



WOKINGHAM BOROUGH COUNCIL

A Meeting of the **HEALTH AND WELLBEING BOARD** will be held at the Civic Offices, Shute End, Wokingham RG40 1BN on
THURSDAY 13 AUGUST 2015 AT 5.00 PM

A handwritten signature in black ink, appearing to read 'Andy Couldrick', written in a cursive style.

Andy Couldrick
Chief Executive
Published on 5 August 2015

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Our Vision

A great place to live, an even better place to do business

Our Priorities

Improve educational attainment and focus on every child achieving their potential

Invest in regenerating towns and villages, support social and economic prosperity, whilst encouraging business growth

Ensure strong sustainable communities that are vibrant and supported by well designed development

Tackle traffic congestion in specific areas of the Borough

Improve the customer experience when accessing Council services

The Underpinning Principles

Offer excellent value for your Council Tax

Provide affordable homes

Look after the vulnerable

Improve health, wellbeing and quality of life

Maintain and improve the waste collection, recycling and fuel efficiency

Deliver quality in all that we do

MEMBERSHIP OF THE HEALTH AND WELLBEING BOARD

Julian McGhee-Sumner	WBC
Dr Johan Zylstra	NHS Wokingham CCG
Keith Baker	WBC
Prue Bray	WBC
Charlotte Haitham Taylor	WBC
Nick Campbell-White	Healthwatch Wokingham Borough
Chief Inspector Rob France	Community Safety Partnership
Beverley Graves	Business Skills and Enterprise Partnership
Dr Lise Llewellyn	Director of Public Health
Nikki Luffingham	NHS England
Judith Ramsden	Director of Children's Services
Stuart Rowbotham	Director of Health and Wellbeing
Katie Summers	NHS Wokingham CCG
Dr Cathy Winfield	NHS Wokingham CCG
Kevin Ward	Place and Community Partnership

ITEM NO.	WARD	SUBJECT	PAGE NO.
15.		APOLOGIES To receive any apologies for absence	
16.		MINUTES OF PREVIOUS MEETING To confirm the Minutes of the Meeting held on 11 June 2015.	9 - 14
17.		DECLARATION OF INTEREST To receive any declarations of interest	
18.		PUBLIC QUESTION TIME To answer any public questions A period of 30 minutes will be allowed for members of the public to ask questions submitted under notice. The Council welcomes questions from members of the public about the work of this Board. Subject to meeting certain timescales, questions can relate to general issues concerned with the work of the Board or an item which is on the Agenda for this meeting. For full details of the procedure for submitting questions please contact the Democratic Services Section on the numbers given below or go to www.wokingham.gov.uk/publicquestions	

19.		MEMBER QUESTION TIME To answer any member questions	
20.		ORGANISATION AND GOVERNANCE	
21.	None Specific	WOKINGHAM LEARNING DISABILITY PARTNERSHIP BOARD - JOINT HEALTH AND SOCIAL CARE SELF-ASSESSMENT To receive a presentation on Wokingham Learning Disability Partnership Board - Joint Health and Social Care Self-Assessment. <i>(15 mins)</i>	15 - 26
22.	None Specific	CHILDREN AND YOUNG PEOPLE'S PARTNERSHIP UPDATE ON PRIORITIES AND THE EARLY HELP INNOVATION PROGRAMME To receive an update from the Children and Young People's Partnerships regarding its priorities and the Early Help Innovation Programme. <i>(15 mins)</i>	27 - 40
23.	None Specific	CARE ACT REFORMS UPDATE To receive an update on the Care Act reforms. <i>(10 mins)</i>	41 - 50
24.	None Specific	APPOINTMENT OF VOLUNTARY SECTOR REPRESENTATIVE TO HEALTH AND WELLBEING BOARD To consider the appointment of a Voluntary Sector representative to the Health and Wellbeing Board. <i>(5 mins)</i>	51 - 52
25.	None Specific	DELEGATION OF RESPONSE TO CONSULTATIONS ON PHARMACY APPLICATIONS To consider a report regarding delegating responding to consultations on Pharmacy Applications. <i>(5 mins)</i>	53 - 54
26.	None Specific	UPDATES FROM BOARD MEMBERS To receive updates on the work of the following Health and Wellbeing Board members: <ul style="list-style-type: none"> • Healthwatch Wokingham Borough • Business, Skills and Enterprise Partnership • Community Safety Partnership <i>(15 mins)</i>	Verbal Report
27.		PERFORMANCE	
28.	None Specific	PERFORMANCE METRICS To receive updates on performance against the following: <ul style="list-style-type: none"> • Better Care Fund; • Public Health Outcomes Framework, NHS and Adult Social Care, 	55 - 56

- Health & Wellbeing Strategy 2014-17.
Please note that this will be by exception only.
(15 mins)

29.		INTEGRATION	
30.	None Specific	BETTER CARE FUND HIGHLIGHT REPORT To receive a Better Care Fund highlight report. (10 mins)	To Follow
31.		HEALTH & WELLBEING	
32.	None Specific	CCG CLUSTER PROFILES To receive an update on the CCG Cluster Profiles. (10 mins)	57 - 60
33.	None Specific	UPDATE ON THE DEVELOPMENT OF THE APPROACH TO THE HEALTH AND WELLBEING STRATEGY To receive an update on the development of the approach to the Health and Wellbeing Strategy. (10 mins)	Verbal Report
34.		FORWARD PROGRAMME To consider the Health and Wellbeing Board's forward programme for the remainder of the municipal year. (5 mins)	61 - 66
35.		ANY OTHER ITEMS WHICH THE CHAIRMAN DECIDES ARE URGENT A Supplementary Agenda will be issued by the Chief Executive if there are any other items to consider under this heading.	
36.		EXCLUSION OF THE PUBLIC That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraphs 1 and 2 of Part 1 of Schedule 12A of the Act as appropriate.	
37.	None Specific	FEMALE GENITAL MUTILATION To receive an update regarding Female Genital Mutilation.	67 - 82

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Agenda Item 16.

