year-olds participating in education and training | 95% | (3,533 / 3,848) 91.8% ◆ | 95% | 90.7% ◆ | 95% | 90.4% ◆ | 95% | 90.1% ■ | <p>YTD: 3,561/3,953</p> <p>Updated to reflect December NCCIS return. National comparisons to follow (not available until 25th January). Factors include significant decrease in low level provision from all local FE providers leading to a low initial starting rate of participation, challenges around the SEN cohort and downturn in opportunities within apprenticeships meaning any young people leaving education from December onwards struggle to access further education/training.</p> <p>Further Education settings are being challenged to broaden their curriculum to provide accessible courses for those with lower qualifications. We are also supporting West Berkshire Training Consortium to expand their capacity on their Great Start programme to take on more young people. Schools are being pressed to be more diligent and systematic with those leaving school this year to ensure options for their young people are realistic and achievable. Further Education settings are being challenged to broaden their curriculum to provide accessible courses for those with lower qualifications. We are also supporting West Berkshire Training Consortium to expand their capacity on their Great Start programme to take on more young people.</p> <p>Currently, there is no additional education provision until September 2026, as such the number of NEET young people is likely to continue to increase over the remainder of the academic year.</p> |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-------|---|------------|-------------------------|------------|-----------------|------------|-----------------|------------|-----------------|--|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| HP 5 | No. of affordable homes completed and ready for occupation | 150 | 185 ★ | 37 | 52 ★ | 74 | 83 ★ | 112 | 134 ★ | Data for Q1, Q2 and Q3 has been updated as following clarification from the provider. |
| HP 6 | Refresh the Playing Pitch Strategy (30/06/25) | Jun-25 | On schedule ★ | Jun-25 | Feb-26 ■ | Jun-25 | Feb-26 ■ | Jun-25 | Mar-26 ■ | The public consultation will close at the start of January and, following review of feedback, the final Strategy is due to be considered by Executive on 19 March 2026. To note – the scope of the project has expanded from a refresh of the existing 2019 strategy, to develop a completely new 2026-2041 strategy, following feedback from stakeholders, and the completion date has been adjusted accordingly. Two new artificial pitches have been delivered at Cotswold Sport Centre and Henwick Worthy. |
| HP 7 | Commission the next phase of the Thatcham Community Hub feasibility (31/12/2025) | n/a | New for 2025/26 ⊕ | Dec-25 | Dec-25 ★ | Dec-25 | Mar-26 ◆ | Dec-25 | Oct-25 ★ | Activity complete. Procurement took place in August 2025, with a consultant team in place in October 2025. |
| HP 8 | Develop a Delivery Plan for Newbury Town Centre from the Master Plan (31/03/26) | n/a | New for 2025/26 ⊕ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Action Plan drafted and awaiting further amends before adoption process. |
| HP 9 | Complete the second phase of works on Newbury Wharf (31/03/26) | n/a | New for 2025/26 ⊕ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Works continuing with contractor on site to ensure delivery of components of Phase 2 by 31 March 2026. |
| HP 10 | % of permanent pothole/road edge repairs completed within 28 days of order date, excl. exemptions | 95% | (1,818 / 2,084) 87.2% ■ | 95% | 76.8% ■ | 95% | 84.2% ■ | 95% | 89.2% ■ | YTD: 995 / 1,115 Supply chain issue in Q1 still affecting YTD figure. Performance for Q2 and Q3 actuals have been above the target at 99.6% and 100% respectively. Unfortunately, this has not been enough to raise the cumulative year to date figure above the 95% target. Action plan put in place by contractor still effective as performance was 100% for this indicator in Q3. If current performance maintained, it is anticipated that year end will be at least 90%. Mitigation and contingency put in place by the Council's Contractor, Volker Highways, will continue to be monitored weekly |
| HP 11 | Go live with Grazeley solar farm (31/12/25) | May-25 | Delayed ■ | Dec-25 | Mar-26 ◆ | Dec-25 | Oct-26 ■ | Dec-25 | Oct-26 ■ | Successful procurement exercise has been completed, however the rise in interest rates and the fall in green energy wholesale prices is impacting on the viability of the scheme. A full review of the business case must be undertaken prior to a contractor being appointed to ensure the scheme remains viable. This is currently being undertaken and will be reported through Executive. Alternative off-take options for the electricity and procurement options are being considered as part of the business case review. |
| HP 12 | No. of additional Kilowatt peak (kWp) installed for generating renewable energy | 350 | 126 ■ | 0 | 0 ★ | 300 | 478 ★ | 450 | 594 ★ | Schools delivered were Cold Ash St Marks and The Willows Primary. |
| HP 13 | Submit Planning Application and completed detailed design for the replacement of the sheet piling on the north side of the canal (31/03/2026) | n/a | New for 2025/26 ⊕ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Scheme is currently with WBC Planning for review at pre-application stage. |
| HP 14 | Complete the construction work to replace the sheet piling on the north side of the canal (31/12/2026) | n/a | New for 2025/26 ⊕ | Dec-26 | Dec-26 ★ | Dec-26 | Dec-26 ★ | Dec-26 | Dec-26 ★ | Scheme is currently with WBC Planning for review at pre-application stage. |
| HP 15 | % of referrals allocated in the previous 12 months without any waiting time (rolling 12 months) | n/a | New for 2025/26 ⊕ | 60% | 64% ★ | 60% | 62% ★ | 60% | 61.5% ★ | YTD: 2,552 / 4,150 This KPI shows a rolling 12 months. The number of referrals completed with no wait time has increased, which is consistent with the waiting list increases we have seen over the last year. In addition, the NRS insolvency in Q2 meant that a number of referrals were added to the waiting list as we did not have a Trusted Assessor service to refer to. These would have in the past been included in the 'no wait' figures. Waiting List audit completed in Q3 meant a number of cases that had been on the waiting list were closed. NB: data for this measure will not be available once the new ASC case management system is in place. 'Referrals' no longer exist in the new system, as it is a workflow-based system. |
| HP 16 | % of new clients with no identified need/low level support requirements following enablement | 60% | (121 / 190) 63.7% ★ | 60% | 64.7% ★ | 60% | 66.4% ★ | 60% | 66.1% ★ | YTD: 162 / 245 NB: Provisional data, pending Client Level Data (CLD) confirmation. Relates to reablement provided by our inhouse service and externally commissioned Is a subset of total reablement provided. |
| HP 17 | Develop and adopt the Corporate Transformation Programme (31/03/26) | n/a | New for 2025/26 ⊕ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Activity is on track and in development as per the Financial Improvement Plan |
| HP 18 | Undertake a strategic asset review with associated disposal plan (31/03/26) | n/a | New for 2025/26 ⊕ | Mar-26 | Jan-26 ★ | Mar-26 | Jan-26 ★ | Mar-26 | Mar-26 ★ | Work on this is progressing and is on target to be delivered by 31 March 2026 in accordance with the Financial Improvement Plan approved by Executive in December. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-------|--|------------|------------------|------------|-----------------|------------|-----------------|------------|-----------------|--|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| HP 19 | No. of attendances at Outreach sessions (i.e. locations other than Leisure Centres) | n/a | New for 2025/26 | Baseline | 989 | Baseline | 2,036 | Baseline | 3,074 | This shows a 33% increase from the same period in 2024 (779). |
| HP 20 | Complete the work of the Policy Development Group on Viable Villages and consider the recommendations (31/07/2026) | n/a | New for 2025/26 | Jul-26 | Mar-26 | Jul-26 | Mar-26 | Jul-26 | Jul-26 | |
| HP 21 | Develop and deliver a Rural Business Forum (31/12/25) | n/a | New for 2025/26 | Dec-25 | Sep-25 | Dec-25 | Sep-25 | Dec-25 | Sep-25 | Activity complete in Q2. |
| HP 22 | Commission and complete a marketing exercise for Bond Riverside (31/12/25) | n/a | New for 2025/26 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Jan-26 | To ensure it was meaningful, the marketing exercise was extended until 16 January 2026, as it included the Christmas stand-down period. |
| 23 | Review Adverse Weather plan to ensure the Drought Framework is up to date (31/03/26) | Oct-24 | Delayed | Mar-26 | Mar-26 | Mar-26 | Mar-26 | Mar-26 | Jul-26 | Due to staffing resource issues this is not a priority at the moment. |
| 24 | % of flood prevention and drainage improvement schemes, listed in the capital programme, completed | 90% | (5 / 5) 100.0% | 20% | 33.3% | 50% | 50.0% | 70% | 80.0% | YTD: 4 / 5 |
| 25 | Adopt the Highway Asset Management Plan (31/12/25) | Dec-25 | On schedule | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Mar-26 | Work on progressing the Highways Term Contract has been prioritised over the Highways Asset Management Plan. The Government have recently issued ratings on highways performance, and the Council is one of only 16 (out of 154) to be rated Green, and one of only 3 to be rated Green on all categories. |
| 26 | Adopt the West Berkshire Local Plan (30/06/25) | Jun-25 | On schedule | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Activity complete in Q1. |
| 27 | No. of Community forums held | 3 | 3 | 0 | 0 | 1 | 1 | 2 | 1 | No specific 'Community Forums' have taken place in Q3, however engagement with the community has taken place via an 'Ask the Leader Q&A' session in Burghfield in September, and the District Parish Conference in October. |
| 28 | Retender the outcomes based Voluntary Sector Prospectus (31/03/26) | Mar-25 | Delayed | Mar-26 | Mar-26 | Mar-26 | Mar-26 | Mar-26 | Mar-27 | A paper is going to Procurement board to extend for another year. |
| 29 | Deliver the annual Members Bids funding programme | Nov-24 | Delayed | Nov-25 | Nov-25 | Nov-25 | Oct-25 | Nov-25 | Nov-25 | Members bids 2025/26 round approved in November 2025. Grants have to be claimed within 12 months. |
| 30 | No. of initiatives implemented with partners to reduce and prevent crime in West Berkshire | 4 | 17 | 1 | 2 | 2 | 3 | 3 | 4 | |
| 31 | No. of people attending physical events and activities across Culture and Library Services | 52,000 | 60,316 | 13,500 | 14,853 | 27,000 | 35,876 | 40,500 | 50,765 | |
| 32 | No. of arts-based events provided in community libraries by arts providers | 20 | 76 | 15 | 34 | 30 | 51 | 40 | 84 | |
| 33 | Refurbish Northcroft Leisure Centre (30/06/25) | Jun-25 | On schedule | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Jun-25 | Activity complete in Q1. |
| 34 | Increase accessibility accreditation levels for our sports and leisure facilities (31/12/2025) | Jun-25 | Delayed | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Three leisure centres have completed their Quest assessment. Northcroft received a rating of Excellent. Willink and Kennet sites received a very good rating. Hungerford Quest assessment is scheduled for March 2026. |
| 35 | Adopt the Rights of Way Improvement Plan (31/12/2025) | Jun-25 | Delayed | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | Dec-25 | ROWIP adopted by the Executive Committee on 6 November 2025 and now published at https://www.westberks.gov.uk/rowip |
| 36 | No. of Health in All Policies (HIAP) Champions active across West Berkshire Council | n/a | New for 2025/26 | 0 | 0 | 10 | 14 | 10 | 14 | As part of efforts to strengthen overall capacity for the HIAP approach, an assessment of awareness and understanding was undertaken to gauge the level of knowledge among Executive Directors and Service Directors. Six members responded to the survey. |

