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# Response to Emotional Wellbeing Task Group

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<b>Committee considering report:</b>	Health and Adult Social Care Scrutiny Committee
<b>Date of Committee:</b>	
<b>Portfolio Member:</b>	Councillor Heather Codling
<b>Date Portfolio Member agreed report:</b>	01 April 2026
<b>Report Author:</b>	AnnMarie Dodds

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## 1 Purpose of the Report

- 1.1 To provide a formal response to the working group recommendations relating to children and young people's emotional and mental health support, highlighting the significant changes in the operational landscape and identifying where recommendations cannot currently be delivered due to resource constraints or responsibilities resting with other system partners.

## 2 Recommendations

- 2.1 The Executive is asked to:
- (a) Acknowledge the operational changes affecting the delivery of mental health and early intervention emotional well-being services in West Berkshire.
  - (b) Agree the responses that are set out at paragraph 5.16 of this report.
  - (c) Agree that several recommendations fall outside the remit or current resource capacity of West Berkshire Council Children's Services and should be referred to the appropriate system partners (specifically the ICB, Leisure, schools, and commissioned providers).
  - (d) Endorse the position that further delivery against these recommendations will require:
    - i) Additional resource from the ICB; and/or
    - ii) Cross system agreement through the Family First Partnership and Best Start/Family Hubs programme.

### 3 Implications and Impact Assessment

Implication	Commentary
<b>Financial:</b>	There are no additional financial resources available within existing Children's Services budgets to deliver the full set of recommendations. The withdrawal of £100k ICB funding from the Emotional Health Academy has significantly reduced early intervention capacity. Any expansion of emotional wellbeing or mental health provision would require additional external funding, primarily from the ICB, or new cross-system investment agreed through partnership governance.
<b>Human Resource:</b>	There are no additional staffing resources available within Children's Services to take on new or expanded delivery expectations. Workforce development activity, including trauma-informed practice, can only be progressed where funded training capacity exists. Reprioritising existing staff would place unacceptable pressure on statutory safeguarding, SEND and early help duties.
<b>Legal:</b>	Many recommendations relate to clinical services, commissioning responsibilities or autonomous organisations (e.g. schools), which sit outside the Council's legal remit. No additional legal implications arise from noting or allocating recommendations to the appropriate system partners.
<b>Risk Management:</b>	There is a risk to system confidence and service sustainability if recommendations are interpreted as deliverable by Children's Services without the required funding or authority. This report mitigates that risk by clearly identifying appropriate ownership, dependencies and constraints, ensuring expectations remain aligned with actual system capacity.
<b>Property:</b>	There are no direct property implications for the Council. Recommendations relating to the use of school or community facilities sit with individual schools or external providers, over which the Council has no operational control.

<b>Policy:</b>	The proposals align with national direction, including Family First, Best Start / Family Hubs and integrated early help reform. No new Council policy is required. The approach supports delivery through existing strategies and partnership frameworks, rather than creating additional standalone policies.			
	<b>Positive</b>	<b>Neutral</b>	<b>Negative</b>	<b>Commentary</b>
<b>Equalities Impact:</b>				
<b>A</b> Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality?		X		The report itself does not introduce service reductions or policy changes. It provides clarity on system roles and realistic delivery expectations, supporting equitable access by avoiding commitments that cannot be fulfilled. Future service developments will continue to be shaped through co-production with children, young people and families, particularly those with protected characteristics.
<b>B</b> Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users?		X		Children and young people with SEND, neurodivergent needs or mental health vulnerabilities may be disproportionately affected by wider system capacity pressures. These impacts are outside the sole control of the Council and require coordinated action and investment from health and system partners.

<b>Environmental Impact:</b>		X		There are no direct environmental impacts arising from this report. Where services are accessed digitally or through community-based delivery models, this may support reduced travel and improved local access.
<b>Health Impact:</b>		X		The report recognises the importance of emotional wellbeing and mental health for children and young people. However, the ability to improve health outcomes is dependent on NHS-commissioned services and ICB investment. The Council's role remains focused on early help, coordination and partnership facilitation.
<b>ICT Impact:</b>		X		There are no immediate ICT implications arising from this report. Any future digital enhancements to service navigation or access will be progressed through existing programmes, subject to capacity and funding.
<b>Digital Services Impact:</b>		X		Digital access to information and services is already provided through the Local Offer, Family Information Service and Best Start programme. Further improvements are planned but are resource-dependent and cannot be accelerated without additional investment.