MINUTES OF A MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 11 JUNE 2015 FROM 5.45 PM TO 6.50 PM

Present

Julian McGhee-Sumner	WBC
Keith Baker	WBC
Prue Bray	WBC
Charlotte Haitham Taylor	WBC
Chief Inspector Rob France	Community Safety Partnership
Beverley Graves	Business Skills and Enterprise Partnership
Dr Lise Llewellyn	Director of Public Health
Judith Ramsden	Director of Children's Services
Stuart Rowbotham	Director of Health and Wellbeing
Katie Summers	NHS Wokingham CCG
Dr Cathy Winfield	NHS Wokingham CCG
Kevin Ward	Place and Community Partnership Representative
Jim Stockley	Healthwatch Wokingham

Also Present:

Madeleine Shopland	Principal Democratic Services Officer
Darrell Gale	Consultant in Public Health
Andy Couldrick	Chief Executive
Brian Grady	Head of Strategic Commissioning
Sally Murray	NHS Central Southern commissioning Support Unit

1. APOLOGIES

Apologies for absence were submitted from Nick Campbell-White and Dr Johan Zylstra.

2. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Board held on 9 April 2015 were confirmed as a correct record and signed by the Chairman.

3. DECLARATION OF INTEREST

There were no declarations of interest made.

4. PUBLIC QUESTION TIME

There were no public questions.

5. MEMBER QUESTION TIME

There were no Member questions.

6. ELECTION OF CHAIRMAN FOR THE 2015/16 MUNICIPAL YEAR

RESOLVED: That Councillor Julian McGhee Sumner be elected Chairman of the Health and Wellbeing Board for the 2015/16 municipal year.

7. ELECTION OF VICE CHAIRMAN FOR 2015/16 MUNICIPAL YEAR

RESOLVED: That Dr Zylstra be appointed Vice Chairman of the Health and Wellbeing Board for the 2015/16 municipal year.

8. APPOINTMENT OF HEALTH AND WELLBEING BOARD SUB COMMITTEE MEMBERS 2015/16

The Board discussed membership of the Health and Wellbeing Board Sub Committee. The terms of reference of the Health and Wellbeing Board Sub Committee stated that:

The membership of the Health and Wellbeing Board Sub-Committee will be as follows:

- a) Two Elected Members who sit on the Health and Wellbeing Board
- b) Two representatives from the Wokingham Clinical Commissioning Group
- c) One representative from NHS England
- d) One representative from local Healthwatch
- e) Wokingham Borough Council Consultant in Public Health
- f) One Wokingham Borough Council Director
- g) One senior Wokingham Borough Council Planning Officer working on the Strategic Development Location's delivery
- h) One representative representing the Health and Wellbeing Board Partnership Groups

It was suggested that the Partnership Group representative be from the Place and Community Partnership.

RESOLVED: That the following be appointed to the Health and Wellbeing Sub Committee for 2015/16 and that the remainder of the appointments be confirmed at a later date.

- a) Two Elected Members who sit on the Health and Wellbeing Board – Councillors Julian McGhee-Sumner and Charlotte Haitham Taylor
- b) Two representatives from the Wokingham Clinical Commissioning Group – Katie Summers and Dr Johan Zylstra
- c) One representative from NHS England – to be confirmed
- d) One representative from local Healthwatch – Nick Campbell-White
- e) Wokingham Borough Council Consultant in Public Health – Darrell Gale
- f) One Wokingham Borough Council Director – To be confirmed
- g) One senior Wokingham Borough Council Planning Officer working on the Strategic Development Location's delivery – To be confirmed
- h) One representative representing the Health and Wellbeing Board Partnership Groups – (Place and Community Partnership) Kevin Ward

9. JOINT WOKINGHAM CCG AND WOKINGHAM BOROUGH COUNCIL EMOTIONAL HEALTH AND WELLBEING STRATEGY 2015 TO 2017

The Board considered the Joint Wokingham CCG and Wokingham Borough Council Emotional Health and Wellbeing Strategy 2015 to 2017 which was presented by Brian Grady and Sally Murray.

During the discussion of this item the following points were made:

- A strategy and action plan to improve comprehensive CAMHS had been produced by the Council and Wokingham CCG.
- Issues included:
 - Rising demand for CAMHS;
 - Rising demand in waiting times;
 - Focus on intervention for those children and young people most in critical need;
 - Workforce capacity.
- Healthwatch Wokingham had completed an extensive survey of children and young people, identifying emotional health and wellbeing priority issues for Wokingham children and young people, the findings of which informed the strategy. At least one in ten of those young people who had responded had indicated that they were carers.
- The six Berkshire Local Authorities had a shared action plan to work more cooperatively across the emotional health and wellbeing pathway.
- Brian Grady outlined actions required. These included:
 - The provision of a more comprehensive CAMHS;
 - A reduction in waiting times;
 - The delivery of improved administration and communication;
 - Better access to services out of hours and in times of crisis;
 - Improving the environment where children and young people are seen or are waiting for CAMHS.
- Sally Murray informed the Board that with regards to Tier 3 services £6,166,360 had been allocated. In addition Berkshire West CCGs had committed to increasing Tier 3 spend in Berkshire West by £1 million recurrently and £500K non recurrently from 2015/16.
- Board members were also informed of Partnership Development Fund grants relating to emotional health and wellbeing.
- Tiers 1 and 2 were commissioned by the Council and schools. A mapping exercise had been undertaken. Councillor Haitham Taylor commented that many schools were facing budget pressures and questioned whether the figures discussed would reduce further. Brian Grady commented that he believed that the figures already represented a reduction.
- The Children and Young People's Partnership was starting to identify budget priorities and challenges.
- Sally Murray reminded Board members that the national report 'Future in Mind: Promoting, protecting and improving our children and young people's mental health and wellbeing' suggested that the emphasis should be on lower tiers to reduce escalation to higher tiers. Judith Ramsden commented that issues surrounding CAMHS were wider than a need for greater investment in Tier 1 services.
- Dr Llewellyn emphasised the importance of promoting positive resilience.
- The Board discussed parity of esteem.
- The Board was assured that all urgent referrals were being seen by Tier 3 CAMHS within 24 hours.