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| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|------------|--|------------|---|------------|--|------------|--|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 1 | No. of people subscribed to WBC e-newsletters | 76,000 | 73,258 ◆ | 76,000 | 63,004 ■ | 76,000 | 63,643 ■ | 76,000 | 64,699 ■ | A data cleanse when moving to a new email marketing system removed old email addresses which reduced the number of subscribers. It can also fluctuate based on customer data where the system is used to communicate with customers. The Council is continuing to promote these newsletters and has added 1,695 new subscribers in the past quarter. Attendance at a workshop held by our system provider has provided areas of best practice to help inform future use, and new newsletter options are being considered to expand use, including a new bulletin launching in January 2026 to support out Let's Talk outreach programme. |
| 2 | No. of Council services/functions digitised and/or transformed | 28 | 24 ■ | 5 | 2 ■ | 10 | 20 ★ | 15 | 34 ★ | |
| 3 | Expenditure on agency staff (Actual) | £7,500,000 | £7,486,875 ★ | £1,875,000 | £1,432,703 ★ | £3,750,000 | £2701580 ★ | £5,625,000 | £4034537 ★ | |
| 4 | Produce a Council Strategy Delivery Plan for review by Executive Members | n/a | New for 2025/26 ⚡ | Jun-25 | Dec-25 ■ | Jun-25 | Dec-25 ■ | Jun-25 | Mar-26 ■ | The methodology for incorporation of the 12 new Areas of Focus proposed by the performance team was submitted for Executive deliberation on the Q2 Performance Report. The performance team is currently developing a gap analysis of the Council Strategy delivery, which should inform the ongoing discussions regarding the scope and format of the review. The review of the Strategy should be submitted to full Council at the end of Q4. |
| 5 | No. of corporate and school staff enrolled onto training funded through the apprenticeship levy | 56 | 111 ★ | 14 | 7 ■ | 28 | 23 ■ | 40 | 41 ★ | Due to a slower start in Q1, we are currently five apprentices below the overall target. However, both Q2 and Q3 have met their respective targets. |
| 6 | No. of young people attending/involved in work experience and project work opportunities | 20 | 57 ★ | 5 | 13 ★ | 10 | 68 ★ | 15 | 71 ★ | |
| 7 | % of WBC provider services inspected by Care Quality Commission (CQC) and rated as good or better | 100% | (4 / 5) 80.0% ■ | 100% | 80.0% ■ | 100% | 80.0% ■ | 100% | 80.0% ■ | YTD: 4 / 5 Birchwood has yet to be inspected by the Care Quality Commission so therefore its rating still remains 'requires improvement' (RI). We are continuing to anticipate an inspection at any point and as such we are constantly working to improve and amend working practices to offer the best opportunity to move from RI to GOOD. The role of the Quality and Operations Manager and the introduction of quality champions is really assisting this course of action. |
| 8 | % of affordable dwellings (social rent and shared ownership) that are social rent | 70% | No data ⚡ | 70% | 76.9% ★ | 70% | 77.1% ⚡ | 70% | 76.9% ★ | The measure has been changed from annual to a quarterly reporting as data has become available. |
| 9 | No. of local authority maintained schools | 64 | 64 ★ | 64 | 64 ★ | 64 | 64 ★ | 64 | 64 ★ | |
| 10 | % of Education, Health and Care plans issued within the 20-week timeframe (including exceptions) | 60% | (142 / 242) 58.7% ★ | 60% | 25.4% ■ | 60% | 24.1% ■ | 60% | 19.4% ■ | The reason for underperformance is due to the increasing numbers of requests for EHCPs, whilst the size of the team has remained the same. This is reflected over most other local authorities. In 2024, we lowered the threshold for agreeing to assess for an EHCP. This was due to being taken to Tribunal by parents and losing all cases. The consequence of this has been to drive up the number of EHCP assessments. The speed of EHCP completions has been further hindered by the delay in receiving assessments from Educational Psychologists. There is a national shortage of EPs, and WBC has struggled to recruit. An EHCP cannot be issued without an EP assessment. Delays are further caused by the number of consultations the SEN Team are undertaking as the 'no' response from mainstream school has increased. Before Christmas, the team sent out 220 consultations, of which 67 came back with a 'yes'. Most recently, there have been some significant absences in the SEN Team which has led to further delays. Mitigation •Additional resource has been brought into the EP service to tackle the backlog of assessments •Schools generally put in place the support and provision a child needs, even before the EHCP is finalised, so delays to EHCP should not impact on a child's ability to learn and progress |
| 11 | Update the Environment Strategy and Delivery Plan (31/05/25) | Dec-24 | Delayed ■ | May-25 | May-25 ★ | May-25 | May-25 ★ | May-25 | May-25 ★ | Activity complete in Q1. |
| 12 | % of council light vehicle fleet that are ultra-low emission | 77% | (10 / 21) 47.6% ■ | 50% | 47.6% ◆ | 50% | 43.5% ■ | 55% | 47.8% ■ | YTD: 11 / 23 One electric vehicle for Highways has been received (and the diesel equivalent returned). In the meantime, three of the non-fully electric light fleet vehicles are hybrids and we have three electric minibuses on the Council's fleet with two more due to be ordered in FY 2025/26. Overall, some difficulty has been experienced in sourcing appropriate and affordable electric alternatives that meet the needs of the services. Alternatives will continue to be explored. We are expecting by year end to return one more diesel light vehicle (and not replace it). Hybrid options are being explored in some circumstances. |
| 13 | No. of schemes delivered for residents to install solar panels and other clean energy systems | 1 | 1 ★ | Reports Q4 | Reports Q4 ⚡ | Reports Q4 | Reports Q4 ⚡ | Reports Q4 | Reports Q4 ⚡ | |
| 14 | % of Car Club vehicles that are electric | 25% | (1 / 5) 20.0% ■ | 20% | 20.0% ★ | 20% | 20.0% ★ | 20% | 20.0% ★ | YTD: 1 / 5 The number of electric car club vehicles depends on the number of car club locations that have EVCPs. Once the programme has provided them, car club EVs will be placed. |
| 15 | No. of new EV charging points installed on streets without off-street parking | 40 | 38 ◆ | 0 | 8 ★ | 0 | 10 ★ | 10 | 12 ★ | We installed 2 charge points during this quarter under an existing contract. However, we have now signed a new Contract using LEVI funding and plan to start the implementation planning and installation phase in January and will use this contract for future installations as it will not cost WBC anything. It is unlikely that we will meet this years numbers but should exceed the numbers next FY as the new CPO will be installing the infrastructure as quickly as they can. |
| 16 | % of all suitable WBC public car parks with 20 or more spaces to have EV charging available | 100% | (13 / 22) 59.1% ■ | 60% | 63.6% ★ | 60% | 63.6% ★ | 60% | 63.6% ★ | YTD: 14 / 22 |
| 17 | Commence trial of extended pedestrianisation hours Newbury Town Centre (31/05/25) | Mar-24 | Delayed ■ | May-25 | May-25 ★ | May-25 | May-25 ★ | May-25 | May-25 ★ | Activity complete in Q1. |
| 18 | Adopt a Local Transport Plan (31/07/25) | Mar-25 | Delayed ■ | Jul-25 | Jul-25 ★ | Jul-25 | Jul-25 ★ | Jul-25 | Jul-25 ★ | Activity complete in Q2. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|--|------------|-------------------|------------|-----------------|------------|-----------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 19 | No. of district-wide initiatives to enable local action on carbon reduction | 4 | 4 ★ | 1 | 1 ★ | 2 | 2 ★ | 3 | 2 ■ | Lack of resource within the team meant this activity was deprioritised. Plans to replace existing vacancies including maternity cover for the Energy and Carbon Officer role, and Senior Environment Delivery Officer role which has been held vacant for several months to aid the 'in year' financial position. |
| 20 | No. of activities delivered in the district to increase education about recycling and waste minimisation | 28 | 49 ★ | 7 | 15 ★ | 15 | 46 ★ | 23 | 59 ★ | Q2 data has been updated. |
| 21 | Hold a Local Business Conference to promote the district and create more jobs (30/06/26) | Dec-24 | Delayed ■ | Jun-26 | Feb-26 ★ | Jun-26 | Jun-26 ★ | Jun-26 | Jun-26 ★ | |
| 22 | No. of supported internships for young people with EHCP (Education, Health and Care Plans) | 4 | No data ☒ | 4 | 9 ★ | 4 | 11 ★ | 4 | 11 ★ | |
| 23 | Review Adverse Weather plan to ensure the Drought Framework is up to date (31/03/26) | Oct-24 | Delayed ■ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Jul-26 ◆ | Due to staffing resource issues this is not a priority at the moment. |
| 24 | % of flood prevention and drainage improvement schemes, listed in the capital programme, completed | 90% | (5 / 5) 100.0% ★ | 20% | 33.3% ★ | 50% | 50.0% ★ | 70% | 80.0% ★ | YTD: 4 / 5 |
| 25 | Adopt the Highway Asset Management Plan (31/12/25) | Dec-25 | On schedule ★ | Dec-25 | Dec-25 ★ | Dec-25 | Dec-25 ★ | Dec-25 | Mar-26 ◆ | Work on progressing the Highways Term Contract has been prioritised over the Highways Asset Management Plan. The Government have recently issued ratings on highways performance, and the Council is one of only 16 (out of 154) to be rated Green, and one of only 3 to be rated Green on all categories. |
| 26 | Adopt the West Berkshire Local Plan (30/06/25) | Jun-25 | On schedule ★ | Jun-25 | Jun-25 ★ | Jun-25 | Jun-25 ★ | Jun-25 | Jun-25 ★ | Activity complete in Q1. |
| 27 | No. of Community forums held | 3 | 3 ★ | 0 | 0 ★ | 1 | 1 ★ | 2 | 1 ■ | No specific 'Community Forums' have taken place in Q3, however engagement with the community has taken place via an 'Ask the Leader Q&A' session in Burghfield in September, and the District Parish Conference in October. |
| 28 | Retender the outcomes based Voluntary Sector Prospectus (31/03/26) | Mar-25 | Delayed ■ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-26 ★ | Mar-26 | Mar-27 ■ | A paper is going to Procurement board to extend for another year. |
| 29 | Deliver the annual Members Bids funding programme | Nov-24 | Delayed ■ | Nov-25 | Nov-25 ★ | Nov-25 | Oct-25 ★ | Nov-25 | Nov-25 ★ | Members bids 2025/26 round approved in November 2025. Grants have to be claimed within 12 months. |
| 30 | No. of initiatives implemented with partners to reduce and prevent crime in West Berkshire | 4 | 17 ★ | 1 | 2 ★ | 2 | 3 ★ | 3 | 4 ★ | |
| 31 | No. of people attending physical events and activities across Culture and Library Services | 52,000 | 60,316 ★ | 13,500 | 14,853 ★ | 27,000 | 35,876 ★ | 40,500 | 50,765 ★ | |
| 32 | No. of arts-based events provided in community libraries by arts providers | 20 | 76 ★ | 15 | 34 ★ | 30 | 51 ★ | 40 | 84 ★ | |
| 33 | Refurbish Northcroft Leisure Centre (30/06/25) | Jun-25 | On schedule ★ | Jun-25 | Jun-25 ★ | Jun-25 | Jun-25 ★ | Jun-25 | Jun-25 ★ | Activity complete in Q1. |
| 34 | Increase accessibility accreditation levels for our sports and leisure facilities (31/12/2025) | Jun-25 | Delayed ■ | Dec-25 | Dec-25 ★ | Dec-25 | Dec-25 ★ | Dec-25 | Dec-25 ★ | Three leisure centres have completed their Quest assessment. Northcroft received a rating of Excellent. Willink and Kennet sites received a very good rating. Hungerford Quest assessment is scheduled for March 2026. |
| 35 | Adopt the Rights of Way Improvement Plan (31/12/2025) | Jun-25 | Delayed ■ | Dec-25 | Dec-25 ★ | Dec-25 | Dec-25 ★ | Dec-25 | Dec-25 ★ | ROWIP adopted by the Executive Committee on 6 November 2025 and now published at https://www.westberks.gov.uk/rowip |
| 36 | No. of Health in All Policies (HIAP) Champions active across West Berkshire Council | n/a | New for 2025/26 ☐ | 0 | 0 ★ | 10 | 14 ★ | 10 | 14 ★ | As part of efforts to strengthen overall capacity for the HIAP approach, an assessment of awareness and understanding was undertaken to gauge the level of knowledge among Executive Directors and Service Directors. Six members responded to the survey. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|------------|-----------------------------------|------------|-----------------|------------|-----------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 1 | Council Tax collected as a % of Council Tax due | 98% | (148,000,702 / 151,935,700) 97.4% | 28% | 28.3% ★ | 56% | 55.1% ◆ | 83% | 81.9% ◆ | <p>Performance against this KPI has been impacted by two principal factors during the reporting period.</p> <p>Firstly, staffing capacity pressures, particularly at senior level, have reduced the team's ability to focus on in year debt recovery. One senior FTE post remains vacant, which has limited strategic oversight, case progression, and escalation activity. As a result, operational staff have had reduced management capacity to drive recovery performance and prioritise higher value or more complex arrears cases.</p> <p>Secondly, the ongoing cost of living pressures continue to affect customers' ability to pay Council Tax, with a more pronounced impact during this quarter due to the Christmas period. Household budgeting priorities during this time typically shift towards essential living costs, leading to increased short term non payment, delayed instalments, and higher arrears levels. This seasonal effect has contributed to a temporary reduction in the in year collection rate but we are seeing continues trends with non-payment year on year.</p> <p>Temporary redistribution of senior responsibilities within the service to maintain operational oversight and ensure critical recovery decisions continue to be progressed.</p> <p>Targeted recovery activity focusing on higher value debts and cases where early intervention is most likely to prevent longer term arrears, particularly trying to focus on collection of in-year debts over prior years arrears.</p> <p>Continued active use of payment arrangements, including revised instalment plans, to support customers while maintaining income collection.</p> <p>Ongoing recruitment activity to fill the vacant senior post and restore full management capacity within the team.</p> <p>Collection performance is expected to improve over the coming quarters as seasonal pressures ease and customers return to more stable budgeting patterns following the Christmas period. The appointment of the vacant senior post will further strengthen recovery</p> |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|--------------|------------------------------------|---------------------|-----------------------|--------------|-----------------------|--------------|-----------------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 2 | Non domestic rates collected as a % of non domestic rates due | 98% | (98,954,797 / 100,076,468) 98.9% ★ | 33% | 33.4% ★ | 61% | 59.6% ◆ | 87% | 83.6% ◆ | <p>Performance against this KPI has been impacted by two principal factors during the reporting period.</p> <p>Firstly, staffing capacity pressures, particularly at senior level, have reduced the team's ability to focus on in year debt recovery. One senior FTE post remains vacant, which has limited strategic oversight, case progression, and escalation activity. As a result, operational staff have had reduced management capacity to drive recovery performance and prioritise higher value or more complex arrears cases. Secondly, the ongoing cost of living pressures continue to affect businesses' ability to pay.</p> <p>Temporary redistribution of senior responsibilities within the service to maintain operational oversight and ensure critical recovery decisions continue to be progressed.</p> <p>Targeted recovery activity focusing on higher value debts and cases where early intervention is most likely to prevent longer term arrears, particularly trying to focus on collection of in-year debts over prior years arrears.</p> <p>Continued active use of payment arrangements, including revised instalment plans, to support customers while maintaining income collection.</p> <p>Ongoing recruitment activity to fill the vacant senior post and restore full management capacity within the team.</p> <p>Collection performance is expected to improve over the coming quarters. The appointment of the vacant senior post will further strengthen recovery performance by restoring full management capacity and enabling a renewed focus on in year debt recovery.</p> <p>The service expects to see a gradual recovery in collection rates, supported by targeted enforcement, sustained customer engagement, and improved operational resilience once we have the additional post filled. Performance is anticipated to move closer to target as these factors take effect.</p> |
| 3 | Maintain the general fund at the Section 151 minimum (as per budget setting papers) | £7.5m | £10m ★ | - | Reports Q4 ◎ | Reports Q4 | Reports in Q4 ◎ | Reports Q4 | Reports Q4 ◎ | Reports in Q4 |
| 4 | Maintain at least a satisfactory level of litter, detritus and graffiti (YTD) | Satisfactory | Satisfactory ◆ | Reports Q2, Q3 & Q4 | Reports Q2, Q3 & Q4 ◎ | Satisfactory | No survey completed ☹ | Satisfactory | No survey completed ☹ | Due to time pressures with new three weekly waste collection service being launched, no Q2 or Q3 survey was carried out. A survey is planned for Q4 only. |
| 5 | % of public questions at formal meetings responded to in writing within 5 w/days of the meeting | 100% | (28 / 28) 100.0% ★ | 100% | 100.0% ★ | 100% | 100.0% ★ | 100% | 100.0% ★ | |
| 6 | % of petitions responded to within a maximum of 4 months | 80% | (3 / 3) 100.0% ★ | 80% | 100.0% ★ | 80% | 100.0% ★ | 80% | 83.3% ★ | |
| 7 | % of total turnover in West Berkshire Council | 14% | 12.9% ★ | 13% | 13.3% ◆ | 13% | 14.7% ■ | 13% | 14.2% ■ | <p>Whilst there has been an increase in leavers and as such turnover for 2025/2026 to date, this is only just over the target and has reduced by 0.5 percentage points in the last quarter. At this stage it doesn't create a concern for the Council as justifications exist for the increase. There has been a lot of organisational change during 2025 to date and that includes restructures and TUPE transfers that has impacted the leaver numbers. There is also a higher percentage of employees who have chosen to retire which is possibly impacted by the current change programme. It is likely this trend will continue during the remainder of the year and the figure remaining higher than the target. As such, and whilst such large scale changes take place that impact on posts and employees, this is unlikely to be reduced by any proactive measures. Data continues to be monitored for trends and as such any possible mitigations considered.</p> |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|--|------------|--------------------------|------------|-----------------|------------|-----------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 8 | % of repeat referrals to Children's Services within 12 months of a previous referral | 22% | (329 / 1,504) ★ 21.9% | 20% | 22.1% ■ | 20% | 19.8% ★ | 20% | 21.1% ■ | YTD: 234 / 1,107 Repeat referrals remain consistent at an acceptable 21% YTD, albeit above target. Repeats referrals are reviewed to consider any learning and this is improvement on previous years. We consider the development of Early Help and Family Hubs will in the future further support this area and reduce further repeat referrals as families will be able to access support earlier preventing a re-referral to statutory services. |
| 9 | % of repeat plans for children subject to a Child Protection Plans for a second subsequent time (within 2 years) | 15% | (205 / 726) ■ 28.2% | 15% | 21.4% ■ | 15% | 28.9% ■ | 10% | 19.1% ■ | YTD: 66 / 345 Q3: 11.4% Repeats within 2 years 11%, repeats regardless of timeframe sits at 32%. A dip sample was completed to explore this on a wider scale and to consider any learning. WBC is following along the same trajectory as our Statistical neighbours and England. seeing a slight spike, but this is showing as reducing at this current time. Many repeat CP plans link to Domestic Abuse, either the non-abusive parent starting a new relationship where domestic abuse is a risk to the child/ren or insufficient levels of engagement by the abusive parent and insufficient threshold to escalate involvement into Court. A more in-depth audit is currently being undertaken on families where there have been multiple repeats of CP plan. Further review and understanding of the current cohort will enable a further review of resource, it is anticipating these remains to Domestic Abuse and we need to explore further support and intervention with DV. If a child is a significant risk of harm and this requires a repeat CP plan, then a repeat plan will be followed, at this time this area may not fall inline with the target due to current number, current repeats but it remains under review. |
| 10 | % of Children in Care who've had 3 or more placements during the past year | 12% | (18 / 189) ★ 9.5% | 12% | 11.5% ★ | 12% | 9.2% ★ | 10% | 8.1% ★ | YTD: 17 / 209 |
| 11 | % of our Care Leavers (aged 19-21) in employment, education, or training | 60% | (69 / 105) ★ 65.7% | 60% | 63.0% ★ | 60% | 61.3% ★ | 60% | 62.9% ★ | YTD: 78 / 124 This reflects the national picture for young people in EET. In addition, we have a high number of care leavers with extra needs, disability and who are young parents- all of which act as barriers to EET. Workers explore this with individuals regular, plans and support are reviewed and updated accordingly to improve this area. We have employed a further two personal advisers meaning high caseloads will reduce and more support can be given to help YP access EET. This figure remains good performance against statistical neighbours and national statistics. We aim for improved performance in this area but face many challenges with numbers of available college places and reduced apprenticeships. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|------------|------------------|------------|-----------------|------------|-----------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 12 | No. of active fostering households (including family and friends) | 93 | 87 ■ | 93 | 92 ◆ | 93 | 91 ◆ | 93 | 84 ■ | <p>YTD: 84</p> <p>No carers resignations during this period. Kinship approvals will vary each quarter. Our foster care performance figures are consistently one of the best in the SE and nationally.</p> <ul style="list-style-type: none"> •70% of all children in care live in a family placement rising to 79% when excluding separated YP aged 16&17 •84% of children in a foster placement are placed with in-house carers •25% of all children in care are in a kinship placement compared to an average of 12% across SE •50% of children in foster care are in a kinship placement <p>The reduction is due to kinship fostering placements ending during the quarter with children achieving permanence outside of the care system either through a return home or through Special Guardianship Order. We continue to be active in recruiting new foster carers, with 6 currently going through training, the highest number we have had.</p> <p>SESLIP have undertaken a review of our recruitment activity, and we have an action plan in place to streamline and speed up the process to avoid losing any prospective carers.</p> <p>The West Berks 'offer' to foster carers is about to be reviewed to ensure we remain competitive and attractive to prospective carers.</p> <p>Being on or around the 93 target is good performance and we strive to reach this number. We hope to see this increase as we engage in stronger recruitment activity and streamlined assessments. NB: there is a shortage nationally in recruiting foster carers, and in comparison West Berkshire is strong in this area.</p> |
| 13 | No. of children's social workers allocated more than 18 cases | 0 | 19 ■ | 0 | 24 ■ | 0 | 16 ■ | 0% | 25 ■ | <p>YTD: 25</p> <p>25 social workers have a case load above the target of 18, this equates to 25% of the social work workforce. Those with high caseloads, are our more experience social workers, and have support through their manager, their supervision and management oversight and guidance to support this. This can also be linked to larger sibling groups. Those on high caseloads are on an average of 22. This is a significant improvement to previous year when some were as high as 35.</p> <p>We continue to have a number of social workers on higher caseloads, and this continues to be reviewed, and addressed. Social Workers have regular supervision and support in place to ensure high caseloads are managed well. Managers meet weekly to review social workers caseloads and are aware of the volume of reports and evidence they need to complete ensuring timescales are being met.</p> <p>Due to current volume of work and cases in court, it is expected that we will continue to have a number of social workers on caseloads over 18, all social workers have support in place but at this stage it is unlikely to reduce over the next quarter.</p> |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|--|------------|---|------------|---|------------|---|------------|---|--|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 14 | No. of Children in Care aged under 16 placed in unregistered provision | 0 | 3 ■ | 0 | 0 ★ | 0 | 3 ■ | 0% | 2 ■ | <p>YTD: 2 This reduced to one child at the end of Q3 as one child moved to a registered placement within the quarter.</p> <p>The one young person in an unregistered placement is cared for in a long-term arrangement that meets his needs whilst we continue to search for a registered placement. This YP will be 16 in January 26. Unregistered is only used as a last resort and we have a number of safeguards in place to ensure the arrangement is strictly monitored.</p> <p>The addition of the brokerage team has demonstrated stronger engagement in the residential market and is leading to wider and better choices. The number of children in unregistered placements nationally is reducing month on month as registered providers respond to demand.</p> <p>We expect no child to be placed in an unregistered placement and work tirelessly to ensure this does not happen.</p> |
| 15 | CQC rating of at least "Good" for our Adult Social Care Service | Good | Good ★ | Good | Good ★ | Good | Good ★ | Good | Good ★ | |
| 16 | No. of Children in Care aged 16 and over placed in unregistered provision | 0 | 1 ■ | 0% | 1 ■ | 0 | 0 ★ | 0% | 0 ★ | |
| 17 | % of desired outcomes of a S42 safeguarding enquiry, expressed by the subject, 'fully' achieved | 68% | (346 / 515) ◆ 67.2% | 68% | 66.7% ◆ | 68% | 61.3% ■ | 68% | 63.3% ■ | <p>YTD: 200 / 316 Proportion that have fully achieved their stated outcomes, has dropped as numbers that are reported as 'partially achieved' have increased. This remains a subjective view. Low numbers - only 4.8%, that have not met any stated outcomes.</p> |
| 18 | % of vulnerable adults supported through the Three Conversations Model - preventative level (Tier 1) | 87% | (3,688 / 4,009) ★ 92.0% | 87% | 93.3% ★ | 87% | 92.9% ★ | 87% | 92.7% ★ | |
| 19 | % of verified rough sleepers in West Berkshire offered accommodation when first identified | 100% | No data ■ | 100% | 100.0% ★ | 100% | 100.0% ★ | 100% | 100.0% ★ | Q2 data amended. |
| 20 | No. of rough sleepers at the end of each quarter (maximum) | 6 | 5 ★ | 6 | 7 ■ | 6 | 6 ★ | 600% | 7 ■ | <p>We engage with 100% of rough sleepers and offer them accommodation. The 7 rough sleepers identified are not entrenched long-term rough sleepers, and it is hoped our intervention will impact their lives positively. We continue to engage proactively through our outreach service.</p> |
| 21 | % of households where relief duty ended with secure accommodation for at least 6 months | 55% | (208 / 440) ■ 47.3% | 55% | 38.7% ■ | 55% | 50.3% ■ | 55% | 50.7% ■ | <p>YTD: 141 / 278 Shortage of affordable housing resulting in reduced number of households being able to secure settled accommodation for at least 6 month. We are reviewing incentives to be offered to private landlords. Supporting households to become tenancy ready and working with registered providers to match suitable households to available properties.</p> |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|------------|---|------------|--|------------|--|------------|--|--|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 22 | Av. No. of days taken to make a full decision on new Housing Benefit claims | 19 | 19.0 ◆ | 19 | 19.3 ◆ | 19 | 20.8 ■ | 1850% | 20.28 ■ | <p>The current target of 18.5 days is not being achieved due to a combination of operational and external factors. New Housing Benefit (HB) claims have become increasingly complex, and are now more frequently involve mixed working age and pension age households, temporary accommodation cases, changes in income patterns, and enhanced verification requirement all of which are complex and require additional staff processing times.</p> <p>In addition, the ongoing shift of the simpler caseload to Universal Credit has left Local Authorities with a disproportionately complex residual HB caseload. These claims typically require more detailed evidence gathering, third party verification and manual intervention, all of which extend processing times. In addition, due to a secondment post there was some periods in recent quarters when we have been running understaffed and when staffing levels have been restored (on a temporary basis) further training has been required to bring knowledge up to speed, particularly for more complex cases.</p> <p>Workflow refinements to ensure that evidence requests are issued promptly and follow ups are actively monitored to avoid delays outside council control, for example we carry out a "new claims Wednesday" where new claims are prioritised over changes in circumstances to ensure h fastest turnaround possible.</p> <p>Cross training of assessment staff to increase resilience where possible, the team is a small group of officers so when there are absences for holiday and or sickness this can have a detrimental effect on processing times overall, we do our best to avoid this and cover where it is possible.</p> <p>Ongoing engagement with DWP, ensuring local processes align with best practice and national guidance, as previously mentioned these actions have enabled the service to maintain consistently strong performance relative to other Local Authority Benefit departments, even where the KPI target itself has not been met.</p> |
| 23 | Ofsted rating of at least "Good" for our Children and Family Service | Good | Good ★ | Good | Good ★ | Good | Good ★ | Good | Good ★ | |
| 24 | % of S42 safeguarding enquiries where a risk was identified and that risk was reduced/removed | 90% | (1,400 / 1,450) ★ 96.6% | 90% | 93.5% ★ | 90% | 92.3% ★ | 90% | 94.4% ★ | YTD: 334 / 354 |
| 25 | Increase in the number of shared lives carers (households) compared to Mar 2023 supporting West Berkshire residents | 45 | 39 ■ | 35 | 34 ◆ | 38 | 35 ■ | 42 | 35 ■ | As with previous quarters, recruitment of Shared Lives households has been offset against those households that have left the service. Carer numbers have increased, however these are individuals rather than households (for example the number of support carers for one client (household) has increased by 4. Shared Lives continues to undertake advertising and actions relating to the promotion of shared lives as a model of care, they work closely with the foster team and attend regular shows and activities to try to drive recruitment. The cost of living is having some impact upon adult children leaving home, which historically would free up room for shared lives to be an option. |
| 26 | % of 'Major' planning applications determined within time | 66% | (54 / 57) ★ 94.7% | 66% | 85.7% ★ | 66% | 89.2% ★ | 66% | 88.9% ★ | YTD: 40 / 45 |
| 27 | % of 'Non-Major' planning applications determined within time | 77% | (811 / 947) ★ 85.6% | 77% | 85.5% ★ | 77% | 88.8% ★ | 77% | 90.3% ★ | YTD: 612 / 678 |
| 28 | % of pupils achieving a Good Level of Development (GLD) at Foundation Stage (EYFS) | 67% | 67% ★ | - | ⊙ | 67% | 72.1% ★ | | | ⊙ Reported annually in Q2 for the 2024/25 Academic Year = 72.1% (Green) |
| 29 | Average attainment 8 score (KS4) | 54 | n/a ■ | - | Academic Year reports Q3 ⊙ | 54 | 47.9 ■ | - | | ⊙ Reported annually in Q2 for the 2024/25 Academic Year = 47.9 (Red) DfE published data. Although our target has not been met, WBC are still performing better than the national average, placing us in the 2nd quartile nationally. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|---|------------|----------------------------------|------------|----------------------------|------------|-----------------|--------------------------|----------------------------|--|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 30 | Average Progress 8 score per pupil (KS4) | 10% | n/a ★ | - | Academic Year reports Q3 ◎ | 0.00 | 0 ◎ | - | ◎ | Data not required DfE will not publish progress measures for 2024/25 or 2025/26 as KS4 pupils in these years did not have KS2 assessments due to the COVID-19 pandemic. |
| 31 | % achieving the national standard for reading, writing and maths combined (KS2) | 60% | 55% ■ | - | Academic Year reports Q2 ◎ | 60% | 57.1% ◆ | - | ◎ | Reported annually in Q2 for the 2024/25 Academic Year = 57.1% (Amber) West Berkshire is in the 89th percentile for attainment at KS2 which means the percentage of pupils leaving primary school at the expected standard in reading, writing and maths is significantly lower (-5.5%) than the national average. This is in the context of 78.2% of pupils obtaining phonics, which is also notably lower than national, and in the 69th percentile (dropping to the 99th percentile for disadvantaged pupils). Therefore, attainment across both KS1 and KS2 is low. The current West Berkshire school improvement model provides support to only those schools who choose to, and can afford to buy back the service, which means a lot of schools are currently not receiving any school improvement support, and/or any challenge from the local authority. A new Principal Advisor for School Effectiveness has been appointed and is working to intervene in the poorest performing schools, and is looking to reshape how this service works, to ensure the pupils and the schools that need it most, get the most support. |
| 32 | % of disadvantaged pupils achieving national standard for reading, writing and maths combined (KS2) | 44% | 25.3% ■ | - | Academic Year reports Q2 ◎ | 44% | 33.2% ■ | - | ◎ | Reported annually in Q2 for the 2024/25 Academic Year = 33.2% (Red) This is compared to a national average of 47.8% of pupils gaining expected standard in reading, writing and maths – which is a significant 14+% gap and places West Berkshire in the 100th percentile (bottom). The current West Berkshire school improvement model provides support to only those schools who choose to, and can afford to buy back the service, which means a lot of schools are currently not receiving any school improvement support, and/or any challenge from the local authority. A new Principal Advisor for School Effectiveness has been appointed and is working to intervene in the poorest performing schools, and is looking to reshape how this service works, to ensure the pupils and the schools that need it most, get the most support. |
| 33 | Average attainment 8 scores for disadvantaged pupils (KS4) | 35 | n/a ■ | - | Academic Year reports Q4 ◎ | 35 | 29.3 ■ | Academic Year reports Q4 | Academic Year reports Q4 ◎ | DfE published data for the 2024/25 Academic Year should be available in the Spring term |
| 34 | % of household waste recycled, composted and reused | 53% | (38,309 / 73,000) 52.5% ◆ | 55% | 55.4% ★ | 55% | 55.0% ★ | 55% | 55.0% ★ | YTD: 29,505 / 53,609 Qrt 2 data has been updated. Qrt 3 data is provisional. All results are subject to change once validated by DEFRA after Qrt 4. |
| 35 | No. of residents engaged in WBC funded life-long learning | 800 | n/a ★ | - | Academic Year reports Q2 ◎ | 800 | 812 ★ | | ◎ | Reported annually in Q2 for the 2024/25 Academic Year = 812 (Green) Reported for Academic Year 2024/25 |
| 36 | % of the principal road network (A roads) in need of repair | 4% | 4% ★ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | |
| 37 | % of non-principal road network (B and C roads) in need of repair | 4% | 3% ★ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | |
| 38 | % of the unclassified road network in need of repair | 6% | 3% ★ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | Reports Q4 | Reports Q4 ◎ | |
| 39 | % of Children in Care Reviews where the young person contributed to their review (aged 6+) | n/a | New for 2025/26 (7 / 7) 100.0% ★ | 90% | 93.3% ★ | 90% | 88.6% ◆ | 90% | 97.4% ★ | YTD: 74 / 76 |
| 40 | % of parish/town councils requesting support to develop Neighbourhood Development Plans assisted | 100% | (7 / 7) 100.0% ★ | 100% | 100.0% ★ | 100% | 100.0% ★ | 100% | 100.0% ★ | YTD: 4 / 4 |
| 41 | % of newly built playgrounds that have disabled access equipment installed | 100% | No new playgrounds built ★ | 100% | 0 ★ | 100% | ★ | 100% | ★ | No new playgrounds built this quarter. |