<b>Council Strategy Priorities:</b>	X			The approach supports the Council's priorities around prevention, early intervention, partnership working and system sustainability, while maintaining a clear focus on statutory responsibilities and realistic delivery.
<b>Core Business:</b>		X		The recommendations reinforce Children's Services' core role in coordination, early help and safeguarding, while appropriately allocating responsibility for clinical, commissioning and autonomous delivery functions to system partners.
<b>Data Impact:</b>		X		No new data processing or data-sharing arrangements are introduced through this report. Existing governance and data protection arrangements remain in place.
<b>Consultation and Engagement:</b>	Engagement with children, young people and families continues through Family First, the Local Offer, Community Hubs and partnership forums. Any future gap analysis or service development will be delivered through ongoing co-production rather than standalone consultation exercises.			

## 4 Executive Summary

4.1 This report sets out the Council's response to the Emotional Wellbeing Task Group recommendations, reflecting significant changes to the local system and clarifying where delivery is constrained by resources or sits with other partners, particularly the ICB, NHS providers, schools and leisure services. It confirms that deliverable elements will be progressed through existing programmes including Family First, Best Start and Family Hubs, while any further expansion of provision would require additional ICB investment or cross-system agreement. Committee endorsement is sought to confirm appropriate ownership of actions, maintain realistic expectations, and support continued partnership working to improve outcomes for children and young people.

## 5 Supporting Information

### Introduction

5.1 The Council would like to thank the Emotional Wellbeing Task Group for its work in highlighting the challenges and opportunities to improve emotional wellbeing and mental health support for children and young people in West Berkshire. This report responds to the Task Group's recommendations, setting out how they will be taken forward where possible and providing clarity on current system responsibilities and constraints.

### Background

- 5.2 There have been significant system changes since the original design of the Emotional Well-being task group:
- 5.3 The ICB has withdrawn £100,000 of funding, significantly reducing the level of early intervention mental health support available through the Emotional Health Academy.
- 5.4 West Berkshire Council are no longer commissioned to deliver Mental Health Support Teams (MHSTs), which now operate solely as an ICB commissioned service from an existing health provider.
- 5.5 The Youth Offer is now being co-ordinated through the 0–19 Family Hub model, forming a core element of the Family First early intervention pathway.
- 5.6 Cross system work on neurodiversity, CAMHS access, and wider mental health commissioning sits primarily with the ICB, supported by partnership arrangements across Berkshire West (including Wokingham & Reading). West Berkshire Council are engaged in a neurodiversity project, coproduced with all relevant partners to deliver a multi-disciplinary response to children.
- 5.7 These changes materially affect the ability of the Council to deliver several recommendations as currently drafted.

### Proposals (Response to Working Recommendations)

- 5.8 Areas outside the remit of Children's Services
- 5.9 Several recommendations concern activity not within the control of the Council:
- (a) Use of school facilities – this is a matter for individual schools as autonomous organisations.
  - (b) Subsidised leisure access – decisions sit with the leisure provider and should be addressed through Place governance arrangements.
  - (c) Clinical pathways, CAMHS access, neurodiversity services, and professional networks – these are the responsibility of the ICB as commissioner. These recommendations should therefore be directed to the ICB for resourcing and coordination.

5.10 Items incorporated within existing programmes

5.11 Some recommendations are already embedded within current service transformation aligned to current government direction:

- a. The Early Help Roadmap will be developed through the Family First Partnership as part of Family Hubs implementation.
- b. Community based pathways can be further supported through:
  - i. Community Hubs
  - ii. Time to Talk
  - iii. The Local Offer
  - iv. The Family Information Service
  - v. Digital access/enhancements through the Best Start programme

5.12 Resource limitations impacting deliverability

5.13 The withdrawal of ICB funding from the EHA and the increasing service demand on remaining resource means that there is no capacity to expand early intervention activity without additional resource.

5.14 Workforce development can be extended — including trauma informed training — only if training capacity and funding are provided. Constrained training capacity and budgets mean additional service expectations cannot be met within current staffing or financial envelopes.