- Councillor Bray questioned whether delays in the time between when a young person was first seen and first received treatment would be addressed. Sally Murray commented that there was a backlog and many of those waiting the longest were those on the ASD diagnostic pathway; which was a diagnostic pathway not a treatment pathway.
- Councillor McGhee-Sumner asked how Wokingham compared to its neighbours. Sally Murray indicated that there was no national comparator and that some other Trusts had a set longer wait time standards. The 12 week wait time standard had been set locally with Berkshire Healthcare NHS Foundation Trust. Nevertheless, locally Wokingham was not one of the better performers with regards to CAMHS.
- Councillor Haitham Taylor commented that children in care often had poorer emotional health and wellbeing but that this was not reflected in the action plan. Brian Grady emphasised that children's social care colleagues had been consulted on the strategy and action plan.
- Dr Llewellyn stated that the CAMHS needed to look at vulnerable children and young people and improve the level of responsiveness.
- In response to a question Dr Winfield indicated that CAMHS was commissioned across Berkshire West but that it was delivered locally.
- Councillor McGhee-Sumner asked how often the Board would be updated on the progress of the action plan. Brian Grady indicated that the Children and Young People's Partnership would receive a quarterly update and that the Board would receive a performance scorecard on a quarterly basis.
- Jim Stockley commented that although it was disappointing that the strategy still talked of Tiers it was promising to see the commissioning bodies working together. He asked whether a number of actions had been completed and was informed that they had.
- In response to a question Brian Grady confirmed that Louise Noble was Wokingham CAMHS Manager at Berkshire Healthcare NHS Foundation Trust.

RESOLVED: That

- 1) the proposed Emotional Health and Wellbeing strategy be agreed;
- 2) partnership commitment to the strategy Action Plan that aims to build a transformed comprehensive Child and Adolescent Mental Health Service (CAMHS) offer to families which is seamless and moves away from boundaries created by Tiered provision, be provided;
- 3) action to ensure that the Joint Strategic Needs Assessment process be improved in its analysis of children and young people's emotional health and wellbeing, be required and that a performance scorecard be agreed across commissioners and providers for comprehensive CAMHS to be presented quarterly at Health and Wellbeing Board;
- 4) responsibility for overseeing the implementation of the action plan be delegated to the Children and Young People's Partnership.

10. CHILDREN'S SOCIAL CARE ANNUAL REVIEW

Brian Grady informed Board members of the Children's Social Care Annual Review.

During the discussion of this item the following points were made:

- The review had involved a review team from both Children’s Services and Strategic Commissioning.
- The methodology had included triangulating evidence collected throughout the year and the aim of the review had been to gauge progress against the previous year and to identify strengths in the service, and areas for development in the coming year.
- Strengths identified included:
 - Implementation of the Practice Framework (Signs of Safety, Attachment, Family Star and Restorative) was going well;
 - 50 people have been trained as Signs of Safety Practice Leaders;
 - Turnover of Social Workers had reduced from 33% to 14% against the national picture. Judith Ramsden explained that financial rewards had been reconfigured, a practice framework had been adopted and caseloads had been reviewed and managed;
 - Bridges being awarded outstanding by Ofsted;
 - 6 experienced social workers appointed from overseas;
 - Early Help Senior Social Worker in post (Family Resource Team).
- Areas for further improvement identified included:
 - Further develop a Multi-agency Safeguarding Hub (MASH);
 - Improving delivery of life story work;
 - Continue to contribute to university seminars and implement the Social Work Academy;
 - Comprehensive CAMHS.

RESOLVED: That the Children’s Social Care Annual Review be noted.

11. LOCAL ACCOUNT

This item was deferred to enable to the collation of further information.

12. PERFORMANCE METRICS

The Board considered Performance Metrics.

During the discussion of this item the following points were made:

- The ‘Total non-elective admissions in to hospital (general and acute), all-age’ indicator was rated red. Katie Summers explained that Wokingham was one of the best performers with regards to non-elective admissions and the target hard to sustain. There had been a growth in non-elective rates and in the acuity of cases. It was noted that the Royal Berkshire Hospital was under pressure and that the rest of Berkshire West faced a similar problem to Wokingham. Whilst it had been hoped that the target level would be revised in order to be more achievable, NHS England had indicated that it would be difficult to get a reduction in the target level particularly in light of Wokingham’s anticipated population growth.
- Stuart Rowbotham reminded the Board that the figures provided were only a snapshot. He indicated that the direction of performance for the ‘Delayed transfers of care (delayed days) from hospital per 100,000 population (aged 18+)’ was downwards. Delayed transfers of care were becoming an acute issue and the levels of delay and activity were unprecedented. Issues of resilience in community based services were starting to become apparent. Dr Winfield reiterated the unprecedented levels of demand, particularly at this time of year. Royal Berkshire Fit to Go lists remained low and the A&E 4 hour wait target was only just being held. Judith Ramsden questioned how the Board could monitor the issue and was

informed that there was already architecture in place in the Berkshire West Partnership Board and a system wide approach was needed. Dr Winfield indicated that work was being undertaken with neighbouring authorities with regards to joint commissioning.