| No. | Measure name | 2024/25 | | Q1 2025/26 | | Q2 2025/24 | | Q3 2025/26 | | Comment |
|-----|--|------------|------------------|------------|-----------------|------------|-----------------|------------|-----------------|---|
| | | YTD Target | YTD RAG / Actual | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | YTD Target | YTD Outturn/RAG | |
| 42 | No. of visits to West Berkshire sports and leisure centres | 1,000,000 | 878,989 ■ | 250,000 | 237,612 ◆ | 525,000 | 512,827 ◆ | 750,000 | 739,947 ◆ | Increased from 187,400 (2024) to 227,120 (2025) (+21%) - quarter v quarter - and exceeding target. This continues to reflect the increase in usage from the development at Northcroft and Kennet. Year-to-date is affected by the Northcroft refurbishment and by inaccuracies in attendance tracking data in Q1 which has now been resolved. Year end result may be close to target but will continue to be affected by the Q1 issues. |

1. Introduction

This document outlines the structure of the quarterly performance reports, which aims to enhance transparency and insight by introducing standardised measures that reflect both strategic goals and day-to-day core activities.

For all measures, the Performance Team will seek commentary from relevant services to provide context, especially regarding implementation challenges.

2. Council Strategy Delivery Measures (CSDMs)

The Council Strategy 2023-27 was approved by Full Council in October 2023, and is a four-year strategy accompanied by a detailed Delivery Plan (CSDP) divided into the following five Priority Areas:

1. Services we are proud of
2. A fairer West Berkshire with opportunities for all
3. Tackling the climate and ecological emergency
4. A prosperous and resilient West Berkshire
5. Thriving communities with a strong local voice

To monitor if we are achieving what we have set out to do in the Council Strategy, each Priority Area is monitored through a set of measures, which are reported on a quarterly basis. The measures are divided into the following categories:

- **High Priority:** is a subset of measures monitoring the 12 Areas of Focus, agreed at the Full Council meeting on 15 May 2025, and are included in the main report regardless of their RAG status.
- **Business as Usual:** are included in the main report by exception, i.e. Red (target missed by more than 5% / project completed more than 3 months past the target date), Amber (target missed by up to 5% / project completed up to 3 months past the target date), and then more fully in an Appendix.

In accordance with West Berkshire Council's performance monitoring methodology, the measures are classified using a RAG (Red, Amber and Green) status to indicate level of achievement, as shown below.

The table below reflects the key rule for performance RAG status, applied to quantified measures, but it is important to note that, if a measure has a date as

Appendix D - Purpose and methodology

target, the RAG status will be defined as described below, which adds nuance to previously binary (Red/Green) reporting:

| Text | Symbol | |
|------------------|--------|---|
| Red (R) | ■ | Target missed by more than 5% |
| Amber (A) | ◆ | Target missed by up to 5% |
| Green (G) | ★ | Target successfully met |
| No data | ⌚ | No data reported by the department |
| No data due | 🕒 | No data due to be reported in this quarter |
| Baseline | 📊 | A non-targeted measure. Results are provided as a baseline for future monitoring. |

Please note that for date-based targets, the Council updated its methodology to allow for an Amber status if delivery is delayed by up to three months.

| | |
|------------------|--|
| Red (R) | Not completed, more than 3 months past target date |
| Amber (A) | Not completed, up to 3 months past target date |
| Green (G) | Completed by target date or target date not reached |

The cards for High Priority measures also include a graphic to show the direction of travel from the previous quarter e.g.:

| | |
|---|--|
|  | Indicates that lower is better and that performance has improved since last quarter |
|  | Indicates that higher is better and that performance has improved since last quarter |
|  | Indicates there has been no change |

3. Core Performance Indicators

The Core Performance Indicators, aim to provide a snapshot of service-level performance. They are standards for assessing overall performance and are linked to statutory obligations. Rather than linked to specific, time-bound, commitments expressed in the Council Strategy, they reflect the core, day-to-day activities of the different Departments and Services.

The Core Performance Indicators are categorised as Key Operational Performance Indicators (KOPIs) and Standard Performance Indicators (SPIs).

Core indicators are divided into:

Appendix D - Purpose and methodology

- **Key Operational Performance Indicators (KOPIs):** a subset of a larger group of Operational Performance Indicators (OPIs), which are monitored at Department Level. Out of those larger sets of indicators, elected Members selected the ones deemed instrumental to the delivery of its Strategy and included them in its Delivery Plan. As is the case with Council Strategy Delivery Measures, Key Operational Performance Indicators (KOPIs) are classified using RAG status and reported by exception.
- **Standard Performance Indicators (SPI):** are performance indicators used industry-wide and adopted by official statistical organisations. They are regularly collected and submitted to government to fulfil statutory reporting requirements. The adoption of these standard indicators aims to enhance accountability and strengthen evidence-based decision-making by allowing for comparative assessment of the Council's performance vis-à-vis National averages and the results of statistical neighbours.

A key benefit of adopting standard indicators is the ability to conduct comparative assessments of performance against:

- National averages
- Statistical neighbours
- Geographical neighbours

To support this, the report will include averages and means at the national level and from statistical neighbours, offering a more contextualised understanding of service performance.

4. Performance Reporting Structure

| Performance Report Components | Types of measures | Source for measures | | Contextual tools for enhanced understanding |
|----------------------------------|--|--|---|---|
| Council Strategy Delivery Update | High Priority (HP) Measures | Council Strategy 2023-2027 and Delivery Plan | 12 Areas of Focus | Results from Statistical neighbours |
| | Business-as-Usual (BaU) Measures | | Other strategic goals not directly linked to the Areas of Focus | |
| Core Performance Indicators | Key Operational Performance Indicators (KOPIs) | Departments | Department Plans | National averages and means |

| | | | | |
|--|---------------------------------------|------------------------------|--|--|
| | Standard Performance Indicators (SPI) | Relevant National Frameworks | MHCLG Outcomes Framework and Statutory Returns | |
|--|---------------------------------------|------------------------------|--|--|

5. Contextual Tools for Enhanced Understanding

Measures of volume (MoVs) are non-targeted measures that are reported to either illustrate the demands on a department or provide context for and are organised by theme: Economy, People and Place.

6. Corporate Health

This section reports on a mix of targeted and non-targeted measures that shows e.g., the level of attendance at mandatory training courses and appraisals, but also sickness absence.

Oral health needs assessment recommendation

| | |
|---|--|
| Committee considering report: | Executive |
| Date of Committee: | 19 March 2026 |
| Portfolio Member: | Councillor Patrick Clark |
| Date Portfolio Member agreed report: | 24 February 2026 |
| Report Author: | Matt Pearce, Director of Public Health |
| Forward Plan Ref: | EX4773 |

1 Purpose of the Report

To provide a proposed response to Health and Adult Social Care Scrutiny Committee recommendations related to oral public health.

2 Recommendation

2.1 It is recommended that the Executive accepts the Health and Adult Social Care Scrutiny Committee recommendation and commits to undertaking a rapid oral health needs assessment.

3 Implications and Impact Assessment

| Implication | Commentary |
|-------------------------|---|
| Financial: | Nil – recommended option will not incur any financial costs. |
| Human Resource: | Nil - recommended option can be resourced from existing staff. |
| Legal: | Nil – health needs assessments are advisory only. |
| Risk Management: | Health needs assessments are advisory only, although production of recommendations could raise partnership and public expectations of the Council to take action. |

Oral health needs assessment recommendation

| | |
|------------------|--|
| Property: | Nil. |
| Policy: | The Government undertook a consultation on the NHS dentistry contract (now closed and under analysis) on its proposals to follow on from the 2022 to 2024 Government policy paper for dentistry reform and Labour's 2024 manifesto Dentistry Rescue Plan . |

Oral health needs assessment recommendation

| | Positive | Neutral | Negative | Commentary |
|--|----------|---------|----------|--|
| Equalities Impact: | | | | |
| A Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality? | | X | | The recommended option will include a consideration of inequalities in oral health outcomes, although it is advisory only so will not, of itself, have a positive or negative impact on those outcomes. |
| B Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users? | | X | | The recommended option will include a consideration of oral health outcomes for those with protected characteristics, although it is advisory only so will not, of itself, have a positive or negative impact on those outcomes. |
| Environmental Impact: | | X | | There are no anticipated environmental impacts. |
| | | | | |
| Health Impact: | | X | | The recommended option will include a consideration of oral health outcomes, although it is advisory only so will not, of itself, have a positive or negative impact on those outcomes. |
| ICT Impact: | | X | | Nil identified. |
| Digital Services Impact: | | X | | Could not be delivered digitally. |

Oral health needs assessment recommendation

| | | | | |
|------------------------------|-------------------------------|---|--|--|
| Council Strategy Priorities: | | X | | The recommended option will include a consideration of oral health outcomes in the context of Council priorities, although it is advisory only so will not, of itself, have a positive or negative impact on those priorities. |
| Core Business: | | X | | The recommended option will include a consideration of oral health outcomes in the context of Council business, although it is advisory only so will not, of itself, have a positive or negative impact on that business. |
| Data Impact: | | X | | The recommended option will include a consideration of oral health outcomes as part of its general duties to plan for services. |
| Consultation and Engagement: | Public Health Leadership Team | | | |

4 Executive Summary

Purpose of Report

4.1 This report is presented in response to the Health Scrutiny Committee's recommendation, following its March 2025 review of oral health in West Berkshire, that an Oral Health Needs Assessment should be undertaken to address identified concerns about oral health outcomes, inequalities, and service access.

Summary of Proposals

4.2 Accept the Scrutiny Committee's recommendation to undertake an Oral Health Needs Assessment.

4.3 Deliver a **rapid assessment** within existing resources, focusing on:

- (a) Analysis of local oral health data and dental service utilisation.
- (b) Review of evidence on effective oral health prevention interventions relevant to the Council's remit.

4.4 Avoid a full-scale assessment due to disproportionate cost and resource implications.

Oral health needs assessment recommendation

4.5 Ensure findings inform future decision-making without committing additional resources at this stage.

Conclusion

4.6 Approval is recommended as the proposed rapid assessment offers a proportionate, cost-effective response to identified oral health concerns, providing essential intelligence to guide future actions while minimising financial and staffing impact.

5 Supporting Information

Introduction

5.1 On 11th March 2025, Health Scrutiny Committee received a report from the Director of Public Health on Oral Public Health which covered the following topics:

- Overview of oral health needs and promotion in West Berkshire.
- Common oral diseases and their public health impact.
- NHS and local authority roles in dental care and prevention.
- Key national policy reforms and political commitments.
- Oral health inequalities across population groups.
- Local data on children's and adults' oral health outcomes.
- Access to NHS dental services in West Berkshire.
- Local initiatives: Brushing for Life, Family Hubs, school workshops.
- NICE guidance recommendations for improving oral health.
- Upcoming dental survey of older adults in care settings.
- Suggested future actions: needs assessment, strategy review, partnership development.

5.2 Health Scrutiny Committee subsequently (in June – see below) decided to make a formal recommendation to the Executive for: “An Oral Health Needs Assessment be undertaken in West Berkshire”.

5.3 This paper proposes a response to these recommendations.

Background

5.4 Excerpt from Minutes of the discussion at the Health and Adult Scrutiny Committee meeting on 12th June 2025:

- (a) *Action 36 – It was advised by Matt Pearce, Director of Public Health, that the oral health needs assessment would require a significant resource commitment. It was*

Oral health needs assessment recommendation

advised that the key priorities for the Public Health Team would be reviewed in September by the Health and Wellbeing Board. This would include reviewing data and determining priorities for West Berkshire. It was confirmed that this would be a returning to the Health and Adult Social Care Scrutiny Committee (HASC) in December. It was highlighted by Cllr Codling, that as a representative of the Health and Wellbeing Board, this conversation at the HASC would be considered. Members felt strongly that an Oral Health Needs Assessment was required due to the concerning data in the report reviewed at the Health Scrutiny Committee in March.

The Committee AGREED to issue the following recommendation:

1) An Oral Health Needs Assessment be undertaken in West Berkshire.

5.5 A “health needs assessment” aims to identify the population health needs relating to a specific topic (in this case, oral health), the services available, and their adequacy for meeting the identified needs.

(a) This typically involves collecting the following information, and using it to develop informed recommendations to address any gaps or improve services:

- Local epidemiology (patterns of disease) including trend, benchmarking, risk factors and vulnerable groups
- Mapping of existing services, and assessment of performance, quality, and equity of access and outcomes
- Review of scientific evidence and guidance on effectiveness of interventions
- Insights from residents, service users, service providers and other stakeholders

(b) This typically takes 6-9 months and involves significant officer time, including analytical, engagement, and project management resource, or may be commissioned to a third party, with market prices typically around £15k - £30k, depending on the scope and depth required.

(c) The resources required for, and timeline of, a health needs assessment can be reduced by focusing on specific questions, or prioritising certain aspects of the analysis – i.e. a “rapid”, “desktop” or “pragmatic” health needs assessment.

Proposed Executive response to recommendation

5.6 It is proposed that the Executive accepts the Health and Adult Social Care Scrutiny Committee recommendation and commits to undertaking a rapid oral health needs assessment that focuses on analysis of quantitative data on oral health outcomes and dental service utilisation for West Berkshire residents (of all ages), and a review and assessment of the evidence of the effectiveness of interventions for oral health *prevention* that could fall within the public health remit of West Berkshire Council. In particular, the provision of *NHS-funded dentistry treatment services would not be within the scope of the needs analysis*, apart from as an indication of need for preventative measures.

Oral health needs assessment recommendation

- 5.7 This would be deliverable within existing resources without significant opportunity costs, with a target date of June 2026.
- 5.8 Since a health needs assessment is conducted to inform decision-making, there would be no necessary commitment of further action or resources. However, the recommendations it leads to may indicate a need for further resource commitment, and the production and publication of recommendations, even if they are only advisory, may raise partner and public expectations of the Council to take action.

6 Other options considered

- 6.1 Do not undertake a health needs assessment of any kind - This is not recommended due to the identified need for data and intelligence to support action in this area.
- 6.2 Undertake a full scale health needs assessment, including examination of NHS-funded dentistry treatment services – This is not recommended as it would generate significant financial costs or staffing opportunity costs for the Council and partners which are not necessarily proportionate given the relative burden of oral health compared with other diseases that need public health attention in West Berkshire.

7 Conclusion

- 7.1 It is recommended that the Executive commits to undertaking a rapid oral health needs assessment to identify the key data on oral health epidemiology and service use, and opportunities for prevention, to inform recommendations for further action. This is considered to be an important and proportionate response to the identified need.

8 Appendices

None

Subject to Call-In:

Yes: No:

The item is due to be referred to Council for final approval

Delays in implementation could have serious financial implications for the Council

Delays in implementation could compromise the Council's position:

Considered or reviewed by Scrutiny Commission or associated Committees, Task Groups within preceding six months

Oral health needs assessment recommendation

Item is Urgent Key Decision

Report is to note only

Wards affected: All

Officer details:

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Children’s Mental Health and Emotional Wellbeing – Management Response to Task & Finish Group Recommendations

| | |
|--------------------------------------|----------------------------|
| Committee considering report: | Executive |
| Date of Committee: | 12 February 2026 |
| Portfolio Member: | Councillor Heather Codling |
| Report Author: | Crystal Elkabbas |
| Forward Plan Ref: | EX4740 |

1 Purpose of the Report

The report written by the Children and Young People’s Emotional Wellbeing and Mental Health Task and Finish Group, dated July 2025, was prepared to present the findings of a Health Scrutiny Committee Task and Finish Group established to review Children and Young People’s Mental Health and Emotional Wellbeing in West Berkshire.

The review was undertaken in response to a clear and escalating trend of social, emotional, and mental health needs among children and young people, alongside rising demand, increasing complexity, and widening health inequalities.

Using the THRIVE framework, the Task and Finish Group examined the local system across three domains:

- assessment of need and current provision,
- prevention, early intervention, and community-based support, and
- specialist, crisis, and intensive mental health services.

Evidence was gathered over five sessions from a wide range of stakeholders, including public health, education, health services, voluntary organisations, schools, and young people themselves.

The findings highlight significant pressures across the system, including long waiting times for early help, CAMHS, and neurodiversity assessments; rising rates of anxiety, self-harm, and school-related distress; and the disproportionate impact of deprivation and poverty on children’s mental health outcomes.

This report is written to set out the Council’s management response to the Children’s Mental Health and Emotional Wellbeing Task and Finish Group recommendations, clarifying respective responsibilities between the Council and health partners (ICB/BHFT), and outlining the limitations on implementation arising from the lack of available resources.

2 Recommendations

Note the management response and the delineation of responsibilities: CAMHS and wider health services are the responsibility of the Integrated Care Board (ICB) and Berkshire Healthcare NHS Foundation Trust (BHFT); school mobile phone policies are for individual schools.

Agree that the Council will continue to work in partnership with ICB/BHFT and schools to influence improvements, promote best practice, and seek external funding to progress recommendations where feasible.

Approve sharing of advisory guidance with schools on mobile phone best practice and continued promotion of trauma-informed approaches within Children’s Social Care, subject to resources.

3 Implications and Impact Assessment

| Implication | Commentary |
|-------------------------|---|
| Financial: | Significant additional funding would be required; no budget is currently allocated. Joshua Ngeresa (Finance Manager – Education and DSG) 13/02/2026 |
| Human Resource: | Current staffing levels do not allow delivery without reprioritisation or external support. |
| Legal: | No immediate legal implications from noting this response; commissioning of CAMHS rests with ICB/BHFT. |
| Risk Management: | Without additional resources, there is risk of continued health inequalities. |
| Policy: | Supportive in principle; implementation contingent on resource availability. |

4 Executive Summary

The Task and Finish Group proposes actions to improve children’s mental health and wellbeing. The Council supports the ambition but cannot implement most recommendations without additional resources.

Responsibility split: (1) ICB/BHFT – CAMHS design and delivery, mental health workforce in primary care, specialist pathways; (2) Council – youth offer, Family Hubs, trauma-informed practice in Children’s Social Care, advisory guidance; (3) Schools – operational decisions incl. mobile phone policies.

Partnership approach: The Council will continue to collaborate with ICB/BHFT and schools to improve navigation, reduce inequalities, and align priorities, while exploring external funding and phased options.