5.15 Coproduction and Gap Analysis

5.16 Any future gap analysis will be delivered through ongoing coproduction across Family First Partnership reform, SEND and Educational reform, the Local Offer, community partners, and young people feedback. This ensures that identified needs are realistic and aligned with actual system capability.

<b>Ref</b>	<b>Recommendation</b>	<b>Management Response</b>
1	Provide and promote a Local Youth Offer, including mapping services, improving access to facilities, and subsidised leisure access.	<p>The Council recognises the importance of a comprehensive youth offer. Mapping of and access to services will be delivered as part of the Families First / Family Hub offer.</p> <p>Opportunities for collaboration will be explored, and implementation will be in line with existing resource.</p>

2	<p>Improve communication and navigation of local services, including a central hub and streamlined CAMHS overview.</p>	<p>We agree this would significantly benefit families, the development of a digital hub and enhanced communications will be part of the Best Start, Family Hub, Family Information Service and enhanced SEND Local Offer.</p> <p>CAMHS service design and delivery sits with BHFT and the ICB, and we will continue to work in partnership to ensure clarity and accessibility for families.</p>
3	<p>Convene professionals regularly, develop a system strategy, expand mental health workers in GP surgeries, and ensure Senior Mental Health Leads in schools.</p>	<p>These actions require substantial coordination and additional workforce investment from ICB.</p> <p>Expansion of mental health workers in GP surgeries and CAMHS capacity is the responsibility of the ICB and BHFT. These issues are expected to be addressed through the development of the Neighbourhood Health Model, specifically multi-disciplinary teams.</p> <p>The Council will maintain existing partnership forums and advocate for prioritisation of emotional and mental health well-being.</p>
4	<p>Embed trauma-informed practices district-wide, including training and workshops.</p>	<p>The Council supports trauma-informed approaches and already works to a trauma-informed model in Children’s Social Care. The social care model follows national best practice which recommends embedding principles such as safety, trust, choice, collaboration, empowerment, and cultural awareness, supported by leadership commitment and reflective supervision.</p> <p>Additional delivery district-wide including training and policy development, requires significant investment and capacity, which are not currently available.</p> <p>We will continue to promote awareness through existing networks and explore external funding opportunities.</p>
5	<p>Review smartphone/social media use and online safety,</p>	<p>The Council acknowledges the importance of this issue. Decisions on mobile phone use in</p>

	including best practice and parental support.	<p>schools are a matter for individual schools and governing bodies.</p> <p>The Council will share national best practice, which recommends clear ‘no phones during the school day’ policies, secure storage, reasonable exceptions for medical/SEND needs, and strong communication with parents. We will also encourage schools to review their policies annually and provide education on online safety.</p>
6	Include Children and Young People’s Mental Health as a priority for the Health and Wellbeing Board.	<p>This can be considered as part of the Board’s strategic planning. Any associated actions will require additional capacity and funding to deliver effectively.</p> <p>The Council will work with health partners to ensure alignment with ICB priorities.</p>

## 6 Other options considered

6.1 Delivering the recommendations in full using existing resource.

- (a) This option was discounted as current operational capacity is insufficient and would create unsustainable pressure on statutory services.

6.2 Reprioritising internal resources

- (a) Not recommended, as this would negatively impact statutory safeguarding, SEND, and new statutory early help responsibilities.

6.3 Seeking additional internal funding

- (a) Not feasible given current budgetary constraints.

6.4 The recommended option is therefore to align recommendations to system partners priorities and progress deliverable elements wherever possible through Family Hubs and Family First.

## 7 Conclusion

7.1 The Council acknowledges the importance of improving children’s mental health and emotional wellbeing and supports the principles behind the Task and Finish Group’s recommendations. We will continue to explore opportunities for partnership working and external funding to progress these recommendations in the future.

7.2 For school-level matters such as mobile phone use, the Council will provide advisory guidance based on national best practice but will not mandate policy. For trauma-informed practice, the Council will maintain its current model within Children’s Social

Care and seek opportunities to expand this approach in line with national best practice when resources allow. For CAMHS and wider health services, responsibility lies with the ICB and BHFT, and the Council will continue to work collaboratively to influence improvements and ensure joined-up support for children and families.

7.3 The report provides clarity on appropriate agency ownership of actions, identifies resource gaps, and ensures alignment with ongoing reform programmes. Committee approval is sought to endorse this position.

## 8 Appendices

8.1 None

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### 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