- Darrell Gale updated the Board on several Public Health Outcome Framework indicators. 'Healthy life expectancy at birth (Male)' had increased to 71.4 but 'Healthy life expectancy at birth (Female)' had decreased to 69.9. Darrell Gale commented that he did not believe there were links with deaths in maternity. Councillor Haitham Taylor emphasised the need to understand factors behind the decrease in healthy life expectancy at birth for females and questioned whether more females were carers and whether this would have an impact.
- 'Hips fractures in people aged 65 and over' had turned from green to amber.
- In response to a question, Darrell Gale confirmed that Wokingham was no longer an outlier for breast cancer.

RESOLVED: That the update on Performance Metrics be noted.

13. UPDATE FROM BOARD MEMBERS

Jim Stockley encouraged Board members to read Healthwatch Wokingham Borough's Annual Report 2014/15.

RESOLVED That the update from Health and Wellbeing Board members be noted.

14. FORWARD PROGRAMME

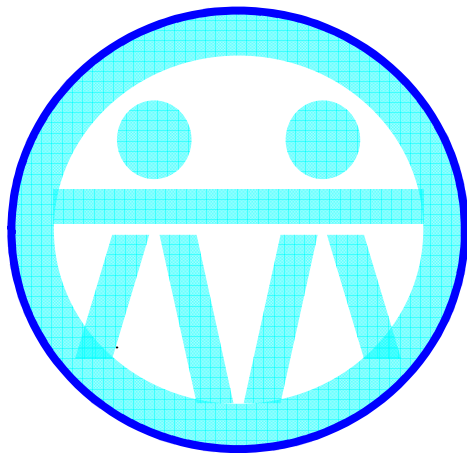
The Board considered the Forward Programme for 2015/16.

Judith Ramsden indicated that the Board would receive a full briefing on the impact of school readiness at its October meeting.

RESOLVED That the Forward Programme for 2015/16 be noted.

Health and Wellbeing Board

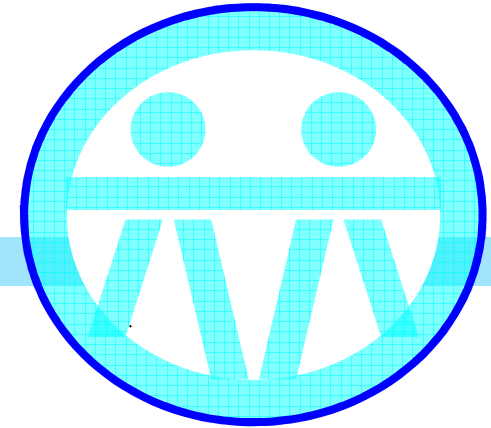
13th August 2015



Wokingham
Learning Disability
Partnership Board

Joint Health and Social Care Self Assessment Framework Update

Who are we?



The Wokingham Learning Disability Partnership Board is an empowering and inclusive network.

We work together with the learning disability community to break down barriers and enable positive outcomes for people with learning disabilities and their families.

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WOKINGHAM
BOROUGH COUNCIL



JHSCSAF Report

The **Joint Health and Social Care Self Assessment Framework** is:

An annual report that checks how well health and social care services are working for people with learning disabilities and their families

51 Non-mandatory but seen as best practice and completed by most local authorities

Asks for data, compliance and people's stories around 3 main areas – **Staying Healthy**, **Keeping Safe** and **Living Well**

A tool to identify priorities and opportunities to improve care and tackle inequalities

Returned to Public Health England and published online:

<https://www.improvinghealthandlives.org.uk/projects/jhscsaf2014results>

Wokingham JHSCSAF

The report was completed by the Public Health Team with the support of the Partnership Board. The Council and NHS Commissioning Support Unit provided information.

51 people shared their story with us to help us validate our ratings.

We ran an engagement event in January to share the information collected and agree our 'RAG' ratings. 38 people attended the event.

The report was signed off at the end of January.

The Partnership Board then wrote an easy read annual report based on the JHSCSAF. Available on the Partnership Board website:

<http://www.wokinghampartnershipboard.co.uk/page13.htm>



Staying Healthy

What's going well in Wokingham?

100% of GP practices are signed up to the [Annual Health Check](#) Direct Enhanced Service. 52% of people who are eligible for an Annual Health Check had one last year.

There is good evidence of people with learning disabilities [accessing disease prevention, health screening and health promotion opportunities](#). The uptake of screening appointments (cervical, breast and bowel) has increased on last year.

There was good evidence of reasonable adjustments being made in all areas of Primary Care including dentistry, community pharmacy and podiatry.

Evidence demonstrated that the [Learning Disability Co-ordinator role](#) at Royal Berkshire Hospital is highly regarded.



Staying Healthy

What changes are needed in Wokingham?

All 14 GP surgeries keep a [register of people with learning disabilities](#), as per QOF requirements. Data is aligned to the number of adults in receipt of social care but the children's data does not reflect actual numbers.

The number of people with learning disabilities recorded by GP surgeries as having a [Health Action Plan \(HAP\)](#) is 26%, an increase on last year. But specific health improvement targets set in the Annual Health Check are not always integrated with the HAP.

[Wokingham's JSNA](#) does not have a chapter on learning disabilities. There is a lack of information available that compares treatment and outcomes for people with learning disabilities against the general population. **Update: the JSNA will be updated this year to include a learning disabilities section.**



Keeping Safe

What's going well in Wokingham?

There is evidence of good [safeguarding reporting](#), training and partnership working in Wokingham, overseen by the Local Safeguarding Adults Board and the Local Safeguarding Children's Board. **Update: an easy read booklet is being written that explains the safeguarding process.**

There is good evidence of people receiving training around the Mental Capacity Act and Deprivation of Liberty Safeguards. New service specific training has been developed and will be rolled out.

There is some evidence of people with learning disabilities and their families being involved in [training and recruitment](#) in learning disability specific services, although this is not happening across all services.