5 Supporting Information

Introduction

Following the Health Scrutiny Committee review, this report sets out the Council’s position on the recommendations, highlighting the absence of resources and clarifying responsibilities with health partners and schools.

Background

The Task and Finish Group held multiple sessions with stakeholders (Council officers, ICB, BHFT, schools and VCS partners) and produced recommendations to improve early help, navigation, and specialist services across West Berkshire.

Proposal

| Ref | Recommendation | Management Response |
|-----|---|--|
| 1 | Local Youth Offer (mapping, access to facilities, subsidised leisure) | Supported in principle; not deliverable without additional funding. Collaboration opportunities will be explored through the development of family First agenda. |
| 2 | Improve communication/navigation incl. CAMHS overview and parent hub | Digital hub and streamlined comms require resource not currently available. CAMHS design/delivery sits with BHFT/ICB; Council will work in |

Children’s Mental Health and Emotional Wellbeing – Management Response to Task & Finish Group Recommendations

| | | |
|---|--|--|
| | | partnership to improve clarity for families. |
| 3 | Convene professionals; system strategy; expand mental health workers in GP surgeries; Senior Mental Health Leads | Requires workforce and coordination beyond current capacity. Expansion of mental health workforce in primary care and CAMHS capacity is ICB/BHFT responsibility. Council will maintain partnership forums and advocate for focus on deprived areas. |
| 4 | Trauma-informed district (policies, training, workshops) | Council operates a trauma- informed model in Children’s Social Care. National best practice emphasises leadership, six core principles, reflective supervision, and multi- agency collaboration. District- wide roll- out requires investment; awareness will continue via existing networks and funding will be explored. |
| 5 | Review smartphones/social media and online safety | Operational mobile phone policy is for individual schools. Council will share DfE best practice (prohibit use during school day; secure storage; reasonable exceptions; clear communication) and encourage annual review and online safety education. |

| | | |
|---|--|---|
| 6 | HWB Board priority for CYP mental health | Supported; delivery actions depend on capacity and funding. Alignment with ICB priorities will be sought. |
|---|--|---|

6 Conclusion

In summary, this review underscores that while West Berkshire has a strong foundation of mental health support for children and young people, growing demand, complexity, and inequality require urgent, system-wide action. By implementing the report's recommendations, the local system can move toward a more preventative, coordinated, and equitable approach, ensuring that all children, particularly those most vulnerable, receive timely, needs-led support. Prompt action will not only improve mental health outcomes but also strengthen the resilience of families, schools, and the wider community but this will take time and patience and can only be fully achieved when teams and services are fully staffed and equipped by specialists in the field.

West Berkshire is working hard to ensure that all services are fully staffed to provide necessary support and resource to children, young people, families and schools, and are working towards a traded model of service delivery, which will enable schools to access additional time from the local authority should public services (i.e., MHST) be unable to provide resource.

To ensure effective delivery of the service, the following resource requirements are proposed for Executive Board consideration:

- **Clinical Supervision Capacity**

All staff, particularly clinical supervisors and managers, require access to high-quality clinical supervision to strengthen practice, enhance skills, and enable reflective, solution-focused approaches to meeting need across schools. Supervisors and managers must have access to supervision to provide appropriate support to their teams. This could be commissioned externally at an approximate cost of £140 per hour; however, a peer group supervision model could be implemented to reduce the cost per clinician while maintaining quality and oversight.

- **Dedicated SEMH Specialist Capacity**

SEMH Services require:

- A dedicated Educational Psychologist (Specialist Practitioner – SEMH) with a specific focus on EBSA.
- A Specialist Early Years Practitioner to lead on Early Years provision across the local authority.

The combined estimated cost for these posts is approximately £84,580.

- **Educational Psychology Service – Substantive Recruitment**

The Educational Psychology Service requires all substantive vacancies to be filled in

Children's Mental Health and Emotional Wellbeing – Management Response to Task & Finish Group Recommendations

order to reduce reliance on locum staff. The associated costs are already accounted for within the current allocated service budget.

- **Additional SEMH Practitioners (EHA Team)**
Two additional FTE SEMH Practitioners are required within the Emotional Health Academy to strengthen the traded offer to schools and ensure sustainability of service delivery.
Estimated cost: approximately £54,100 per post.
- **Exclusions and Reintegration Team Capacity**
Two FTE Transitional Workers are required to respond to increasing casework referrals from schools and to enable the Team Manager to maintain strategic oversight of the service.
Estimated cost: approximately £54,100 per post.
- **Promoting Inclusive Practices Team – Specialist SEND Teachers**
Two FTE Specialist SEND Teachers (qualified teachers with SENCO experience) are required to provide outreach advisory support to schools for children and young people with SEND who are unable to access mainstream education due to barriers impacting inclusion. This provision would have a clear focus on strengthening inclusive educational practice.
Estimated cost: approximately £64,000 per post.

These investments are intended to strengthen preventative capacity, reduce escalation of need, and ensure sustainable, inclusive provision across West Berkshire.

Over time, SEMH Services could access funding streams to support with projects and strategic work which aligns with priorities linked to children and young people's emotional wellbeing and mental health initiatives, alongside a growing traded model, which will reduce costs.

7 Appendices

- 7.1 Appendix A – Equity Impact Assessment
- 7.2 Appendix B – Data Protection Impact Assessment
- 7.3 Appendix C - Report of the Children's Mental Health and Emotional Wellbeing Task and Finish Group
- 7.4 Appendix D - Recommendations from the Health and Adult Social Care Scrutiny Committee Task and Finish Group into Children's Mental Health and Emotional Wellbeing
- 7.5 Appendix E - Advisory note: Mobile phone use (best practice)

DfE guidance encourages prohibiting use throughout the school day, secure storage, reasonable exceptions (medical/SEND), clear sanctions, and regular review with stakeholder engagement.

Children’s Mental Health and Emotional Wellbeing – Management Response to Task & Finish Group Recommendations

7.6 Appendix F – Advisory note: Trauma-Informed approaches (best practice)

Embed six principles (safety, trustworthiness, choice, collaboration, empowerment, cultural considerations); leadership commitment; reflective supervision; staff wellbeing; multi-agency collaboration; continuous learning and evaluation with evidence-based practice guides.

Subject to Call-In:

Yes: No:

The item is due to be referred to Council for final approval

Delays in implementation could have serious financial implications for the Council

Delays in implementation could compromise the Council’s position:

Considered or reviewed by Scrutiny Commission or associated Committees, Task Groups within preceding six months

Item is Urgent Key Decision

Report is to note only

Officer details:

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West Berkshire Council Equity Impact Assessment

TEMPLATE

March 2023

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Section 1: Summary details

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| <p>Directorate and Service Area</p> | <p>Education, Children’s Services</p> |
| <p>What is being assessed (e.g. name of policy, procedure, project, service or proposed service change).</p> | <p>The assessment considers the impact of the Council’s proposed management response to the Children’s Mental Health and Emotional Wellbeing Task and Finish Group recommendations. It focuses on whether the response, including the decision to note recommendations and the limits on implementation due to resource constraints, could bias, discriminate against, or unfairly disadvantage individuals or groups within the community.</p> <p>It also examines the implications of clearly defining responsibilities between the Council, health partners (ICB/BHFT), and schools, ensuring that accountability is appropriately allocated and understood. The assessment recognises that the Council’s role is largely advisory and partnership-based, rather than operational in relation to mental health services.</p> <p>Overall, the assessment acknowledges that while the proposal itself does not create unequal treatment, the lack of additional resources may mean existing inequalities in access to mental health support continue. This risk is noted as a system-wide issue rather than a direct consequence of the proposal.</p> |
| <p>Is this a new or existing function or policy?</p> | <p>A request made by the Task and Finish Group, dated July 2025.</p> |
| <p>Summary of assessment Briefly summarise the policy or proposed service change. Summarise possible impacts. Does the proposal bias, discriminate or unfairly disadvantage individuals or groups within the community?</p> | <p>The report sets out the Council’s management response to the Children’s Mental Health and Emotional Wellbeing Task and Finish Group. While the Council supports the ambition to improve outcomes for children and young people, it is clear that most recommendations cannot be delivered without significant additional funding and workforce capacity, neither of which are currently available. There are no immediate legal implications, but without further investment there is a continued risk of health inequalities.</p> <p>Responsibilities are clearly delineated across the system. The design, commissioning and delivery of CAMHS, including mental health provision in primary care and specialist pathways, sit with the Integrated Care Board and Berkshire Healthcare NHS Foundation Trust. The Council’s role relates to the youth offer, Family Hubs, trauma-informed practice within Children’s Social Care, and the provision of advisory</p> |

Equity Impact Assessment

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| (following completion of the assessment). | <p>guidance. Operational decisions, including mobile phone policies, remain the responsibility of individual schools.</p> <p>The Council will continue to work in partnership with health partners and schools to influence improvements, align priorities, and promote best practice. This includes sharing advisory guidance on mobile phone use and maintaining trauma-informed approaches within existing resources, while seeking external funding and phased opportunities to progress elements of the recommendations where feasible.</p> <p>The proposal does not bias, discriminate, or unfairly disadvantage individuals or groups within the community. It sets out a management response that clarifies responsibilities and acknowledges current resource constraints, without introducing changes that would differentially impact specific groups. However, the report notes that without additional resources there remains a risk that existing health inequalities may persist, rather than being created or exacerbated by the proposal itself.</p> |
| Completed By | Crystal Elkabbas, Principal Educational Psychologist & SEMH Service Manager |
| Authorised By | |
| Date of Assessment | 10/02/2026 |

Section 2: Detail of proposal

| | |
|--|--|
| <p>Context / Background</p> <p>Briefly summarise the background to the policy or proposed service change, including reasons for any changes from previous versions.</p> | <p>The proposal arises from a review by the Health Scrutiny Committee into children’s mental health and emotional wellbeing, which led to the establishment of a Task and Finish Group. The group brought together Council officers, health partners (ICB and Berkshire Healthcare NHS Foundation Trust), schools and voluntary and community sector organisations to examine current provision and identify opportunities to improve early help, system navigation and access to specialist support across West Berkshire.</p> <p>Following multiple evidence-gathering sessions, the Task and Finish Group produced a series of recommendations aimed at strengthening the local youth offer, improving communication and coordination across services, promoting trauma-informed practice, and addressing issues such as mobile</p> |
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Equity Impact Assessment

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| | <p>phone use and online safety in schools. These recommendations were intended to support better outcomes for children and young people and reduce inequalities in access to mental health support.</p> <p>The proposal therefore sets out the Council’s management response to these recommendations, clarifying roles and responsibilities across the system and reflecting the current financial and workforce constraints. It provides context for what can realistically be progressed by the Council, what sits with health partners or schools, and how partnership working will continue despite limited resources.</p> |
| <p>Proposals</p> <p>Explain the detail of the proposals, including why this has been decided as the best course of action.</p> | <p>The proposal is for the Executive to consider and approve the Council’s management response to the Children’s Mental Health and Emotional Wellbeing Task and Finish Group recommendations. It does not seek to implement all recommendations directly but instead sets out a clear position on what the Council can realistically deliver within existing resources, while acknowledging where responsibilities sit with health partners and schools.</p> <p>The proposal clarifies that the commissioning and delivery of CAMHS and wider health-based mental health services are the responsibility of the Integrated Care Board and Berkshire Healthcare NHS Foundation Trust, and that operational matters such as mobile phone policies rest with individual schools. The Council’s role is focused on its existing responsibilities, including the youth offer, Family Hubs, trauma-informed practice within Children’s Social Care, and the provision of advisory guidance.</p> <p>In sum, the proposal asks the Executive to note the significant financial and workforce constraints, endorse continued partnership working with health partners and schools, and support targeted, low-cost actions such as sharing best-practice guidance and seeking external funding to progress elements of the recommendations where feasible.</p> |
| <p>Evidence / Intelligence</p> <p>List and explain any data, consultation outcomes, research findings, feedback from service users and</p> | <p>The proposal is supported by the following evidence, which informs the assessment of impact on individuals, communities and delivery capacity:</p> <p>Task and Finish Group engagement and evidence sessions</p> <p>The Task and Finish Group held multiple sessions involving Council officers, the Integrated Care Board, Berkshire Healthcare NHS Foundation Trust, schools, and voluntary and community sector partners.</p> |

Equity Impact Assessment

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| <p>stakeholders etc, that supports your proposals and can help to inform the judgements you make about potential impact on different individuals, communities or groups and our ability to deliver our climate commitments.</p> | <p>These discussions provided qualitative evidence on current service pressures, gaps in early help, challenges with system navigation, and workforce constraints affecting delivery.</p> <p>Health Scrutiny Committee review The Health Scrutiny Committee’s examination of children’s mental health and emotional wellbeing highlighted rising demand, inequalities in access to support, and the complexity of multi-agency responsibilities. This review underpins the need to clarify roles and manage expectations about what the Council can deliver within existing resources.</p> <p>National guidance and best practice The proposal draws on Department for Education guidance on mobile phone use in schools and established national best practice on trauma-informed approaches. These sources provide an evidence base for the advisory guidance the Council proposes to share and support low-cost, preventative action.</p> <p>Operational and resource evidence Internal financial and workforce assessments confirm that no additional budget or staffing is currently available to implement the recommendations in full. This evidence informs the judgement that most actions cannot be delivered without external funding or reprioritisation.</p> <p>Partnership intelligence from health partners Information provided by the ICB and BHFT on CAMHS commissioning, workforce capacity and service design supports the conclusion that responsibility for specialist mental health provision lies with health partners rather than the Council.</p> <p>Impact considerations While the proposal does not directly affect climate commitments, the focus on advisory guidance, partnership working and digital or phased approaches avoids additional environmental impact and aligns with sustainable delivery principles.</p> |
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Alternatives considered / rejected

Summarise any other approaches that have been considered in developing the policy or proposed service change, and the reasons why these were not adopted. This could include reasons why doing nothing is not an option.

The following alternative approaches were considered as part of developing the proposal:

Full implementation of all Task and Finish Group recommendations

This option was considered but rejected because it would require significant additional funding and workforce capacity that are not currently available to the Council. Proceeding without secured resources would create delivery risk and unrealistic expectations.

Council-led delivery of CAMHS-related improvements

An approach in which the Council directly led or commissioned CAMHS and wider mental health services was not adopted, as these responsibilities sit legally and operationally with the Integrated Care Board and Berkshire Healthcare NHS Foundation Trust.

Mandating school policies on mobile phone use

Requiring schools to adopt a single Council-set mobile phone policy was considered but rejected, as schools are autonomous in setting operational policies. Instead, an advisory and best-practice approach was adopted.

Reprioritising existing budgets and staffing

Diverting resources from other statutory services was considered but not pursued, as this would risk undermining core Council duties and could negatively impact other vulnerable groups.

Taking no action

Doing nothing was not considered a viable option, as it would fail to respond to the Health Scrutiny Committee's review and the concerns raised by partners and communities. The adopted approach allows the Council to acknowledge the issues, clarify responsibilities, continue partnership working, and pursue external funding while remaining realistic about delivery constraints.

Section 3: Impact Assessment - Protected Characteristics

| Protected Characteristic | No Impact | Positive | Negative | Description of Impact | Any actions or mitigation to reduce negative impacts | Action owner* (*Job Title, Organisation) | Timescale and monitoring arrangements |
|--------------------------|--------------------------|-------------------------------------|--------------------------|--|--|--|--|
| Age | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <p>The focus of the proposal is on children and young people (CYP), specifically their mental health and emotional wellbeing. Advisory guidance, trauma-informed practices, and improvements to youth services are all targeted at this age group, meaning the benefits are age-specific.</p> <p>Importantly, the approach does not disadvantage or discriminate against other age groups. It simply prioritises support for children and young people in line with the original Task and Finish Group recommendations, addressing their unique needs and vulnerabilities.</p> | | Crystal Elkabbas (PEP/ SEMH Manager) | On-going work via the Emotional Health Academy (EHA) to broaden the reach of all CYP who present with difficulties relating to their emotional wellbeing and/ or mental health at tier 1 and tier 2. |

Equity Impact Assessment

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|-----------------------------------|-------------------------------------|-------------------------------------|--------------------------|--|--|---|--|
| <p>Disability</p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <p>The focus on children and young people’s mental health and wellbeing explicitly includes those with special educational needs and disabilities (SEND). Measures such as trauma-informed approaches in Children’s Social Care, advisory guidance for schools, and support for navigation of services are designed to improve access and outcomes for children with additional needs, helping to reduce barriers and inequalities.</p> <p>The approach does not disadvantage disabled children; instead, it aims to ensure that services are more responsive, accessible, and supportive of those with physical, learning, or neurodiverse conditions, in partnership with health services and schools.</p> | | <p>Crystal Elkabbas (PEP/ SEMH Manager)</p> | <p>Oversee the work within the following teams: EPS EHA, EBSA, Exclusions and PIP Team</p> |
| <p>Gender Reassignment</p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The approach does not discriminate against or disadvantage anyone</p> | | <p>N/A</p> | <p>N/A</p> |

Equity Impact Assessment

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|---|-------------------------------------|-------------------------------------|--------------------------|--|--|------------------|---------------------------------|
| | | | | based on gender identity, and all support and resources are intended to be accessible to every young person in the community. | | | |
| Marriage & Civil Partnership | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <p>The focus of the Council's response is on children and young people's mental health and emotional wellbeing, which is unrelated to the marital or civil partnership status of parents, carers, or guardians. The policies and advisory guidance are applied universally and do not differentiate based on family structure.</p> <p>Therefore, there is no disadvantage or bias associated with marriage or civil partnership under this proposal.</p> | | N/A | N/A |
| Pregnancy & Maternity | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The approach is neutral in this respect. | | N/A | N/A |
| Race | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Children and young people from racial and ethnic minority | | Crystal Elkabbas | On-going work via the Emotional |

Equity Impact Assessment

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|---------------------------|-------------------------------------|--------------------------|--------------------------|---|--|---------------------|--|
| | | | | <p>backgrounds can face disproportionate barriers to accessing mental health support and may experience inequalities in outcomes.</p> <p>The proposal does not discriminate based on race; rather, it seeks to promote equity, improve access, and support children from diverse racial and ethnic backgrounds.</p> | | (PEP/ SEMH Manager) | Health Academy (EHA) to broaden the reach of all CYP who present with difficulties relating to their emotional wellbeing and/ or mental health at tier 1 and tier 2. |
| Sex | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Services, advisory guidance, and trauma-informed approaches are applied universally and do not differentiate or disadvantage anyone based on sex. | | N/A | N/A |
| Sexual Orientation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | The approach aims to ensure that all young people, including those who are LGBTQ+, can access mental health and wellbeing support safely and equitably. | | | Oversee the work within the following teams: EPS EHA, EBSA, Exclusions and PIP Team |
| Religion or Belief | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | We acknowledge that people may hold | | N/A | N/A |

Equity Impact Assessment

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|--|--|--|--|--|--|--|--|
| | | | | unconscious biases, which could unintentionally affect interactions or decision-making. To mitigate this, the Council promotes the use of supervision, including reflective and peer supervision, as a key mechanism to ensure equitable, culturally sensitive, and consistent support for all children, regardless of religion or belief. | | | |
|--|--|--|--|--|--|--|--|