Keeping Safe

What changes are needed in Wokingham?

Only 69% of people with a learning disability had an **annual review** of their care package. Anything less than 90% was scored Red in the JHSCSAF.

There needs to be more involvement from people with learning disabilities and their family carers in the **commissioning and monitoring of services, and recruiting and training staff** within the service.

We were rated amber for the question that asked if family carers and people with a learning disability agree that **all providers treat people with compassion, dignity and respect**. Some people felt more could be done for people with Profound and Multiple Learning Disabilities.



Living Well

What's going well in Wokingham?

There is extensive evidence of people with learning disabilities having access to reasonably adjusted **sports and leisure activities and cultural services** across the Wokingham borough.

There is evidence of reasonably adjusted **services which help improve and enhance access to the community** e.g. Safer Places scheme and Changing Places toilets.

Targets for getting people with learning disabilities into **employment** has been exceeded year on year.



Living Well

What's going well in Wokingham? (continued)

There is clear evidence of good [transition mapping and planning](#) for individuals. Education, Health and Care Plans were introduced in 2014 and following a successful pilot phase, all children with SEN/D will now receive an EHC Plan.

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What changes are needed in Wokingham?

There was uncertainty about the existence of a local [Employment Strategy](#), which meant our employment rating was set at amber, despite the high numbers of people with learning disabilities in employment.



Over to you

Any comments, questions, updates?



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TITLE	Children and Young People's Partnership update on priorities and the Early help Innovation Programme
FOR CONSIDERATION BY	Health and Wellbeing Board on 13 August 2015
WARD	None Specific
DIRECTOR	Judith Ramsden, Director of Children's Services

OUTCOME / BENEFITS TO THE COMMUNITY

The Wokingham Children and Young People's Partnership core priorities are set out in the Wokingham Children and Young Peoples Plan 2014-16. The plan establishes our priorities to improve support for families and children.

RECOMMENDATION

That the Health and Wellbeing Board

- 1) Notes the progress against both Children and Young Peoples Plan Priorities and the Early Help and Innovation Programme.
- 2) Endorses the proposed next step actions.
- 3) Agrees to receive a further report on impact and outcomes in the Autumn term, in particular with regard to Early Help.

SUMMARY OF REPORT

The report looks at progress against the key priorities identified in the Wokingham Children and Young Peoples Plan 2014-2016. These are:

Priority 1 - Refresh and renew our Early Help approach, building on what works well, empowering professionals to always keep child centred and designing service to enable excellent practice.

Priority 1a - As part of a renewed focus on Early Help, develop an integrated 0-5 offer across the Local Authority, health and early year's sector.

Priority 1b - As part of a renewed focus on Early Help, review emotional health and wellbeing services including primary CAMHS to improve the emotional health and wellbeing of vulnerable children and young people.

Priority 2 - Ensure more Wokingham children have access to the best education and focus on delivering improvements for those most at risk of poor outcomes

Priority 3 - Implement changes required to deliver on the Children and Families Act 2014 and go further to bring the child and family into the centre of assessment, planning and support processes.

Progress has been made against all the identified priorities as set out below.

Children and Young People's Plan Update

The Children and Young People's Plan is no longer a statutory requirement. Nevertheless Wokingham partners felt it was important that we formalise our partnership commitment for children and families through agreeing a Wokingham Children and Young People's Plan, setting out partnership priorities for two years 2014-2016.

Our Plan establishes a programme of activities across the full range of Children's Services that must be delivered in partnership – in particular with Wokingham CCG, Berkshire Healthcare Foundation Trust, the Police Constabulary, Wokingham schools and commissioned service providers.

A full account of the progress and next steps made against Children and Young People's Partnership Priorities is provided as Appendix One and progress is summarised below.

Progress on Priority 1: Refreshing and renewing our Early Help approach

- A partnership Early Help strategy has been agreed and implemented, setting a framework for practice and service development.
- An Early Help Hub has been established as our multi-agency model of supporting the delivery of Early Help.
- Our Early help and Innovation Programme has delivered a Practice Framework for all practitioners working with children and families; using Signs of Safety as the foundation for a common language and single practice framework and building on Restorative Practice, Family Star and Attachment theory.

Progress on Priority 1a, developing an integrated 0-5 offer:

- An Early Help Strategy agreed.

Progress on Priority 1b, reviewing emotional health and wellbeing services:

- The joint Wokingham CCG and Wokingham BC Emotional Health and Wellbeing Strategy and action plan was agreed by the Board on 11th June 2015.

Progress on Priority 2, ensuring access to the best education, improvements for those most at risk of poor outcomes:

- A revised School Improvement Strategy implemented.
- Strong school partnership relationships secured the primary and secondary place provision strategies are in the process of being implemented. This includes a new secondary school to open in September 2016 in Arborfield.

Progress on Priority 3, implementing Children & Families Act and bringing the child and family into the centre of assessment, planning and support processes:

- The Local Offer of services for children with Special Educational Needs and Disability and their families went live on time.
- Transfers to Education Health and Care plans are proceeding in an orderly fashion.
- The personal budgets policy for children subject to Education Health and Care Plans is in place.
- Improved Transition Support through agreement to increased resources.
- Positive experience of the new Education Health and Care Plans are being evidenced.

- The Children with Disability Strategy is currently being developed in conjunction with partners.

In addition to Plan priority next steps, in June 2015 Partners agreed to develop further joint projects to help manage the financial and delivery challenges we face as far as possible together, to secure greater efficiency and effectiveness through aligned resources. The approach is informed by and underpins our partnership Early Help strategy.

Projects identified are linked together by the further development of the single partnership brand – **‘Wokingham for Children.’** This is seen as an underpinning initiative within which each of the subsequent projects will take place. It is a way of promoting a strong shared identity for all partners working together to support children in Wokingham.