Section 3: Impact Assessment - Additional Community Impacts

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|------------------------------|--------------------------|-------------------------------------|--------------------------|---|--|--|---|
| Rural communities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Children and young people in rural areas may face additional barriers to accessing mental health and wellbeing support, such as fewer local services, | | Crystal Elkabbas (PEP/ SEMH Manager) | Oversee the work within the following teams: EPS EHA, EBSA, |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|---|---|--|
| | | | | <p>longer travel times, and limited digital connectivity.</p> <p>However, the report acknowledges that current resource limitations may restrict the Council’s ability to fully address rural access issues. Where possible, solutions such as advisory guidance, digital resources, and partnership coordination will be used to mitigate these challenges, and external funding opportunities will be explored to support delivery in rural areas.</p> | | | Exclusions and PIP Team |
| Areas of deprivation | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Children and young people living in more | The Council is taking a partnership-led and | Crystal Elkabbas | Oversee the work within the |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|------------------|-----------------|-----------------|---|--|---|---|
| | | | | deprived areas often experience higher levels of mental health need and face greater barriers to accessing support. | <p>advisory approach to mitigate potential negative impacts of the proposals on children and young people, particularly those in deprived or rural communities.</p> <p>By working closely with the Integrated Care Board, BHFT, schools, and voluntary sector partners, the Council can help target support where it is most needed and ensure guidance is applied in a way that reflects local needs.</p> <p>Advisory guidance on trauma-informed practice, mental health support, and online safety provides a consistent framework even</p> | (PEP/ SEMH Manager) | following teams: EPS EHA, EBSA, Exclusions and PIP Team |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|------------------|-----------------|-----------------|------------------------------|--|---|--|
| | | | | | <p>where the Council cannot directly deliver services.</p> <p>To address the risk of unconscious bias, the Council promotes reflective supervision and peer support among staff. This ensures that decisions and support remain culturally sensitive, inclusive, and equitable across all protected characteristics, including age, disability, race, religion or belief, sex, sexual orientation, and gender identity.</p> <p>Finally, the Council will explore external funding and phased approaches to extend support to</p> | | |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|--------------------------|-------------------------------------|--------------------------|--|---|--|---|
| | | | | | underserved communities over time. Together, these measures aim to reduce inequalities, improve access to mental health and wellbeing services, and provide fair, inclusive support while acknowledging current resource constraints. | | |
| Displaced communities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Children and young people from displaced communities; such as refugees, asylum seekers, or those who have recently relocated, may face additional challenges, including trauma, language barriers, and difficulty navigating | To address the risk of unconscious bias and ensure high-quality, equitable practice, the Council promotes reflective supervision, peer supervision, and up-to-date Continuing Professional Development (CPD). This ensures staff | All SEMH Managers for EHA, Exclusions, EBSA and PIP Teams. | Oversee the work within the following teams: EPS EHA, EBSA, Exclusions and PIP Team |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|------------------|-----------------|-----------------|--|---|---|--|
| | | | | <p>local services. The Council's approach, focusing on partnership working with health services, schools, and voluntary sector organisations, as well as providing advisory guidance on trauma-informed practice, aims to improve access, understanding, and support for these groups.</p> | <p>maintain culturally sensitive, inclusive, and evidence-based approaches across all protected characteristics and communities.</p> <p>Finally, the Council will explore external funding and phased approaches to extend support to underserved communities over time. Together, these measures aim to reduce inequalities, improve access to mental health and wellbeing services, and enhance practice, while acknowledging current resource constraints.</p> | | |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|--------------------------|-------------------------------------|--------------------------|---|---|---|--|
| Care experienced people | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <p>Care-experienced young people often face higher risks of mental health challenges, social disadvantage, and difficulty accessing consistent support.</p> <p>The Council's approach, focusing on trauma-informed practice, advisory guidance for schools, partnership working with health services, and improving navigation of services, is designed to enhance support and reduce barriers for care-experienced children.</p> | <p>Mitigation measures, including reflective and peer supervision, up-to-date CPD, and culturally sensitive practice, and links with social care, help ensure that staff are equipped to provide equitable, high-quality support tailored to the needs of care-experienced children. Where resources allow, external funding and phased initiatives will also be explored to ensure these young people receive appropriate, targeted mental health and wellbeing support.</p> | | <p>Oversee the work within the following teams: EPS EHA, EBSA, Exclusions and PIP Team</p> |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|--------------------------|-------------------------------------|--------------------------|---|--|---|---|
| The Armed Forces Community | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Children and young people from Armed Forces families may face unique challenges, such as frequent relocations, parental deployment, or adjustment stress, which can affect mental health and emotional wellbeing. | Mitigation measures, such as reflective and peer supervision, ongoing CPD, and culturally sensitive practice, ensure that staff are equipped to recognise and respond to the specific needs of Armed Forces children, promoting equitable and inclusive support across this community. | Crystal Elkabbas (PEP/ SEMH Manager) | Oversee the work within the following teams: EPS EHA, EBSA, Exclusions and PIP Team |

Section 4: Review

Where bias, negative impact or disadvantage is identified, the proposal and/or implementation can be adapted or changed; meaning there is a need for regular review. This review may also be needed to reflect additional data and evidence for a fuller assessment (proportionate to the decision in question). Please state the agreed review timescale for the identified impacts of the policy implementation or service change.

| | |
|--------------------------------------|--|
| Review Date | |
| Person Responsible for Review | |
| Authorised By | |

EDI employee related EQiA's should now be sent to Human Resources hrenquiries@westberks.gov.uk.

Appendix B

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: | Education, Children's Services |
| Service: | SEMH Services |
| Team: | All SEMH Services |
| Lead Officer: | Crystal Elkabbas |
| Title of Project/System: | Children and Young People's Emotional Wellbeing and Mental Health |
| Date of Assessment: | 09/02/2026 |

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><i>Note – sensitive personal data is described as "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 checked="" type="checkbox"/> | <input type="checkbox"/> |
| <p>Will you be processing data on a large scale?</p> <p><i>Note – Large scale might apply to the number of individuals affected OR the volume of data you are processing OR both</i></p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <p>Will your project or system have a "social media" dimension?</p> <p><i>Note – will it have an interactive element which allows users to communicate directly with one another?</i></p> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <p>Will any decisions be automated?</p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Equity Impact Assessment

| | Yes | No |
|---|--------------------------|-------------------------------------|
| 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? | | |
| Will your project/system involve CCTV or monitoring of an area accessible to the public? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will you be using the data you collect to match or cross-reference against another existing set of data? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will you be using any novel, or technologically advanced systems or processes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Note – this could include biometrics, "internet of things" connectivity or anything that is currently not widely utilised | | |

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.

Report of the Children's Mental Health and Emotional Wellbeing Task and Finish Group

(July 2025)

Executive Summary

The Health Scrutiny Committee (HSC) established a Task and Finish Group to look at Children's Mental Health and Emotional Wellbeing. This report presents the findings of the review undertaken by the Task and Finish Group and its recommendations for improvement.

The review focussed on three key areas:

- Part 1: Assessment of the current needs and provisions in West Berkshire.
- Part 2: The system approach to prevention, early intervention and mental health support for young people.
- Part 3: Extensive, evidence informed treatment and crisis services.

The Task and Finish Group identified a number of recommendations arising from this work, which are set out in Section 5 of this report. The Health and Adult Social Care Scrutiny Committee is invited to review the recommendations and consider whether these should be referred to the Executive and to the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board.

1. Introduction

- 1.1 There is an increasing and worsening trend of school pupils with social, emotional and mental health needs in West Berkshire. Good mental health and wellbeing for all children and young people (CYP) is a key priority in the Health and Wellbeing Strategy. Poor mental wellbeing in childhood increases the likelihood in later life of poor educational attainment, anti-social behaviour, drug and alcohol misuse, teenage pregnancy, and involvement in crime, along with wider mental health problems.
- 1.2 The task group reviewed the accessibility and provision of support for children and young people at all levels of need and whether the current provision was able to meet their diverse needs. Throughout the review the task group considered evidence including public health data, survey results, service provisions and best practice. With consideration to the impact of neurodiversity on emotional wellbeing and mental health needs, the review included the services that are in place to support those who have a neuro difference (whether diagnosed, awaiting assessment or neither).

2. Purpose and Membership of the Task and Finish Group

- 2.1 The HSC established a Task and Finish Group to look at Children's Mental Health and Emotional Wellbeing in September 2024. The Terms of Reference were drafted in collaboration with officers in Public Health, Children's Services and Health service providers. A copy of the terms of reference is provided in Appendix A.
- 2.2 The scope of the review was focussed on three key areas:
1. Assessment of the current needs and provisions in West Berkshire.
 2. The system approach to prevention, early intervention and mental health support for young people.
 3. Extensive, evidence informed treatment and crisis services.
- 2.3 The Task and Finish Group comprised the following Members:
- Councillor Martha Vickers (Chairman)
 - Councillor Martin Colston (Vice-Chairman)
 - Councillor Paul Dick
 - Councillor Owen Jeffery
 - Councillor Stephanie Steevenson
 - Councillor Clive Taylor

3. Meetings and Witnesses

- 3.1 The Task and Finish Group held five sessions between November 2024 and May 2025 to hear evidence from a wide variety of key stakeholders. These included Council officers and representatives from the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB), Berkshire Healthcare NHS Foundation Trust (BHFT), Berkshire Youth, Time to Talk, Swings and Smiles, and local schools. A full list of witnesses is provided below.
- 3.2 To understand the local landscape of needs and provisions in West Berkshire, the Task and Finish Group convened witnesses from public health, youth services, education, children's services, counselling services, and health. Members were provided with public health data, youth survey results, service provision information and best practice guidance. The evidence shared and discussed enabled Members to gain a thorough understanding of the approaches of local organisations who worked with children and supported their mental health and emotional wellbeing.
- 3.3 To drill down on the experiences of young people and the provisions available for early help and support, the Task and Finish Group brought together witnesses

Appendix C

from a local primary and secondary school, the Local Authority’s Mental Health Support Team, and the Emotional Health Academy. Youth services, health, early years, education and voluntary sector colleagues supported the discussions. The evidence shared included service provision information and the experience of two local schools, as well expertise shared on local opportunities and constraints faced.

- 3.4 Health colleagues shared with Members detailed evidence on the wide-ranging services provided by Berkshire Healthcare NHS Foundation Trust (BHFT) for supporting children and young people with more complex mental health needs. Members reviewed detailed reports provided on service delivery, performance, concerns and barriers faced.
- 3.5 During the sessions, partners shared experiences and expertise with Members and colleagues. Through the discussions partners collaborated, shared ideas and learnt from one another. This helped to build relationships and generate ideas and actions for change. Members of the Task and Finish Group would like to thank all of the witnesses who took part in the review.
- 3.6 The three key evidence gathering sessions were:

| Date | Focus of Meeting | Witnesses |
|-------------------|--|---|
| 28 Jan 2025 | Part One - Assessment of current needs and provisions in West Berkshire. | Steven Bow (Consultant in Public Health) Nerys Probert (Senior Programme Officer, Public Health) Paul Trinder (Public Health) Paul Graham (Health and Wellbeing in Schools Coordinator) Sarah Emery (Berkshire Youth, Chief Executive Officer) Kelly Leach (Berkshire Youth, Youth Worker) Davina Nicholson (Time to Talk, Clinical Director) Louise Noble (Service Director, Children, Families and All-Age Services, BHFT) Helen Alderman (Service Director for Universal and Specialist Children’s, Family and Neurodiversity Services, BHFT) Jody Gordon (Emotional Health Academy Team Manager) Stephanie Coomber (Team Manager Children’s Services) |
| 25 Feb 2025 | Part Two - Thriving, Getting Advice and Signposting, and Getting Help: Review | Jody Gordon (Emotional Health Academy Team Manager) |

Appendix C

| | | |
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| | <p>the system approach to prevention, promotion, early intervention and mental health support for young people.</p> | <p>Neal Ridley (Mental Health Support Team Manager)</p> <p>Rhiannon Dargon (Assistant Headteacher Thatcham Park Primary School)</p> <p>Owen Joyce (Senior Mental Health Lead, Kennet School)</p> <p>Rhonda Nicklin (Chief Executive Officer, Swings and Smiles)</p> <p>Beth Kelly (Head of Early Years)</p> <p>Steven Bow (Consultant in Public Health)</p> <p>Nerys Probert (Senior Programme Officer, Public Health)</p> <p>Paul Graham (Health and Wellbeing in Schools Coordinator)</p> <p>Neil Goddard (Service Director Education and SEND)</p> <p>Sarah Emery (Berkshire Youth, Chief Executive Officer)</p> <p>Kelly Leach (Berkshire Youth, Youth Worker)</p> <p>Louise Noble (Service Director, Children, Families and All-Age Services, BHFT)</p> <p>Helen Alderman (Service Director for Universal and Specialist Children’s, Family and Neurodiversity Services, BHFT)</p> <p>Lajla Johansson (Lead for CYP, Learning Disability and SEND, BOB ICB)</p> <p>Vivienne Okoh (Head of Children’s Commissioning, BOB ICB)</p> |
| <p>25 Mar 2025</p> | <p>Part Three - Getting More Help Services and Getting Risk Support: Extensive, evidence-informed treatment and crisis services.</p> | <p>Louise Noble (Service Director, Children, Families and All-Age Services, BHFT)</p> <p>Helen Alderman (Service Director for Universal and Specialist Children’s, Family and Neurodiversity Services, BHFT)</p> <p>Dave Wraight (Service Manager, Youth Justice Support Team & Supporting Families)</p> <p>Vivienne Okoh (Head of Children’s Commissioning, BOB ICB)</p> <p>Steven Bow (Consultant in Public Health)</p> <p>Jody Gordon (Emotional Health Academy Team Manager)</p> |

4. Findings

Part 1: Assessment of the current needs and provisions in West Berkshire

4.1 This part of the review considered:

- The current mental health and emotional wellbeing needs of the young people in West Berkshire.
- The underlying causes of increasing mental health needs among children and young people (CYP).
- The local landscape for meeting those needs.
- Current issues, concerns and barriers.
- Relevant public health principles and models.
- An understanding of the THRIVE Framework.

4.2 Members of the Public Health Team were invited to provide data on the current needs and provisions in West Berkshire. They shared an overview of public mental health, a summary of the mental health and emotional wellbeing needs of CYP in West Berkshire and the strategic context. The results of the latest Berkshire Youth Survey (2023) were also shared. Throughout the session, key stakeholders shared their experience and knowledge to add breadth to the evidence. Points of key learning were:

4.3 The 2024 West Berkshire 0 – 19 Health Needs Summary was shared with Members to provide insight into the current status. This included demographic data such as deprivation and housing, maternal and infant health indicators as well as data on the health of primary and secondary school children. Specific evidence was shared in relation to adverse childhood experiences and the number of children in West Berkshire experiencing parental separation, abuse, domestic abuse and mental illness. The overall picture shared was one of significant concern around a worsening trend of school age CYP with social, emotional and mental health needs. In 2023, it was estimated that around one in every five children and young people aged 8-25 had a mental health difficulty (a probable mental health disorder that may be undiagnosed) in England. In West Berkshire it is estimated that 1098 primary-aged children had a diagnosed mental health disorder along with 1,940 11 to 16 year olds in 2022/23. In addition, 2616 children in secondary school were estimated to have emotional, behavioural, hyperactivity or other disorder relating to their mental wellbeing. The number of hospital admissions as a result of self-harm amongst CYP aged 10 – 24 years was a higher than the England average. Witnesses advised that there had been rapid and sustained increases in demand for early help services, mental health services and neurodiversity assessment pathways since 2020 and the most significant barrier for CYP accessing support was waiting times. It was advised that enquires to the Children's Services Early Response Hub had increased hugely since it was set up and that the overwhelming risk factor for enquiries were children's mental health and emotional wellbeing. It was advised by a witness that the impact of significant and sustained reductions in funding for

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youth services for 10 to 15 years was starting to be seen in the current generation of CYP.

- 4.4 Information was provided on public mental health including the wider determinants and root causes of poor mental health. There were various risk factors in society such as the local environment, poor quality housing, poverty, people's experiences and physical health that impacted on mental health. Protective factors included the support services delivered, such as early years support, family and parenting support, as well as factors such as good quality housing, community assets, outdoor space, education and community cohesion. These all had an impact on a person's mental wellbeing.
- 4.5 It was highlighted that by addressing the root causes, such as poverty and poor nutrition, through an integrated evidence-based approach, sustainable improvements could be made to children's physical and emotional health. It was of particular note that the first 1001 days of a child's life were crucial for shaping brain development and long-term health outcomes. The importance of Early Years was identified as key to prevention and how fundamental Health Visitors were in supporting parents of younger children. Data was shared that the percentage of children with free school meal status achieving a good level of development at the end of Reception was particularly low in West Berkshire. The proportion of children on child protection plans and child in need plans was also above the England average.
- 4.6 It was advised that the most critical aspect of focus should be on trauma. Evidence showed that trauma (the result of events or circumstances ranging from abuse and neglect to unmet emotional needs such as parental disconnection or isolation) profoundly affected a person's emotional and psychological development. Such trauma could alter brain development, affect physical health and lead to negative patterns of behaviour. Key principles of healing from trauma were shared along with the role of relationships, the environment and social connections in preventing trauma. It was stressed throughout that having a trauma-informed approach was essential to improving children's mental health and wellbeing. It was suggested by witnesses that West Berkshire become a trauma-informed district. This means that through providing policies, training and resources, adults can create supportive, understanding, and healing-centred environments. With stronger community relationships, CYP feel safe, valued, and empowered to thrive.
- 4.7 The evidence highlighted that 44% of households in West Berkshire were deprived on at least one dimension of deprivation (education, employment, housing or health). 10% of children under the age of 16 were living in poverty in West Berkshire and this was increasing. In light of the Government's Fair Funding review, there is concern that West Berkshire is not recognised as having as high areas of deprivation compared to other Council areas. The task group also reviewed data showing an increase of Children in Need in West Berkshire over the last three years along with those on Child Protection Plans and Looked after Children. Pupils meeting a good level of development at the end of Reception year was much lower for children who were eligible for free school meals.

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- 4.8 The task group considered the mental health support needs of young carers. It was advised that although there is no specific mental health support provided for this group, by being identified as young carers it means that professionals around them would be more aware of their caring role and therefore more able to identify when they are struggling. This may then lead to improved access to services and other support from professionals working with the young carer such as at school. There is also a respite offer available for young carers.
- 4.9 Members heard about the work of Berkshire Youth who provide support for young people through a wide range of approaches including outreach services, targeted programmes within schools, a young leaders programme and mentoring, as well as providing a wide range of pastoral activities for young people. Berkshire Youth work across West Berkshire in schools, towns and villages. The Berkshire Youth's Waterside Centre in Newbury is a youth and community centre that is a safe place for young people to access support, activities and opportunities whilst also providing a hub for the local community to connect and network. Berkshire Youth work in a network with other youth service providers across West Berkshire to provide advice, support and services. It was advised that funding for youth services had been significantly reduced over the past 15 years, and this had affected the impact of youth services across the district. This meant that only a small proportion of young people accessed youth services across West Berkshire, with particular gaps in provision in more rural areas. In addition, it was raised whether those most in need were being reached and noted that the long-term impact on the young people and their communities would grow exponentially as they became adults.
- 4.10 Members heard about the work of Time to Talk which is a charity that provides counselling services for people aged 11 to 25 and their families. Time to Talk support 600 young people in West Berkshire each year through one to one sessions, group work and online support. Time to Talk also work in partnership with schools and colleges such as to provide an onsite counsellor or assemblies and talks.
- 4.11 The results of the 2023 West Berkshire Youth Survey were shared with the Task and Finish Group. The two-yearly survey was completed by 50% of secondary school pupils in West Berkshire. The Task Group discussed in detail the survey results which included questions around happiness, local services and amenities, concerns and support, experiences online, personal safety and the future. Mental health was a key theme that emerged from the survey. When asked '*What do you think are the most important concerns facing you and other young people at the moment?*', more than 50% of respondents selected mental health and wellbeing and it was the second most chosen option after school pressure and exams. 33.3% of young people wanted more information on mental health and wellbeing. The majority of young people reported feeling safe and happy in the area that they lived. This highlighted how central mental health and wellbeing are to CYP and to have access to support and resources.
- 4.12 During the discussion, witnesses highlighted additional key points that young people shared with them and that they noted through their work with young people. It was reflected that mobile phones and increased connectivity made it hard for CYP to have respite from the pressures in their lives. Secondary schools

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had very high conformity requirements and expectations that could contribute to anxiety. In addition, it was noted that CYP's brains are still developing and many find academic study challenging for a number of reasons. It was advised that it is somewhat normal for children and young people to dislike school and to feel pressure in terms of education and friendships. There is a risk of inadvertently medicalising a young person's difficulties. Destigmatising mental health was welcome progress, but it was important not to disempower young people.

- 4.13 The Youth Survey found that the cost of activities locally could be a barrier to participation with 48% of young people ranking these as fair or poor. This was particularly the case for older teenagers. It was noted that young people did not have access to the same facilities that adults do. They may not be welcome in large groups or may need to pay such as at coffee shops. Communities needed a focal point for young people, such as that the Youth Café at the Waterside Centre in Newbury. This did not need to be a purpose-built facility but required youth ambassadors to consider the use of available spaces for young people to use. It was noted that this was particularly difficult for children who lived in rural areas.
- 4.14 There was discussion around what had led to the high numbers of children experiencing mental health issues. It was advised that this cohort of young people had grown up with a reduced provision of universal services. The soft skill development of trying new things, building skills and building resilience were protective factors around mental health. The lack of services and places for young people to go meant that what we see today was the outcome for young people. This impacted on families living in deprived areas in particular and led to inequalities in mental health.
- 4.15 78.1% of youth survey respondents advised that they would speak to a parent or carer if they were worried about something bad happening, and so supportive networks were essential for parents and carers. Support and training for parents was needed as with any health concern. It was advised by a witness that early interventions for mental health challenges were often focussed on the young person, and that very little family therapy was available. Witnesses agreed throughout the session that prevention was key and that being trauma informed and addressing parenting and support for families was essential. It was also advised that continuity of relationships with a trusted adult was fundamental.
- 4.16 The strategic context was explained in that promoting good mental health and wellbeing for all children and young people was a key priority of the Health and Wellbeing Strategy 2021-2030. Under this priority expanding the trauma informed approach was identified.
- 4.34 The THRIVE framework that was used to structure this review is a needs-led and data informed approach used by partners to encourage shared decision-making and to help identify opportunities for improvement. The THRIVE framework sets out 5 domains (Thriving, Getting Advice, Getting Help, Getting More Help and Getting Risk Support). It is recognised that children and young people may move between domains or occupy more than one. THRIVE promotes cross agency working and a shared language and understanding across health, education, and social care.

Part 2 - Thriving, Getting Advice and Signposting, and Getting Help: Review the system approach to prevention, promotion, early intervention and mental health support for young people.

4.18 This part of the review considered:

- Early intervention provisions and opportunities.
- The experiences of children and young people.
- The Council's role.
- The approach and services within schools.
- The role of community organisations.
- The legal, ethical and professional requirements relevant to service delivery.
- How the system worked together.
- The interventions in place for people who are neurodivergent.