The first project under the ‘Wokingham for Children’ brand being developed is to extend the work that has already commenced to have a common strategy to support retention and recruitment of professional staff across the Borough. The purpose of the project will be to:

- Successfully recruit the best staff to professional posts in all services for children and families in Wokingham.
- Minimise the cost of recruitment by sharing resources wherever appropriate.
- Encourage retention of best staff through shared training and development based on common principles and standards.

The second project under the ‘Wokingham for Children’ brand being developed is to agree common principles and plans for the delivery of services across Wokingham, including how the needs of the population would be best met in terms of:

- Balance of services across the Borough.
- What teams are needed and where they need to be based.
- How multi-disciplinary working will be promoted and what clusters or localities will be used as the basis for future developments.
- Working arrangements including offices, information systems, remote arrangements.
- Referral and information pathways for children and families.

The purpose of the joint project will be to make the very best use of resources across the Borough and to reduce wasted expenditure as well as improve quality of practice in early help and community services. Once a common service model has been agreed the project would then need to involve the strategic management of service development by partners on an ongoing basis.

Project proposals are being developed for consideration by the Children and Young People’s Partnership in September.

Update on the Early Help and Innovation Programme

Early Help for children and their families is a strategic priority for Wokingham Borough Council (WBC) laid out as a key action in the Council Plan 2014-17 to *“develop and implement an early intervention strategy building on what works well now to support and*

enable children and families' needs to be identified and met at the earliest opportunity to empower families to meet the welfare and emotional health needs of their children, and make sure children are kept safe and their welfare promoted".

Early Help is a single or multi-agency package of support managed by a Wokingham Borough Council service for a child or young person, and/or their family, designed to achieve positive outcomes for the child and where the child does not reach the threshold for specialist or statutory intervention, but who without additional help is unlikely to meet his or her potential.

The following partnership services provide a range of Early Help services to children, young people and their families and are in the scope of the Early Help and Innovation programme:

- *Children's Centres, including Specialist Parenting Support*
- *Health Visitors*
- *General Practitioners*
- *Primary Mental Health Workers*
- *Police Community Support Officers*
- *Early Years Team*
- *Education Welfare Service*
- *Family Support and Resource Team*
- *Targeted Youth Support Service*
- *Youth Offending Service*
- *Educational Psychology Service*
- *Disabled Children's Team*

In July 2014 the Children's Partnership agreed to support a proposal to work with ten Local Authority areas and Munro, Turnell and Murphy as part of the England Innovation programme. Our bid was successful and we started working with MTM on the Early Help and Innovations Programme in December 2014.

Our Early Help and Innovation programme set out a plan accelerate the change on our whole system for children. The principles of this proposal centred on developing a system with a common language and a common approach – a Practice Framework for all those working in Wokingham with children and families based on a practice method developed by MTM, Signs of Safety. The purpose of the programme is to improve our practice across Childrens Services for Children and Families. The embedding of Signs of Safety has been aligned with other legislations and plans such as the Troubled Families Outcomes plan for phase 2.

The programme has a timeline of 18 months and is outlined in an implementation plan that consists of three phases. Phase 1 to January 2015 was preparation for the programme. Phase 2 to June 2015 has been putting our building blocks in place and training staff to start embedding our practice Framework based on Signs of Safety and Phase 3 from July 2015 to March 2016 is embedding and sustaining implementation and considering the practice and service changes our experience of working within our new practice framework are suggesting are priorities.

The first half of the programme has consisted of ensuring that we are sharing with staff and partners a clear vision of the change we want to achieve and offering development training to support the thinking within a single common Practice Framework. During Phase 1 and 2 we have achieved the following objectives:

- We have established a multi-agency training offer of Restorative Practice training, 3 hour introduction Signs of Safety Training and corporate induction training. During phase 1 we have completed initial training/introductions with Thames Valley Police, GP council, Education staff and majority of Local Authority Services both within Childrens and Adult Services.
- Managers Leading Change has been established as a multi-agency forum of frontline managers tasked with leading the programme, ensuring we stay close to practice and the experience of children and families.
- A pilot is underway 3 of our Early Help Services reviewing our assessment processes and testing a revised Early Help Assessment Framework and referral process.
- Family and Parent engagement has built upon agencies current practice, with further work done to explore what works well and areas of improvement through the programmes development.
- We have trained 60 Practice Leads through a 5 day training programme with Andrew Turnell. The Practice Leads that were trained are managers and practitioners within the Local Authority and partners. There is an emphasis on continuing the support for the 5 day programme for partners and practitioners with all Social Workers to be trained by January; we are also training our virtual school staff and other Education colleagues.
- Practice Leaders have been offered a programme of ongoing support from an independent Signs of Safety consultant on a 6 weekly basis. This will support in reflection of good practice, finding solutions to both internal and external barriers and reflect on how we are embedding the model within our services.
- Our commitment to the practice framework is being embedded within each service with continued support/offer of training.
- Wokingham Borough Council's supervision policy has been updated to include the Practice Framework and Signs of Safety. This includes the Group Supervision model whereby we are working towards ensuring that we are inviting those that are closest to the family to the supervision. This has included partners such as consultants from John Radcliffe Hospital, Health Visitors, GP's, Police Officers, Legal Services and other relevant professionals.
- The National workforce development survey from MTM Consultancy and Wokingham's local results have supported an updated workforce development strategy appropriately.
- Innovative ways of working with our Child Protection Processes are being mapped out in a project work stream that looks at how we embed Signs of Safety into Early Help and Child Protection Processes ensuring that we remain close to the reasons for the programme. We are therefore, working with the department for Education around possible exemptions to statutory guidelines within these areas. To do this we will be submitting a business case around models of working with families.