4.19 Members were joined in this session by representatives from Education, Health, schools and the voluntary sector. Throughout the session, key stakeholders shared their experience and knowledge to add breadth to the evidence provided. Public Health provided an overview of the service provisions available locally including local support providers and voluntary organisations. Points of key learning were as follows:

4.20 Members were provided with an overview of the services provided by West Berkshire Council's Emotional Health Academy (EHA) and the Mental Health Support Team (MHST). These services provide evidence-based early interventions for CYP and their families. The EHA also coordinate the multiagency triage process which directs CYP and their families to appropriate early support. Both the EHA and the MHST work in a variety of community settings including schools and provide direct therapeutic work as well having a training and preventative role. They provide parent workshops, parent group interventions and hold drop-in sessions for awareness campaigns. The MHST works with Senior Mental Health Leads (SMHL) in schools to help develop whole school approaches and to provide advice and support to schools in supporting young people with mental health or emotional wellbeing challenges.

4.21 It was advised that there had been a substantial increase in the number of referrals to the EHA and the MHST since 2021 and that the most significant barrier for CYP to access support was waiting times. Between September 2023 and August 2024, 1,861 referrals were made requesting support.

4.22 It was advised that schools had access to a number of opportunities to support students with their mental health and emotional wellbeing. These included Emotional Literacy Support Assistants, Counselling (in school or through a provider such as Time to Talk), Social and Emotional Mental Health Practitioners from the Council, and traded services such the Emotional Health Academy and the Education Psychology Service. Most secondary schools provided a peer-to-peer support programme as well as engaged in school campaigns such as children's mental health week and other initiatives such as friendship benches

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and buddy schemes. Schools also have a statutory duty to teach relationships and health in schools and teachers are encouraged to engage with local networks, understand best practice and access training from national organisations. The Council's Health and Wellbeing in Schools service also enables continuous professional development opportunities.

- 4.23 Members heard from representatives of a primary and a secondary school about their experiences of supporting young people with their emotional wellbeing and mental health and how they access the opportunities and accessed services. It was noted that schools take a proactive approach to mental health by providing opportunities for CYP to build skills and resilience. Dedicated teachers and other professionals work collaboratively to engage the right environment for each young person. An example was shared where the House system and tutor teams at a secondary school were there to ensure every child had a trusted adult they could go to and provided a sense of belonging. A wide-range of activities, out of school hours clubs and events were offered. There were weekly meetings to discuss the support and learning needs of children in need of extra support. They could then access MHST, counselling or other local services as appropriate. This prevention and early intervention work was essential in supporting CYP. It was highlighted that the capacity of schools to access these opportunities varied due to the sizes of the schools, links to other schools and budget constraints.
- 4.24 Members heard that there are a wide range of local services that young people can access for support. These include healthcare services, counselling, social and mental health practitioners at the Council and services provided by charitable organisations such as Swings and Smiles, The Corn Exchange, Berkshire Youth and the Watermill. These organisations provide various opportunities and programmes to support the wellbeing of young people and their families. These include youth clubs, training for parents, programmes of support, counselling, signposting and support / advice opportunities. The local early intervention services work collaboratively together and with schools to prevent, promote and support mental health and emotional wellbeing in children as well as build skills and resilience.
- 4.25 Through the discussions a number of key areas of note and challenges were identified. The biggest challenge was the rapid increase in referrals for early interventions services such as the EHA and MHST between 2022 and 2024. The increase in demand for services were multifactorial including the impact of Covid restrictions, improved awareness of mental wellbeing, reduced stigma, increase in costs of living and increasingly complex needs such as emotion-based school avoidance and high anxiety and stress for children with autism.
- 4.26 It was highlighted that the MHST did not cover all schools in West Berkshire with particularly gaps in the east of West Berkshire. Whilst the EHA picked up some of that it was noted that these schools were missing out on opportunities provided to schools with MHST coverage. It was advised that the geography of the schemes was determined by the funding agreement. The BOB ICB, who allocated the funding for the service, advised they were awaiting further details about the NHS plan to fund MHST's in the future.
- 4.27 The role of a Senior Mental Health Lead (SMHL) in schools is fundamental. They are responsible for overseeing and promoting mental health and wellbeing for all students and staff. They lead the development and implementation of a whole-

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school approach and ensure timely and appropriate support for students' mental health need. 59 out of the 80 schools in West Berkshire have a SMHL who received training through a government grant funded scheme. The reason that not all school had a SMHL was because of capacity or the member of staff leaving the school. It was advised that this grant funding scheme had now ended. Schools could still access the training but would need to fund it from their budgets. Members noted the dedication by schools to support CYP mental health and emotional wellbeing, but it was asked whether all schools have the capacity to provide the opportunities, how they learnt from each other and what was in place across all schools. SMHL's in West Berkshire meet twice per year at an event to network and learn from each other.

- 4.28 The importance of sport and activity on mental health was discussed. It was noted that a safe and inexpensive environment outside of school hours was difficult to access and it was asked whether schools provided access to their facilities outside of school. It was noted that many schools provided after school clubs at no or minimal cost. It was raised whether there were any schemes that enabled young people to access school facilities out of hours.
- 4.29 It was highlighted that the upskilling of young people was crucial and so by providing opportunities for CYP to build resilience and develop tools to navigate life was essential. This was best achieved by working with parents and families as well as schools. There were various programmes provided by local organisations that provided opportunities. Examples shared included Berkshire Youth (In schools and at the Waterside Centre) and Swings and Smiles who were providing a Building Resilience Programme for children aged 3 -11 who had recently received a diagnosis with their families.
- 4.30 Parenting support was an emerging theme throughout the task group where it was identified that supporting parents was key to prevention and early intervention for CYP with mental health or emotional wellbeing concerns. There were numerous opportunities locally for parents to access support and training for example at family hubs, through Swings and Smiles, Berkshire Healthcare, schools, the Emotional Health Academy, the Mental Health Support Team and others. It was identified that a great deal of support was available for parents for children in early years and a concern was raised that perhaps access to support was not so easy for parents of older children and teenagers.
- 4.31 Members discussed the support available for children that were homeschooled. It was advised that whilst there was not a duty for parents to respond to offers of support, the Local Authority encouraged parents to be involved. New legislation was being considered in this area.

Part 3 - Getting More Help Services and Getting Risk Support: Extensive, evidence-informed treatment and crisis services.

- 4.33 This part of the review considered:
- The specialist services available for complex mental health difficulties.
 - The opportunities to improve.
 - Services for targeted population groups.

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- The skills mix of professionals and resources.
 - How services work together.
 - The transition arrangements for young people aged 18 onwards.
- 4.35 Members were provided with detailed reports on the services provided by Berkshire Healthcare NHS Foundation Trust (BHFT). These included the wide range of mental health services provided by Children and Adolescent Mental Health Services (CAMHS) and pathways provided by the Children and Young People's Neurodiversity Service for Autism and ADHD. Throughout the session, key stakeholders shared their experience and knowledge to add breadth to the evidence. Points of key learning were:
- 4.36 Following a long period of significant underfunding, a programme of investment began along with a requirement for local areas to collaborate and develop a Local Transformation Plan. Investment was made in early health services such as the EHAs and MHSTs along with youth counselling services and other specialist services. For BHFT this included specialist CAMHS services that they provide across the county. Local Transformation Plans (LTP's) set out how local services will invest to improve children and young people mental health. The plans are refreshed annually and report on agreed priorities for the area and set out ambitions for development and improvement across the whole system.
- 4.37 There is a single point of access into CAMHS. The aim is to identify need and difficulties early so that CYP can access the appropriate services earlier. This could be for school support, MHST, youth counselling or BHFT services.
- 4.38 The services provided by CAMHS are for Getting Help and Getting Risk level support for mental health issues. Getting advice level support, such as that provided by the Emotional Health Academy, was commissioned by BHFT in West Berkshire. CAMHS include targeted services such as for youth justice and learning disabilities as well as universal services such as intensive treatments, eating disorder services and the anxiety disorder treatment team. The broad range of services provided by CAMHS has developed over the years with the new investment and focus from NHS England, this has resulted in a complex picture of services. Work is ongoing to streamline the structure to make it easier to understand.
- 4.39 In all service areas, CAMHS work very closely with partners such as children's social care or the youth and justice service.
- 4.40 To manage waiting lists and to drive improvements in the services, BHFT have a quality improvement programme and staff are trained in quality management.
- 4.41 CAMHS are undertaking three pilots in primary care across Berkshire West (West Berkshire, Reading and Wokingham areas) for a children and young people's (CYP) mental health worker employed under the additional role reimbursement scheme (ARRS) in GP surgeries. The pilots have been very effective as they support CYP with low level anxiety and identified CYP with behaviour related to neurodiversity. This enables CYP to be directed to the right

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service earlier. The pilots are currently being reviewed for their impact and then BHFT may look at how this could be resourced within current funding.

- 4.42 It was highlighted that feedback from all services was good. Once children were seen by the right service, the outcomes were good. There was range of different outcome measures.
- 4.43 BHFT were finding that many CYP were presenting with complex needs and high-risk behaviour but who did not have a mental health disorder. The services supporting these young people such as youth and justice and children in care were working with different targeted groups of young people. BHFT were looking at how they could work with a wider group of young people in the same way.
- 4.44 It was advised that the workforce was used flexibly where possible to address services that had longer waiting times. However, staff recruitment and funding could be a challenge. There were also digital tools that could support the services.
- 4.45 It was noted that the evidence shared showed a correlation between deprivation and the urgent referrals. Reducing health inequalities was a key objective for BHFT. Their approach to inequalities was relatively new, but they were unpicking where there might be problems and how to address them.
- 4.46 BHFT were doing some research with the University of Reading in relation to sign posting. They were looking to understand whether young people were getting to the right services for them and whether the process was effective.
- 4.47 It was confirmed that BHFT worked in a reactive way to mental health needs. This was due to funding. The Emotional Health Academy and the MHST did more proactive work and resilience building activities.
- 4.48 The CYP Neurodiversity service was commissioned by BHFT and was separate to CAMHS. It provided the diagnostic pathways for Autism and ADHD and medication provision for ADHD. It was a multidisciplinary team who worked in partnership with various local organisations.
- 4.49 Demand for the service had increased 215% in the last four years. Despite significant investment in the service, including an increase in workforce and improved efficiency, it was a balloon service where demand outweighed the number appropriate to discharge.
- 4.50 Average waiting times for ADHD assessment was 115 weeks and 99 weeks for Autism assessments. The data showed that if nothing changed in the process, there would be 17322 CYP waiting for assessments by February 2026 (which equals 7% of all Berkshire CYP).
- 4.51 The Autism pathway was an assessment only service and the wider system provided the support. Of the ADHD referrals, 80% were accepted into the service and would require medication and some workload for the service (medication reviews and annual reviews). It was advised that there was work to do around

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the transition from children to adult services. There was equal or longer waits for adult services.

- 4.52 The service was also seeing more children with very complex needs that wasn't only neurodiversity. There could also be mental health issues, learning disabilities and other complexities affecting the child's life and education.
- 4.53 The CYP Neurodiversity service recently made changes to the referral process to a more needs-led system approach where CYP received the right support, at the right time and in the right place, regardless of a diagnosis. Referrals were now made jointly by families and early years settings / schools in partnership. Referrals needed to be made after a minimum of a six-month support plan was fully implemented and evaluated by the school. This ensured that early needs-led help was provided and CYP were not added to the waiting list without help in place. This approach aligned with the SEND Code of Practice. It was confirmed that this was to provide an informed picture of all environments for a CYP because many CYP will mask at school and the challenges may be only visible at home or not at all. It was advised that the support provided by schools, and the outcome of that support, informed the assessment.
- 4.54 Since the new process went live, there has been feedback from parents, carers and education colleagues. In response to that, BHFT built a platform for online resources on the BHFT website with clear guidelines on how to support a child. They were continuing to look at this and at how to streamline the forms required for schools. The referral process brought all the paperwork to the beginning of the process and so initially it was taking more time for schools.
- 4.55 For the majority of CYP presenting to CAMHS in crisis it was their first presentation to local health services. They weren't CYP in a service struggling and in need of extra support nor were they on waiting lists. The two biggest reasons were parents and CYP themselves being unable to cope with their behaviour which was generally related to neurodiversity, or the second reason was challenges in school. This new process ensured that CYP would not be advised that they need a diagnosis before accessing support and a support plan could be put in place. And so, from a mental health perspective, this rationale had the potential to have a very beneficial impact.
- 4.56 The six Local Authorities in Berkshire, the two ICB's and Berkshire Healthcare were working together to bring in and embed a profile tool for teachers to identify needs and strengths to help a child in school.
- 4.57 Families and CYP on waiting lists for assessments were offered support. This included an online platform called SHaRON which was a social network for parents and carers to communicate. It was moderated by clinicians. There were also specific SHaRON networks for example for parents of children with anxiety. It was available 24 hours a day, 365 days a year.
- 4.58 The reasons for increased referrals for ADHD and Autism assessments were not known. It was a national issue that was being researched. There was a dramatic increase during and after Covid. CYP often mask at school and so when children

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were home during the pandemic it began to show more. In addition, there is increased awareness of neurodiversity.

- 4.59 The diagnosis of neurodiversity can be very important for an individual to understand themselves and can be essential for their wellbeing. The earlier they had this understanding the better. People diagnosed as adults often reflected that a diagnosis earlier in life would have helped them. However, the timing was important, and many may not want to seek a diagnosis. Therefore, where young people really needed an assessment because it was impacting on their emotional wellbeing and their sense of self, then they need to be able to access an assessment sooner.
- 4.60 An initiative where health and education specialist workforces support mainstream schools to improve their offer for neurodiverse children was being rolled out by the Government for another year as it had shown to make an impact.
- 4.61 BHFT had been successful in recruitment recently despite a national shortage of qualified staff. Their workforce was a skill mix that integrated well with schools to identify strengths and needs of CYP.
- 4.62 Keeping in touch was part of the BHFT quality improvement methodology. All levels of the organisation actively spent time observing and being part of the process. Managers of the EHA and MHST were involved in the delivery of therapeutic work. The MHST manager provided direct parent-led interventions, and the EHA manager provided direct therapeutic support.
- 4.63 CAMHS provided support for CYP who offend and have a mental health difficulty. There was a mental health practitioner, a physical health nurse and a speech and language therapist supporting children coming into the justice system. This was for assessments and identifying mental and emotional health needs. It was a multidisciplinary team including a teacher, social worker and police. The health professionals helped to upskill the team and educate parents. There were parent groups and courses which benefitted from the health practitioners' input. It was noted that LINK and Forensic CAMHS supported more complex children who were displaying particularly problematic and harmful behaviours. These services were extremely helpful. It was highlighted that many of the children worked with were from relatively deprived communities. Parents were struggling to navigate the system and the CYP needed to be assessed quickly and supported to break the cycle of despair. By having colocation of a skilled workforce, they could support children. For example, a CYP self-medicating with illegal drugs could be supported collectively by colleagues. It was highlighted that relationships with trusted adults were essential.
- 4.64 There was an NHS England commissioned liaison diversion service which helped to identify CYP early in the justice system who may have a mental health need. This was a signpost service that supported children when they went into police custody.
- 4.65 Public Health provided a core offer of commissioning support to the NHS which included bringing evidence and a data driven approach. Public Health also had a role in facilitating collaboration and coordination across the system. By looking

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at the gap between population health needs and the services being delivered in a systematic way, Public Health could provide support. In addition, they could look at the flow of patients or services users through the system and identify inequalities in access and outcomes as well. Public Health resources could be used to support colleagues with analytics and health equity assessments and in developing a system strategy for CYP mental health and wellbeing.

5 Recommendations

- 5.1 The Task and Finish Group wishes to put forward the following recommendations for consideration by the Executive and the BOB ICB.
- 5.2 All recommendations should be targeted to support children and young people most in need and to address health inequalities. In particular, for children living in deprived areas and children eligible for free school meals.
- 5.3 The final report will also be shared with the Children and Young People’s Scrutiny Committee.

| Ref | Recommendation | Lead |
|-----|--|---|
| 1 | <p>Provide and promote a Local Youth Offer:</p> <ul style="list-style-type: none"> • Include mapping of services, facilities and activities available to young people. • Collaborate with key stakeholders, including town and parish councils, to identify any gaps and opportunities for improvements. • Provide improved opportunities for young people to use local facilities, including school facilities and other local community spaces to be made available out of hours and the twinning of schools to share opportunities. • Provide subsidised access for children and young people eligible for free school meals to use leisure facilities. | Children’s Services - lead for the development of the Family Hub 0-19 service |
| 2 | <p>Improve the communication about and navigation of local services:</p> <ul style="list-style-type: none"> • Provide a clear road map of the early help services available from all local organisations. • Provide a streamlined overview of Children and Adolescent Mental Health Services (CAMHS). To incorporate research | Children’s Services – Lead for the digital offer (Family hub development) |

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| | <p>currently being undertaken regarding signposting and to ensure there is no 'wrong door'.</p> <ul style="list-style-type: none"> Review the support offer for parents including creating a central hub of information for support and a calendar of events and activities. Identify gaps and opportunities for improvement particularly for parents of older children, children eligible for free school meals and those living in deprived areas. Ensure support and engagement is targeted to address existing health inequalities. Provide clear communications to parents and the public about the Children and Young People's Neurodiversity services and the new pathway process. Work closely with schools as the new process is embedded and monitor impacts. | <p>BHFT – Service Director, Children, Families and All-Age Services</p> <p>BHFT - Service Director for Universal and Specialist Children's, Family and Neurodiversity Services</p> |
| 3 | <p>Provide and promote opportunities to regularly convene the wide range of professionals working with children and young people and supporting their mental health and emotional wellbeing to:</p> <ul style="list-style-type: none"> Develop an evidence-based system strategy for children and young people's mental health and wellbeing with a strong focus on health inequalities. Collaborate, network and share best practice to drive improvements. Expand children and young people mental health workers in GP surgeries into West Berkshire, prioritising GP surgeries in deprived areas. All schools to have a Senior Mental Health Lead. Schools in deprived areas to be identified and supported first. Emotional and mental wellbeing to be given high priority in the recommissioning of the 0-19 health visiting and school nursing service. Mental Health Support Team (MHST) Funding to cover all schools in West Berkshire. | <p>Children's Services</p> <p>Public Health – Senior Programme Officer</p> <p>BHFT – Service Director, Children, Families and All-Age Services</p> <p>Children's Services - lead for the development of the Family Hub 0-19 service</p> <p>BOB ICB</p> |
| 4 | <p>West Berkshire to become a Trauma-informed district that acknowledges the impact of trauma by providing policies, training and resources to create supportive, understanding, and healing-centred environments:</p> | <p>Public Health – Senior Programme Officer</p> |

Appendix C

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| | <ul style="list-style-type: none"> • A commitment to embrace and champion trauma informed practices and to formalise Trauma-informed practices into district-wide policies. • Provide guidance to help schools and other organisations to assess their current practices and implement trauma-sensitive approaches. • Professionals working with children to undergo training in trauma informed care and for ongoing workshops to be provided. • Provide workshops and resources for families to navigate Trauma-informed approaches at home. | Education – Service Director Education and SEND |
| 5 | <p>A full review of smart phones, social media use and online safety for young people in West Berkshire be carried out and to include:</p> <ul style="list-style-type: none"> • Review best practice and initiatives from other local authorities. • Consideration for school-policies and their implementation. • Support and advice for parents on the use of social media by children and young people and online safety. | Public Health – Senior Programme Officer Education – Service Director Education and SEND |
| 6 | <p>The West Berkshire Health and Wellbeing Board to include Children and Young People’s Mental Health as one of their priority areas of focus, and to develop their action plan to reflect this.</p> | Health and Wellbeing Board |

Appendix A: Terms of Reference

Health Scrutiny Review Matrix

Review Topic: Children's Mental Health and Emotional Wellbeing

Timescale

Start: November 2024

Finish: May 2025

Review Rationale:

There is an increasing and worsening trend of school pupils with social, emotional and mental health needs in West Berkshire. Berkshire Youth Survey results (2023) found that mental health was a key area of concern for secondary school students in West Berkshire who wanted more information or support for mental health and wellbeing. Good mental health and wellbeing for all children and young people (CYP) is a key priority in the Health and Wellbeing Strategy, which noted that children from households in the poorest areas of Berkshire West are four times more likely to experience severe mental health problems than those from the richest areas. Mental health problems during childhood can negatively impact developmental outcomes in adulthood.

The task group will review the accessibility and provision of support for children and young people at all levels of need and whether the current provision is able to meet their diverse needs. The task group will use the THRIVE framework to structure this review. This needs-led and data informed approach is used by partners to encourage shared decision making and to help identify opportunities for improvement.

With consideration to the impact of neurodiversity on emotional wellbeing and mental health needs, this review will include the services in place to support those who have a neuro difference (whether diagnosed, awaiting assessment or neither). There is rising demand, long wait times, increasing complexity and capacity concerns in West Berkshire.

The scope of the review will include:

- An understanding of the current mental health and emotional wellbeing needs of CYP in West Berkshire.
- Forming an understanding of the local approach and strategic direction to CYP's mental health and emotional wellbeing.
- Explore the contribution of, and integration between, the voluntary sector, education, early intervention support providers, local authority, primary care and secondary care.
- Review the current provision for supporting those who are neurodivergent and the neurodiversity assessment pathways.
- Review performance including waiting lists, patient feedback, communications, and consistency.