Monitoring Impact

We are seeing a positive impact on staff wellbeing. As part of the national programme, Munro, Turnell and Murphy surveyed staff in Wokingham on the impact of the new Practice Framework for them. The survey shows that staff feel they have a better understanding of harm/risk with families, more opportunity to have their say, feel more involved in decision making and feel they have clearer goals to work to. The survey also shows that Wokingham are below the National average in relation to their workforce feeling “stressed” and that they feel that management provide good support for difficult or stressful situations, along with feeling positive about supervision.

We are seeing a positive impact on Wokingham Borough Council staff recruitment and retention with our latest quarter report showing turnover reduced to 9.9%.

A key next step is evaluating whether the impact has translated to improved outcome for children and families. It is too early to expect sustained improvement but it is important we have established a baseline and the report on impact will be presented to the Children’s and Young Partnership in the autumn term. As part of our Early Help strategy we are developing more consistent partnership models of measuring outcomes using the Family Star. Each service currently monitors the impact of their Early Help using a range of tools designed to measure progress in key areas of concern for a child’s wellbeing including “Strengths & Difficulties Questionnaire” or through the use of “scaling questions” which quantify overall change in the risk of a child not reaching their potential. Some services, such as disability play schemes, are more reliant on customer satisfaction surveys.

An initial analysis in June 2015 of early help impact has reviewed the impact of delivery of Early Help. Of 362 cases registered on the Council’s system, 192 children’s cases (or 53%) (150 families) were reviewed to help us understand how our Early Help system was working.

Information recorded indicates that most cases were open for at least 12 weeks, with the first few weeks focused on gaining trust and building relationships. From the analysed group, Children’s Centres were the service most regularly identified as providing ongoing Early Help.

For the cohort, initial outcomes were analysed as follows:

For **833 (61%)** of these children positive outcomes were recorded.

For **142 (10%)** of these children no change was recorded.

For **98 (7%)** of these children, deterioration was recorded.

For **276 (20%)** it was too early to measure impact.

72 (5%) children or their parents were offered information, advice or guidance which resolved the issues.

43 (3%) children had needs which escalated and needed referral to higher level services.

This work has helped establish a position statement. With no national benchmark comparisons, it is too early in the analysis to draw substantive conclusions from the work done so far and more detailed analysis will be provided to Health and Wellbeing Board through the Children and Young People’s Partnership in the Autumn. Further work is focusing on understanding more those cases where it had been too early in the

help being offered to measure impact and those cases where deterioration or escalation has been recorded to ensure these cases inform our service developments.

It is reassuring that in 61% of cases Early Help is making an evidenced, positive impact on families lives.

Next Steps for Early Help and Innovation Programme

In phase 3 of the 18 month plan the next aims are:

- Support clear communications with partners, staff and families around the programme, signs of safety and how we can collectively look to manage impact.
- To support individual services to complete their service implementation plan that supports the overarching systemic change of embedding our new Practice Framework and Signs of Safety.
- Continue to secure commitment of partners on the roll out of our 3 hour introduction training to partners staff.
- Evaluate impact and outcomes for families to inform next stages of practice development and service development.
- Consider practice developments to submit to DfE as part of the England Innovation Programme.

Analysis of Issues

The update report demonstrates that progress has been made. Key highlights are identified above and in the body of the report. There are no priorities where there has been no progress. There are though specific plan components where progress has been slower than had been anticipated. Two key examples are highlighted below:

The Children with Disability Strategy needs to be developed further to reflect developing Health Care practice and to take account of recent work to clarify the availability and effectiveness of alternative provision for children outside schools.

The Emotional Health and Wellbeing strategy has been agreed but we need to see swift action on the implementation plan and evidence of improvements is expected in the coming Autumn term.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial	N/A	N/A	N/A

Year (Year 3)			
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Other financial information relevant to the Recommendation/Decision

The financial implications of each component of the plan will be dealt with decision by decision, rather than through the further development of the plan.

Cross-Council Implications

N/A

Reasons for considering the report in Part 2

N/A

List of Background Papers

Wokingham Children and Young Peoples Plan 2014 to 2016.

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Date 03/08/15	Version No. 1

Appendix One: Children and Young People's Partnership update on priorities 2014-16

Priority	Evidence for Priority	Progress 2014-2015	Next Steps 2015-2016
<p>Priority 1 - Refresh and renew our Early Help approach, building on what works well, empowering professionals to always keep child centred and designing service to enable excellent practice.</p>	<p><i>Children in need often have poorer outcomes than their peers. (JSNA).</i></p> <p><i>Wokingham has proportionally fewer children in need than seen elsewhere and the numbers are relatively small. This is also true for looked after children and children subject to a child protection plan. (JSNA).</i></p> <p><i>Children eligible for free school meals are more likely to start school at a disadvantage and the gap in performance does not decrease as the children progress through school (WBC).</i></p>	<p>Agreed partnership Early Help Strategy set framework for practice and service development (Sep 2014).</p> <p>Early Help and Innovation Programme established a practice Framework for all staff based on Signs of safety with a comprehensive training and development approach (Dec 2014).</p> <p>The Early Help Hub has been established in Wokingham as part of the Multi-Agency Early Help offer (Sep2014).</p> <p>Implementation of revised WSCB Levels of Need for services for children in Wokingham (Apr 2014).</p> <p>LSCB undertook multi agency audits confirmed that levels of Need framework was appropriate, Early Help interface with Social Care was effective and evidence of impact (Mar 2015)</p> <p>Independent evaluation identified positive impact on staff wellbeing & retention of staff. Q1 evaluation whereby retention statistics turnover reduced to 9.9% (June 2015)</p>	<p>Evaluation of impact and outcomes for children and families from first six months of programme underway and will be available to report to Board in the Autumn</p> <p>Implement phase 3 of Early Help and Innovation Programme</p> <p>Agree a partnership workforce development strategy to deliver a skilled and motivated workforce across organisations being piloted for a launch in the Autumn</p> <p>Development of Multi Agency Safeguarding Hub to build from the Early Help Hub developments</p>