Appendix C

- Consider the transitional arrangements for 18 years old and onwards.
- Consider evidence-based best practice and guidance.
- Develop recommendations for improving future effectiveness in the system.

Terms of Reference:

The Task and Finish Group will consider the following:

Session 1: Assessment of current needs and provisions in West Berkshire

- Understand the current mental health and emotional wellbeing needs of the young people in West Berkshire.
- Consider the underlying causes of increasing mental health needs among CYP.
- Form an understanding of the local landscape for meeting those needs including healthcare service providers, schools, local authority and community / voluntary organisations (VCSE).
- Consider current issues, concerns and barriers.
- Form an understanding of the relevant public health principles and models.
- Form an understanding of the THRIVE Framework that the following task group sessions are based on.

Session 2: Thriving, Getting Advice and Signposting, and Getting Help:

Review the system approach to prevention, promotion, early intervention and mental health support for young people.

- Consider early intervention provisions and opportunities.
- Review the experience of children and young people.
- Understand the Council's role including the Mental Health Support Team and the Emotional Health Academy.
- Review the approach and services within schools.
- Understand healthcare's role in early intervention and support.
- Understand the role of community organisations.
- Understand the legal, ethical and professional requirements relevant to service delivery.
- Consider how the system works together and how key stakeholders work in partnership to address the needs identified in Session 1.
- Review of the interventions in place for people who are neurodivergent including support and communication on the neurodiversity assessment pathways and the referral system.

Session 3: Getting More Help Services and Getting Risk Support: Extensive, evidence-informed treatment and crisis services.

- Review of the specialist services available for complex mental health difficulties, eating disorders, psychosis and other acute mental health needs.
- Understand opportunities to improve needs-led support, determine the current and future demand, prevention and the prioritisation of funding.

Appendix C

- Consideration of services to targeted population groups such as children in care, youth health and justice and CYP with learning disabilities.
- Review the skill mix of professionals and resources available to meet the needs and / or choices of CYP.
- Review how services work together as a partnership to understand, prevent and manage risk.
- Review the transition arrangements for young people aged 18 onwards.

Session 4: Consider learnings from the task group and recommendations.

- Bring the learning together with partners.
- Consider relevant projects, services developments and best practice.
- Consider recommendations and highlights of note from the sessions.

Review Membership:

Councillor Martha Vickers
Councillor Martin Colston
Councillor Paul Dick
Councillor Owen Jeffery
Councillor Stephanie Steevenson
Councillor Clive Taylor

Chairman: Cllr Martha Vickers

Vice-Chairman: Cllr Martin Colston

Scrutiny Officer: Vicky Phoenix

Information Required:

- An overview of the THRIVE Framework.
- An overview of current emotional wellbeing and mental health concerns of children and young people in West Berkshire.
- Feedback and views of young people – gathered from Berkshire Youth Survey, service user feedback and service providers.
- Case studies, feedback and questions from members of the public.
- An overview of the Council's approach, services and provisions.
- An overview for the approach in school settings.
- An overview of the health service provisions to support children.
- Baseline data about service demand, provisions and performance. Including patient and resident feedback for all relevant services, and any associated health inequalities.
- The BOB ICB Local Transformation Plan for CYP mental health.
- Overview of any relevant projects or service developments in progress by stakeholders.
- An overview of the relevant public health principles and models.
- Relevant evidence-based best practice and guidance.
- Public Health commissioners feedback.

Appendix C

Witnesses:

- Education – primary and secondary
- Time to Talk
- Health – BOB ICB and Berkshire Healthcare NHS Foundation Trust
- Mental Health Support Team and Emotional Health Academy
- Public Health consultant
- Youth service providers and workers
- Health and Wellbeing in Schools Coordinator

Desired Outcomes:

Members will collate their recommendations which will then form the basis of a report to be considered by the Health Scrutiny Committee.

Recommendations from the Health and Adult Social Care Scrutiny Committee Task and Finish Group into Children’s Mental Health and Emotional Wellbeing

Chairman of the Task Group: Cllr Martha Vickers

Response from: Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB)
West Berkshire Council Executive

Portfolio Holder(s): Cllr Patrick Clark Executive Portfolio Holder Adult Social Care and Public Health
Cllr Heather Codling Executive Portfolio Holder Children and Family services

Deadline for response: Monday 15 September 2025

| Recommendation | Executive / ICB Response: Agree / Not Agree / Agree in Part to the recommendation and comments. | Portfolio Holder / Lead Health Partner / Lead Officer and timelines for delivery |
|---|--|--|
| 1) Provide and promote a Local Youth Offer: | | Children’s services – lead for development of the Family Hub. |
| 1a) Mapping of services, facilities and activities available to young people. | | |
| 1b) Collaborate with key stakeholders, including town and parish councils, to identify any gaps and opportunities for improvements. | | |
| 1c) Provide improved opportunities for young people to use local facilities, including school facilities and other local community spaces to be made available out of hours and the twinning of schools to share opportunities. | | |

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| <p>1d) Provide subsidised access for children and young people eligible for free school meals to use leisure facilities.</p> | | |
| <p>2) Improve the communication about and navigation of local services:</p> | | |
| <p>2a) Provide a clear road map of the early help services available from all local organisations.</p> | <p>The BOB ICB, in collaboration with BHFT and other local partners, is currently undertaking a comprehensive exercise to:</p> <ul style="list-style-type: none"> • Gain a clear understanding of the current position and the work already undertaken by BHFT and other stakeholders. • Conduct a thorough gap analysis to fully map the journey required to embed the iTHRIVE model across BW services. <p>As part of this initiative, the following activities are in progress:</p> <ul style="list-style-type: none"> • Process mapping across all three areas in BW to analyse service flows and pathways. • Service mapping to identify overlaps, opportunities for collaboration, and areas to drive greater efficiency. • Data mapping to assess demand versus capacity and accurately quantify service needs • Review of feedback received from individuals and families using these services | <p>Children's services / Education</p> <p>BOB ICB / BHFT</p> |
| <p>2b) Provide a streamlined overview of Children and Adolescent Mental Health Services (CAMHS). To incorporate research currently being undertaken regarding signposting and to ensure there is no 'wrong door'.</p> | <p>CAMHS provision falls within the scope of the review outlined in 2a, with the "no wrong door" approach serving as a fundamental component of the iTHRIVE framework.</p> <p>In addition, BHFT are redeveloping the Trust website. The new website will provide clear information on the CAMH services provided by the Trust.</p> | <p>BOB ICB / BHFT</p> |

Appendix D

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| <p>2c) Review the support offer for parents including creating a central hub of information for support and a calendar of events and activities. Identify gaps and opportunities for improvement particularly for parents of older children, children eligible for free school meals and those living in deprived areas. Ensure support and engagement is targeted to address existing health inequalities.</p> | | <p>Children's services – lead for development of the Family Hub.</p> |
| <p>2d) Provide clear communications to parents and the public about the Children and Young People's Neurodiversity services and the new pathway process. Work closely with schools as the new process is embedded and monitor impacts.</p> | <p>There has been extensive communication to schools, parents and the general public about the Children and Young People's Neurodiversity Services and new referral pathway process. Information about the services and how to make a referral are clearly displayed on the Berkshire Healthcare website: ADHD and Autism (Neurodiversity) Children Young People and Families Online Resource</p> <p>In addition, BHFT are redeveloping the Trust website. The new website will provide clear information on the Children and Young People's Neurodiversity Services and new referral pathway process.</p> <p>There is also work underway across the six LAs to become Needs-Led for neurodiversity and less reliant on diagnostic pathways.</p> | <p>BOB ICB / BHFT</p> |
| <p>3) Provide and promote opportunities to regularly convene the wide range of professionals working with children and young people and supporting their mental health and emotional wellbeing to:</p> | | |
| <p>3a) Develop an evidence-based system strategy for children and young people's mental health and wellbeing</p> | | <p>Children's Services</p> |

Appendix D

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| <p>with a strong focus on health inequalities.</p> | <p>The anticipated outcomes of the ICB-led review described in section 2a include the identification of system-wide priorities for supporting the mental health and wellbeing of children and young people. Particular emphasis will be placed on addressing inequalities, recognising their significant impact on the mental health and wellbeing of this population.</p> | <p>Public Health – Senior Programme Officer</p> <p>Children’s Services - lead for the development of the Family Hub 0-19 service</p> <p>BOB ICB / BHFT</p> |
| <p>3b) Collaborate, network and share best practice to drive improvements.</p> | <p>The ICB-led review described in section 2a is a system-wide initiative that actively engages key stakeholders and service providers. Through the process and service mapping exercises, various models will be explored to identify and share best practices across the system</p> | <p>Children’s Services</p> <p>Public Health – Senior Programme Officer</p> <p>Children’s Services - lead for the development of the Family Hub 0-19 service</p> <p>BOB ICB / BHFT</p> |
| <p>3c) Expand children and young people mental health workers in GP surgeries into West Berkshire, prioritising GP surgeries in deprived areas.</p> | <p>We are continuing with the current pilots of this model and will be reviewing impact and determining next steps within the review described in section 2a.</p> | <p>BOB ICB / BHFT</p> |

Appendix D

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| 3d) All schools to have a Senior Mental Health Lead. Schools in deprived areas to be identified and supported first. | | Public Health – Senior Programme Officer |
| 3e) Emotional and mental wellbeing to be given high priority in the recommissioning of the 0-19 health visiting and school nursing service. | | Public Health – Senior Programme Officer |
| 3f) Mental Health Support Team (MHST) Funding to cover all schools in West Berkshire. | BOB ICB is currently liaising with NHSE and other regional and national partners to develop plans for 100% MHST cover. | BOB ICB |
| 4) West Berkshire to become a Trauma-informed district that acknowledges the impact of trauma by providing policies, training and resources to create supportive, understanding, and healing-centred environments: | | |
| 4a) A commitment to embrace and champion trauma informed practices and to formalise Trauma-informed practices into district-wide policies. | | Public Health – Senior Programme Officer |
| 4b) Provide guidance to help schools and other organisations to assess their current practices and implement trauma-sensitive approaches. | | Education – Service Director Education and SEND |
| 4c) Professionals working with children to undergo training in trauma informed care and for ongoing workshops to be provided. | | |
| 4d) Provide workshops and resources for families to navigate Trauma-informed approaches at home. | | |

Appendix D

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| 5) A full review of smart phones, social media use and online safety for young people in West Berkshire be carried out and to include: | | |
| 5a) Review best practice and initiatives from other local authorities. | | Public Health – Senior Programme Officer |
| 5b) Consideration for school-policies and their implementation. | | Education – Service Director Education and SEND |
| 5c) Support and advice for parents on the use of social media by children and young people and online safety. | | |
| 6) The West Berkshire Health and Wellbeing Board to include Children and Young People’s Mental Health as one of their priority areas of focus, and to develop their action plan to reflect this. | | Health and Wellbeing Board |

This template provides a structure which respondents are encouraged to use. However, respondents are welcome to depart from the suggested structure provided the same information is included in a response. The usual way to publish a response is to include it in the agenda of the Health and Adult Social Care Scrutiny Committee.

Proposed development of a Resource Base at Victoria Park Nursery School, Newbury

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| Committee considering report: | Executive |
| Date of Committee: | 19 March 2026 |
| Portfolio Member: | Councillor Heather Codling |
| Report Author: | Neil Obbard |

1 Purpose of the Report

- 1.1 The purpose of this report is to seek approval to develop an existing space at Victoria Park Nursery School into a SEND Resource Base, following the formal public consultation period, which ended on 25 February 2026.
- 1.2 A decision is required within two months of the end of the representation period (the formal consultation period). If a decision is not made within that 2-month period, the proposal is legally required to be referred to the Schools Adjudicator, who will then make the determination.
- 1.3 The proposal will support nursery-aged children in West Berkshire that present with additional needs, particularly around communication, social interaction, emotional regulation and early developmental delay, to make sure the children receive the right support as early as possible. This will lead to better outcomes improving children's communication, social interaction, emotional regulation, and readiness for Reception.
- 1.4 Children who access a Resource Base typically move into Reception with improved communication, better social and emotional skills, a clearer understanding of their needs, and a smoother transition plan with the receiving school. This leads to more successful placements and greater long-term stability and can reduce the number of children who later require specialist school places or high levels of individual support.
- 1.5 This proposal represents a significant and strategically aligned enhancement to the Council's local specialist SEND offer. It directly supports the delivery of the SEND Sufficiency and Inclusion Strategy, responding to sustained growth in demand for high-quality, in-borough provision for children with complex needs.

2 Recommendations

That Executive:

- 2.1 Approves the proposal to repurpose an existing space (Family Hub) at the Victoria Park Nursery School site to establish a Resource Base that will support nursery-aged children in West Berkshire with additional needs.
- 2.2 Notes that the proposal supports the Council's SEND Sufficiency and Inclusion Strategy, delivering cost avoidance through reduced reliance on independent and out-of-area placements.
- 2.3 Delegates authority to the Head of SEND, in consultation with the Portfolio Holder for Education, to oversee the implementation and ongoing monitoring of the expanded provision.

3 Implications and Impact Assessment

| Implication | Commentary |
|--------------------------|--|
| <p>Financial:</p> | <p>The capital cost of the scheme is estimated at £650,000 and is to be funded from the Department of Education's High Needs Provision Capital Allocation Grant. Following consideration at Executive a Capital Funding Bid will be made through Asset and Capital Group to seek approval for inclusion into the capital programme.</p> <p>We are still working up costs with the nursery but expect this to be in the region of £12,750 for a 15-hour, 38-week placement. Approximately £6,500 of this will be covered by early years funding, with the remainder paid through the High Needs Block as top-up. This provision will set the expectation of children accessing mainstream provision at school, rather than specialist.</p> <p>The average cost of mainstream provision is £4,800 compared to maintained special school at £22,500 and independent/ non maintained special school at £68,000.</p> <p>We believe that a resource provision at Victoria Park will be good value for money and support improved outcomes for children by providing early support and intervention.</p> <p>There are no Home to School Transport implications or potential for cost avoidance as HTST doesn't apply to pre-statutory children. It should however support reduced costs for families in transporting their children to and from school.</p> |

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| <p>Human Resource:</p> | <p>The Resource Base will be staffed by experienced early years practitioners and supported by the nursery SENCO (teacher in charge). Staff will have specific training in:</p> <ul style="list-style-type: none"> • communication and interaction • autism • sensory needs • behaviour regulation • early learning and development <p>Other professionals, e.g., speech and language therapists, and occupational therapists, educational psychologists, may also visit.</p> <p>Staffing will be funded through existing SEND funding mechanisms and aligned to EHCP needs.</p> |
| <p>Legal:</p> | <p>The proposal supports the Council's statutory duties under the Children and Families Act 2014, the SEND Code of Practice, and Section 27 sufficiency duties. It also supports the Council's non-delegable duty under Section 42 to secure EHCP provision.</p> |
| <p>Risk Management:</p> | <p>Key risks relate to delivery timescales, staffing recruitment and maintaining integration with the mainstream school. These will be mitigated through phased delivery, early recruitment planning, and ongoing governance through SEND and school QA arrangements.</p> |
| <p>Property:</p> | <p>The proposal to develop an existing space (formerly the Family Hub Space) at Victoria Park Nursery School into a Resource Base is based on the needs of the local community and the nursery's ability to deliver high-quality early support.</p> <ul style="list-style-type: none"> • High-quality provision - the nursery already provides a strong and nurturing early years education. Its staff have experience supporting children with different needs and inclusion is a core part of the nursery's ethos. This makes it a safe and supportive place for a Resource Base. At the last <u>Ofsted Inspection in 2022</u>, the school was rated as 'Outstanding'. • Suitable space for specialist support - the site has indoor and outdoor areas that can be adapted for |

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| | <p>quieter, structured sessions. Its layout would allow children to move easily between the Resource Base and main nursery rooms. This is important because the model is based on small-group work alongside inclusion in the main nursery.</p> <ul style="list-style-type: none">• Meets local need - West Berkshire is seeing more young children with communication, interaction, sensory and developmental needs. There is currently, no Resource Base for Early Years settings and some children must travel further or wait for specialist support. A Resource Base here brings early help closer to home.• Strong leadership - the leadership team has demonstrated commitment to SEND and inclusive practice. They are willing and able to work with the local authority to establish the Resource Base safely and effectively. This provides confidence that it will run well.• Good accessibility for families - the site is centrally located for the community it serves. The site is easy for families to reach, and this supports equitable access to early SEND support.• History/ Background of the Site – The Old family hub building in Victoria Park was originally a Children’s Centre. These were set up in existing school buildings or extensions provided. When the Children’s Centres ceased to exist, the accommodation was returned to the school (or Nursery in this case). The Family Hub then operated from part of the existing Nursery and is a school asset. West Berkshire owns the freehold to the nursery including the old family hub. The 2 parts of the building are intrinsically connected to each other and by using the old hub building for an early years SEN resource base it allows free flow of pupils and staff from the nursery school directly into the resource base as required during the day. This reduces the need to potentially transport these children to other nursery location before and after sessions which can be disruptive and inefficient to their education.• Disposal Options – None considered. Using the existing hub building for a different, noneducational use, would bring a number of safeguarding challenges for the council/ nursery to overcome to ensure the users were clearly and robustly separated from the children attending the nursery. Currently due to the family hub historical clientele (the majority being parents with young children), the site in many ways works as one location with the ability to flow between the sites as |
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Proposed development of a Resource Base at Victoria Park Nursery School, Newbury

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| | <p>required. Construction work would be required to ensure access between the two buildings is robustly limited, additional security fencing would need to be installed and new risk assessments would need to be produced to enable the level of safeguarding was appropriate for another use. This would place the existing nursery under additional pressure and impacting their teaching day. Please also be aware that the site is relatively small with no parking available does not make the site particularly appealing to non-educational users. To obtain an accurate market value for this part of the school site will require engaging with a commercial valuer. We have no revenue budget to achieve this.</p> |
| <p>Policy:</p> | <p>The proposal aligns with National Policy and the West Berkshire Council SEND and Inclusion Strategy 2024–2029, the SEND and AP Improvement Plan (2023 - 2025), and the Delivering Better Value programme, Equalities Act 2010, SEND Regulations 2014, Children, Families Act 2014 SEND Code of Practice 2015, EHC Plans (Regs 11-17), Reviews Regs (18-20), Mediation (Regs 33 – 42) and EHC assessments (Regs 3-10)</p> <p>Building Bulletin (BB) 104, Building guidelines</p> |

Proposed development of a Resource Base at Victoria Park Nursery School, Newbury

| | Positive | Neutral | Negative | Commentary |
|--|----------|---------|----------|--|
| Equalities Impact: | | | | |
| A Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality? | X | | | The recommendations aim to enhance inclusivity and accessibility for children with protected characteristics, focusing on local provisions that reduce travel burdens and enable students to remain in their communities. |
| B Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users? | X | | | The plan will directly impact the lives of families and children and young people with Special Educational Needs and Disabilities as it aims to ensure there is sufficient education places within the borough in terms of education and alternative education provision. By increasing in-borough sufficiency of education placements, a more inclusive and supportive environment is enabled for pupils with SEND. |
| Environmental Impact: | X | | | Local placements reduce the environmental impact associated with long-distance travel for pupils needing specialized provisions. |
| Health Impact: | X | | | Effective SEND Sufficiency requires robust data collection, validation, and analysis systems to monitor needs, progress and outcomes and reports to the SEND Strategic Improvement Board. This work is part of the Delivering Better Value Ensuring Sufficiency Data subgroup. |
| ICT Impact: | X | | | Effective SEND Sufficiency requires robust data collection, validation, and analysis systems to monitor needs, progress and outcomes. This work part of the Sufficiency Data subgroup. |
| Digital Services Impact: | | X | | N/A |

Proposed development of a Resource Base at Victoria Park Nursery School, Newbury

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| <p>Council Strategy Priorities:</p> | <p>X</p> | | | <p>The sufficiency plan is linked to DBV Programme and SEND & Inclusion Strategy in terms of the following priorities:</p> <p>Priority 3: Inclusion, Priority 4: Developing Local Specialist Provision and Support, Priority 4: Strengthening Alternative Provision and Priority 6: Preparing for Adulthood</p> |
| <p>Core Business:</p> | <p>X</p> | | | <p>The proposal will support any of the Council's Priorities for improvement and is business as usual in the following ways:</p> <p>1) Enhanced service delivery via the SEND Sufficiency plan will enable the council to better understand and meet the educational needs of pupils with SEND. This in turn reduces reliance on costly independent educational placements whilst increasing sufficiency of capital places to meet growing demand.</p> <p>2) Efficient use of resources: by strategically planning and allocating resources to meet local SEND demand for education places, the council can make more effective use of its funding with the aim of making financial savings and freeing up resources for other critical areas.</p> <p>3) Compliance: having a SEND sufficiency plan helps the council to meet its statutory duties regarding SEND. It also supports the council in managing reputational risks associated with unmet needs.</p> <p>4) Longer term planning: the sufficiency plan enables the council to be better positioned to respond to population changes and evolving needs.</p> <p>5) Promote inclusion and equal opportunities: through the SEND Sufficiency Plan, the council demonstrates the commitment to inclusivity and ensuring that children and young people have access to appropriate education services to meet their needs.</p> |
| <p>Data Impact:</p> | | <p>X</p> | | <p>N/A</p> |

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| <p>Consultation and Engagement:</p> | <p>A statutory consultation and wider engagement exercise was undertaken, generating 85 formal responses.</p> <p>Engagement activity included:</p> <ul style="list-style-type: none"> • Parents and carers of children with and without EHCPs. Including the Parent Carer forum. • School staff, Governors and Education, Health and Social Care Professionals. • Residents. • Targeted social media and residents’ bulletin communications. • 2,552 members of the Community Panel • Elected members • Local Members of Parliament • ICB • SENDIASS • Union Representatives • Parish Councils • Relevant West Berkshire Staff • All West Berkshire Head Teachers • 3 Public drop-in sessions were completed at the Nursery <p>Social media engagement significantly exceeded typical education consultations, demonstrating strong awareness and visibility.</p> <p>Overall support for the proposal was exceptionally strong, with 88.2% of respondents supporting or strongly supporting the expansion.</p> <p>Key themes raised focused on implementation quality (staffing, design, funding) rather than opposition to the principle of the new resource base.</p> <p>Appendix C Consultation Summary</p> |
| <p>Playing Field Land Compliance (change of use)</p> | <p>This project does not impact on playing field land compliance (S77)</p> |

4 Executive Summary

- 4.1 West Berkshire continues to experience sustained growth in demand for specialist SEND provision, particularly for pupils with Complex Needs. Existing maintained special schools are operating at or near capacity and without additional local provision the Council faces increasing reliance on high cost independent non maintained special school placements.
- 4.2 Victoria Park Nursery currently provides effective support for several children with Special Educational Needs and Disabilities (SEND). By establishing a dedicated, high- quality teaching environment, the nursery will be able to extend this support to a greater number of early years children before they transition to Primary or Infant school. Early identification and targeted intervention at this stage aim to ensure that children's needs are recognised promptly and appropriate support is implemented. Ultimately, this early engagement is intended to increase the number of children who are able to progress successfully into a mainstream school setting.
- 4.3 By utilising the outstanding provision at Victoria Park Nursery to run and operate this resource base, we are not only drawing on their established expertise but also making effective use of existing space that has limited alternative functions due to its size and location. The area is situated within a secure, safeguarded site with restricted access, making it particularly well- suited for a specialist early years resource.

Approval of this proposal will:

- 4.4 Improve continuity and outcomes for pupils with complex needs.
- 4.5 Increase local specialist capacity in a densely populated area.
- 4.6 Reduce pressure on special schools and the High Needs Block; and
- 4.7 Support delivery of local and national SEND strategy priorities.

5 Supporting Information

- 5.1 This report sets out the rationale and proposal for developing an Early Years SEND resource base at Victoria Park Nurse to address increasing SEND demand within West Berkshire.

Background

- 5.2 West Berkshire is seeing more young children with communication, interaction, sensory and developmental needs. There is currently, no Resource Base for Early Years settings and some children must travel further or wait for specialist support. A Resource Base located at Victoria Park Nursery brings early help closer to home.
- 5.3 The Victoria Park Nursery is an outstanding setting (Ofsted 2022). The nursery already provides a strong and nurturing early years education. Its staff have

experience supporting children with different needs and inclusion is a core part of the nursery's ethos. This makes it a safe and supportive place for a Resource Base. With the family Hub moving onto new opportunities at the Phoenix Centre, it has opened the opportunity to locate a send resource base at this location.

Proposal

The proposal will:

- 5.4 Provide capacity for up to 8 early years children.
- 5.5 Provide local, early support of children exhibiting SEND need and to support them further to infant/ Primary school.
- 5.6 Provide a purpose designed learning, sensory and outdoor space
- 5.7 Enable continuity of the existing early years spaces at the nursery
- 5.8 Provide early intervention for Early Years children presenting with SEND needs. The aim is to strengthen their transition into cost effective mainstream settings and reduce the demand for high-need SEND placements.

6 Other options considered

- 6.1 Do Nothing: Rejected due to increasing reliance on independent placements and unsustainable High Needs Block pressure.
- 6.2 Develop alternative sites or rebuild sites to accommodate: Rejected at this stage due to higher capital costs, longer delivery timescales and greater risk.

7 Conclusion

- 7.1 The establishment of an Early Years SEND Resource Base at the Victoria Park site represents a practical and cost- effective solution for supporting young learners who require early intervention. Providing targeted support at this stage will help reduce future reliance on external providers throughout the pupils' subsequent school careers.
- 7.2 The Victoria Park site is an outstanding location with adequate available space and strong support from both the public and parents. This development will deliver clear educational and financial benefits for the council.
- 7.3 Approval is therefore recommended.

8 Appendices

- 8.1 Appendix A – Equalities Impact Assessment
- 8.2 Appendix B – Data Protection Impact Assessment
- 8.3 Appendix C - Consultation Summary and Engagement Assurance

9 Background Papers:

9.1 SEND Sufficiency Plan

9.2 Consultation document

9.3 Innovation in SEND: SEND & Inclusion Strategy (2024-2029)

Subject to Call-In:

Yes: No:

The item is due to be referred to Council for final approval

Delays in implementation could have serious financial implications for the Council

Delays in implementation could compromise the Council's position:

Considered or reviewed by Scrutiny Commission or associated Committees, Task Groups within preceding six months

Item is Urgent Key Decision

Report is to note only

Wards affected: Newbury Central Ward

Officer details:

Name: Neil Obbard
Job Title: Education Development Officer, EPPD
Tel No: 07799 587620
E-mail: neil.obbard@westberks.gov.uk

West Berkshire Council Equity Impact Assessment

TEMPLATE

March 2023

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Section 1: Summary details

| | |
|---|--|
| Directorate and Service Area | West Berkshire Council, Education and SEND |
| What is being assessed (e.g. name of policy, procedure, project, service or proposed service change). | SEND Placement Sufficiency Analysis August 2024 |
| Is this a new or existing function or policy? | No |
| Summary of assessment Briefly summarise the policy or proposed service change. Summarise possible impacts. Does the proposal bias, discriminate or unfairly disadvantage individuals or groups within the community? (following completion of the assessment). | The purpose of the SEND Sufficiency Plan is to evaluate need of pupils with special education needs and disability, forecast demand for education places and provide a summary of recommendations to inform capital place planning and addressing the gaps. The plan focuses on inclusivity with the aim to ensure that individuals or group are not unfairly disadvantaged. |
| Completed By | Catherine Kane |
| Authorised By | Susan Tanner |
| Date of Assessment | 5 th November 2024 |

Section 2: Detail of proposal

| | |
|--|---|
| <p>Context / Background</p> <p>Briefly summarise the background to the policy or proposed service change, including reasons for any changes from previous versions.</p> | <p>The SEND sufficiency plan and analysis was conducted in response to the council’s statutory duty to develop a sufficiency plan in response to increasing demands for SEND placements in West Berkshire. The trend is consistent with national growth in EHC Plans. The analysis identifies the need for expansion of in-borough provision, including SEN Units/Resource Provision within mainstream settings, enhancing pathways for Alternative Provision and provision of additional capacity in special schools. The plan seeks to address and mitigate the reliance on out-of-borough placements which is financially unsustainable and limits access to inclusive education.</p> |
| <p>Proposals</p> <p>Explain the detail of the proposals, including why this has been decided as the best course of action.</p> | <p>The primary proposals include:</p> <ol style="list-style-type: none"> 1. Expanding special school capacity for Autism Spectrum Disorder (ASD), Social, Emotional, and Mental Health (SEMH), and Moderate Learning Difficulties (MLD) needs. 2. Increasing the number of SEN units in mainstream schools to accommodate the projected 7.6% growth in primary phase and 7.1% in secondary phase demand by 2026/27. 3. Enhancing local alternative provision (AP) to meet diverse educational needs and provide reintegration pathways. 4. Developing post-16 SEND pathways, such as supported internships, vocational training, and employment preparation programs to support transitions into adulthood. |
| <p>Evidence / Intelligence</p> <p>List and explain any data, consultation outcomes, research findings, feedback from service users and stakeholders etc, that supports your proposals and can help to</p> | <p>This assessment is based on multiple data sources, including the Department for Education (DfE) School Capacity Survey (SCAP) methodology, LG Inform data on SEND profile for West Berkshire, DfE’s Local Authority Interactive Tool which compares West Berkshire against statistical neighbours and West Berkshire’s internal SEND data from Capita.</p> <p>The analysis was cross referenced with colleagues in Education, SEND and Inclusion to add more commentary to the analysis.</p> |

Equity Impact Assessment

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|--|---|
| <p>inform the judgements you make about potential impact on different individuals, communities or groups and our ability to deliver our climate commitments.</p> | |
| <p>Alternatives considered / rejected</p> <p>Summarise any other approaches that have been considered in developing the policy or proposed service change, and the reasons why these were not adopted. This could include reasons why doing nothing is not an option.</p> | <p>Alternatives Considered / Rejected</p> <ol style="list-style-type: none">1. Do Nothing: Maintaining current levels of provision was rejected due to projected demand increases of 29% in primary and 31% in secondary EHC Plans, which would necessitate even greater reliance on costly out-of-borough placements.2. Increase Reliance on Out-of-Borough Placements: This option was rejected due to increasing high costs, limited local access, and the Council's strategic priority to improve in-borough provisions. |

Section 3: Impact Assessment - Protected Characteristics

| Protected Characteristic | No Impact | Positive | Negative | Description of Impact | Any actions or mitigation to reduce negative impacts | Action owner* (*Job Title, Organisation) | Timescale and monitoring arrangements |
|---|-------------------------------------|-------------------------------------|--------------------------|---|--|--|---------------------------------------|
| Age | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | The plan supports age-appropriate educational pathways, especially for post-16 pupils transitioning into adulthood. | Not at this point | | |
| Disability | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Expanding local SEND provisions enhances accessibility and reduces reliance on out-of-borough placements. | Not at this point | | |
| Gender Reassignment | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Marriage & Civil Partnership | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Pregnancy & Maternity | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Race | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Provides equal access to quality education within the local area, supporting | Not at this point | | |

Equity Impact Assessment

| | | | | | | | |
|---------------------------|-------------------------------------|-------------------------------------|--------------------------|--|-------------------|--|--|
| | | | | diverse needs across communities. | | | |
| Sex | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Provides equal access to quality education within the local area, recognising the need for more gender responsive teaching strategies given the higher number of males in the children and young people population | Not at this point | | |
| Sexual Orientation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Not applicable in this project's scope. | | | |
| Religion or Belief | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Not applicable in this project's scope. | | | |

Section 3: Impact Assessment - Additional Community Impacts

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|-------------------------------------|--------------------------|--------------------------|---|---|---|--|
| Rural communities | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Not applicable in this project's scope. | | | |

Equity Impact Assessment

| Additional community impacts | No Impact | Positive | Negative | Description of impact | Any actions or mitigation to reduce negative impacts | Action owner (*Job Title, Organisation) | Timescale and monitoring arrangements |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--|---|---|--|
| Areas of deprivation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Improved local SEND services increase accessibility for economically disadvantaged families | Not at this point | | |
| Displaced communities | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Reducing out-of-borough placements supports community stability. | Not at this point | | |
| Care experienced people | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | The plan promotes local, consistent support for children in care, addressing their unique vulnerabilities. | Not at this point | | |
| The Armed Forces Community | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Not applicable in this project's scope. | | | |

Section 4: Review

Where bias, negative impact or disadvantage is identified, the proposal and/or implementation can be adapted or changed; meaning there is a need for regular review. This review may also be needed to reflect additional data and evidence for a fuller assessment (proportionate to the decision in question). Please state the agreed review timescale for the identified impacts of the policy implementation or service change.

| | |
|--------------------------------------|---|
| Review Date | August 2025 |
| Person Responsible for Review | Neil Goddard, Director for Education and SEND |
| Authorised By | |

EDI employee related EQiA's should now be sent to Human Resources hrenquiries@westberks.gov.uk.

Appendix B

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: | Children & Family Services |
| Service: | Education |
| Team: | Education Place Planning & Development |
| Lead Officer: | Neil Obbard |
| Title of Project/System: | Victoria Park Resource Base |
| Date of Assessment: | 26/06/2026 |

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><i>Note – sensitive personal data is described as “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 checked="" type="checkbox"/> |
| <p>Will you be processing data on a large scale?</p> <p><i>Note – Large scale might apply to the number of individuals affected OR the volume of data you are processing OR both</i></p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <p>Will your project or system have a “social media” dimension?</p> <p><i>Note – will it have an interactive element which allows users to communicate directly with one another?</i></p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <p>Will any decisions be automated?</p> <p><i>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?</i></p> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Equity Impact Assessment

| | Yes | No |
|--|--------------------------|-------------------------------------|
| Will your project/system involve CCTV or monitoring of an area accessible to the public? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will you be using the data you collect to match or cross-reference against another existing set of data? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will you be using any novel, or technologically advanced systems or processes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <small>Note – this could include biometrics, “internet of things” connectivity or anything that is currently not widely utilised</small> | | |

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.

APPENDIX C

Consultation Summary – Victoria Park Nursery SEND Resource Base – draft. V1

26th February 2026

Engagement Assurance

The Local Authority is satisfied that appropriate and proportionate engagement has been undertaken in relation to this proposal. A range of engagement opportunities were provided to ensure stakeholders could access information and share their views, including a public meeting and two drop-in sessions hosted at the school. An online consultation survey and hard copy version was available via post or in person via request and direct email address to present views.

These approaches enabled both structured feedback and open discussion, supporting inclusive participation and informed responses. All feedback received has been carefully considered and has informed the conclusions and next steps set out in this summary

Proposal:

Development of a Early Years Resource Base at Victoria Park Nursery

Total responses received: 85

Engagement period: January – February 2026

Purpose of the Consultation

The consultation sought views on a proposal to develop a SEND resource base at Victoria Park Nursery, Newbury. The aim of the proposal is to increase local specialist SEND capacity, introduce SEND support to early years pupils to provide them with high quality support earlier on in their education.

This document summarises the outcomes of the public consultation and engagement activity relating to the proposed expansion. It outlines the level of support expressed, key themes raised by respondents, and the actions the Local Authority proposes to take in response. The summary is intended to provide assurance and inform decision-making.

This summary also includes data from West Berkshire Council social media platform campaigns.

1. Who Responded (Profile)

- Local resident – 44.71%
- Professional working with children – 29.41%
- Parent/carer of children with SEND – 12.94%
- Other ¹ - 11.76%
- Parent of a child currently at the nursery – 9.41%
- Parent of a child formally at the nursery – 8.24%

¹ Parent of adult who went through school with SEN, West Berkshire Councillor, Ex-governor of the nursery, Parent with 2 adult children with learning disabilities, Grandparent, Headteacher of Newbury primary School, parent that uses the family hub services, qualified teacher, Governor at Victoria Park Nursery School.

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- Parent/ carer considering the nursery in the future – 4.71%
- Member of staff at the nursery – 3.53%
 - Strengths – wide range of respondent types
 - Risks – lack of non-professional understanding of the project

2. Awareness & Understanding of the Proposal

- 44.16% were already aware of the plan for this development
- 55.84% were not aware of the development of the nursery

- 81.82% Found the information either extremely clear or very clear
- 14.29% felt it was somewhat clear
- 3.90% felt it was not very clear
 - Strength: Clear and effective communication of the proposal.
 - Risk: A small minority still feel insufficiently informed.

3. Overall Support for the Proposal

- **57.89% strongly agreed that this nursery is suitable for a resource base**
- **30.26% agreed that this nursery is suitable for a resource base**
- **5.26% were neutral towards this nursery is suitable for a resource base**
- **3.95% were unsure that this nursery is suitable for a resource base**
- **2.64% either disagreed or strongly disagreed**
 - Strength: High support with minimal opposition.
 - Risks: Lack of professional understanding

4. Perceived Impact on Local Need

- 94.74% agree the proposed Resource Base would benefit children who need additional support
- 1.32% disagree.
- 3.95% Unsure
 - Strength: Clear alignment with SEND sufficiency and inclusion priorities.
 - Evidence: Respondents consistently reference real need for early years SEND support

5. Impact on Key Groups (Perceptions)

- 85.53% felt the Resource base would have a positive impact on the wider nursery community
- 11.84% were unsure
- 2.63% felt it wouldn't positively impact on wider nursery community
 - Strength: Very strong confidence in benefits for SEND families.
 - Risks: Lack of professional understanding

6. Identified Benefits (Qualitative Themes)

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- **Strengths of the Location**

- Central, town-centre position, making it easy to reach for many families, including those without cars.
- Excellent public transport links (bus routes, proximity to Parkway).
- Close to green spaces (e.g., Victoria Park), which support outdoor learning, wellbeing, and mindfulness.
- Walkable for many, reducing travel time and cost for families.

- **Strengths of the Nursery Itself**

- Strong reputation for high-quality care and support, especially for children with additional needs.
- History of collaboration with SEND services, special schools, and transition teams.
- Experienced, skilled staff with a long-standing ethos of putting children first.
- Existing specialist facilities, resources, and expertise already in place.
- Considered a valued community asset with a long positive history and excellent outcomes.

- **Practical Advantages**

- The former family hub site already exists, is set up, and is ready for adaptation.
- Space and accessibility reported as good by several respondents.
- Seen as an efficient and logical use of existing resources to create an inclusive provision.

7. Concerns Raised

- Possible difficulties with drop-off, especially for children who may struggle near busy roads.
- Parking costs in town may be a barrier for some families.
- Some concerns about whether the site has enough space for the number of children using it.
- A small number of respondents said they aren't familiar with the area or building.

- **Overall Sentiment**

Most feedback is strongly positive, highlighting:

- The nursery's excellent reputation, its long-term commitment to inclusive and SEND-focused practice, and its ideal central location for accessibility.

8. Impact on your child or family

- **31.08%** felt that the proposal would positively impact on their child/ family
- **0%** felt that it would negatively impact their child/ family
- 4.05% felt there would be positive and negative impacts on their child/ family
- **56%** felt their would be no impact
- **8.11%** unsure.

Interpretation: Most respondents do not have nursery-aged children, so the proposal would not affect them directly, but many still support it because they believe it benefits the wider community, especially children with SEND. A small number expressed concerns about inclusivity or the impact on other children, while one family said it would directly help their granddaughter who needs appropriate nursery provision. Overall, even without personal impact, most want the best support available for local children.

9. Overall Assessment

Key Strengths

- Very high levels of support and understanding
- Strong SEND family endorsement
- Clear alignment with local need and inclusion
- Minimal principled opposition

Key Risks / Mitigations

- Ensure funding, staffing, and training are explicit
- Address building standards (BB104 / BB93) in design stage
- Maintain strong integration with the mainstream school
- Communicate clearly on costs and long-term value

10. Conclusion

The consultation demonstrates strong support for the development of the resource base at Victoria Park Nursey, with concerns largely focused on delivery quality rather than direction. The evidence strongly supports progression to decision, subject to clear mitigation of implementation risks.

11. Engagement and Communications Reach (Social Media & Direct Communications)

In addition to the formal consultation responses (85 completed surveys), the proposal was supported by a wide-reaching communications campaign across social media platforms and direct resident communications, demonstrating strong awareness and visibility across West Berkshire.

12. Community Panel

Direct e-mail

- Sent to 2,577 residents

Overall Engagement Assessment

- The consultation achieved strong digital reach, significantly exceeding the number of formal survey responses.
- Engagement data indicates:
 - High awareness
 - Active interaction (comments, reactions, shares)
 - Effective signposting to consultation materials
- Social media performance compares favourably with previous education consultations, particularly on Facebook.

Conclusion on Engagement

The combination of:

- High survey response quality
- Strong social media reach
- Effective direct resident communications

Equity Impact Assessment

provides confidence that the consultation was widely promoted, accessible, and visible, supporting the robustness of the consultation process and the validity of the feedback received.

Appendix

| We asked / You said / We will do |
|---|
| <p>We asked: Whether stakeholders support the proposal to develop a SEND Resource Base at the Victoria Park Nursery and what benefits or concerns they identified.</p> |
| <p>You said:</p> <ul style="list-style-type: none">• Strong support for the proposal (93% support), with clear recognition of the need for more local specialist SEND places.• The expansion would improve inclusion, reduce travel, and provide continuity of provision through the early years and ongoing education.• Most respondents raised no concerns.• Where concerns were identified, these focused on:<ul style="list-style-type: none">○ Funding and value for money○ Staffing, training, and maintaining quality○ Building design, space, acoustics, and site logistics○ Ensuring the Resource Unit remains well integrated with the mainstream school |
| <p>We will do</p> <ul style="list-style-type: none">• Proceed to the next decision stage, reflecting the overwhelmingly positive consultation outcome.• Ensure funding, staffing, and training plans are clearly defined and quality assured.• Apply relevant DfE building standards (including space and acoustics) during design and delivery.• Maintain strong integration with the mainstream school to support inclusion.• Continue to communicate clearly with families, staff, and the local community as the proposal progresses. |

Executive – 19 March 2026

Item 12 – Member Questions

To follow

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