Priority	Evidence for Priority	Progress 2014-2015	Next Steps 2015-2016
<p>Priority 1a - As part of a renewed focus on Early Help, develop an integrated 0-5 offer across the Local Authority, health and early year's sector</p>	<p><i>Despite overall good results in early years there are some disadvantaged children who do not achieve a "good standard of achievement", which is designed to measure school readiness. (WBC).</i></p> <p><i>Children eligible for free school meals are more likely to start school at a disadvantage and the gap in performance does not decrease as the children progress through school (WBC).</i></p>	<p>Wide stakeholder engagement has fed into the local service specifications for early years services including the Health Visitor service to ensure more joined up delivery, including commitment to our Practice Framework based on Signs of Safety (December 2014).</p>	<p>As part of our Early Help strategy, an action plan has been developed to tackle and redress the underlying root causes of disparity in school readiness amongst some of our young children with a clear investment plan.</p> <p>Evaluation of impact and outcomes from first six months of strategy and action plan underway and will be available to report to Board in the Autumn.</p>

Priority	Evidence for Priority	Progress 2014-2015	Next Steps 2015-2016
<p>Priority 1b - As part of a renewed focus on Early Help, review emotional health and wellbeing services including primary CAMHS to improve the emotional health and wellbeing of vulnerable children and young people.</p>	<p><i>Continued and increasing high usage of both Child and Adolescent Mental Health Service and wider counselling and emotional health and wellbeing support services (JSNA).</i></p> <p><i>Partnership reviews Identify the need for all tiers of emotional health and wellbeing provision to work together as a better system, so that children and young people are identified early and access any support they need quickly at the lowest and least restrictive tier possible. (JSNA).</i></p> <p><i>Wokingham Borough scored significantly worse than the national average for the previous National Indicator relating to the emotional health of children (JSNA).</i></p>	<p>Joint Wokingham CCG and Wokingham Borough Council emotional health and wellbeing strategy setting out how children and young people are able to access the right support at the right time agreed by Board (June 2015).</p> <p>Joint monitoring and action plan agreed to improve specialist CAMHS access and outcomes through local partnership working June 2015.</p>	<p>Work is in progress to recommission Tier 1 and 2 services. This includes through a developing partnership with other Berkshire authorities</p> <p>The next course of Nurture Assistant training advertised to schools to start September 2015. Pan-Berks group set up to increase and improve training and development support to early years.</p> <p>Joint Reading & Wokingham LA & CCG submission to DfE for a pilot to enhance training support for emotional health in schools submitted July 2015</p> <p>Partnership with Reading University being explored to deliver development support to practice</p> <p>Evaluation of impact and outcomes from first six months of strategy and action plan underway and will be available to report to Board in the Autumn.</p>

Priority	Evidence for Priority	Progress 2014-2015	Next Steps 2015-2016
<p>Priority 2 - Ensure more Wokingham children have access to the best education and focus on delivering improvements for those most at risk of poor outcomes</p>	<p><i>All Secondary Schools in the Borough good or outstanding (WBC).</i></p> <p><i>Some performance issues at primary and the attainment gap at KS2 and KS4 (GCSEs) between children eligible for free school meals and those who are not Children in need often have poorer outcomes than their peers. (WBC).</i></p> <p><i>There is a higher proportion of children with special educational needs among the Wokingham children in need population. Whilst there are relatively fewer children eligible for free school meals in Wokingham than seen nationally, the percentage of these children with statements of special educational need is higher than seen elsewhere (JSNA).</i></p>	<p>Revised School Improvement strategy agreed to address priorities identified in self-evaluation. A dual focus on inequalities where gaps between the achievement of the majority and vulnerable pupil groups are too wide and to increase the proportion of good and outstanding schools (December 2014).</p> <p>Heads' steering group established to ensure sustainable strategic focus and meeting through the year (September 2014)</p> <p>Data analysis expanded and issued earlier to be more effective to schools to aid their self-evaluations (September 2014)</p> <p>Support for Headteacher groups put in place (December 2014)</p> <p>Improved self evaluations evidenced (March 2015)</p> <p>The Wokingham Primary and Secondary Strategies have been implemented. A new secondary school is on track to open in September 2016. Three new primary schools were built in 2013 and the Evendons Free Primary school has also opened.</p>	<p>Preliminary "gaps" data is overall better with mixed elements for 2015. Improved in priority areas. % good/better schools improved 83-86%, with significant improvements in Early Years & primary school results. School Improvement strategy undergoing review to secure actions to sustain this trajectory of improvements and focus on areas of weaker performance.</p> <p>Data analysis expanded and reviewed again for 2015 implementation.</p> <p>Implement Primary and Secondary place strategies, delivering five new Primary Schools and a new Secondary School by 2016.</p> <p>Develop and implement the primary school place strategy 2015 to 18. This may include measures to increase mid-phase capacity, area specific proposals & implementation of school proposals in agreed Strategic Development Locations</p>

Priority	Evidence for Priority	Progress 2014-2015	Next Steps 2015-2016
<p>Priority 3 - Implement changes required to deliver on the Children and Families Act 2014 and go further to bring the child and family into the centre of assessment, planning and support processes.</p>	<p><i>Section 26 of the Children and Families Act 2014 sets out statutory requirements for local authorities and clinical commissioning groups and other NHS bodies to make joint “arrangements about the education, health and care provision to be secured for children and young people with special educational needs for whom it is responsible and for those with disabilities”.</i></p> <p><i>Support for children in transition is particularly important for Wokingham – we have low numbers of children transitioning from childrens to adults services and recent service reviews suggest areas for improvement (JSNA)</i></p> <p>.</p> <p><i>There are a higher proportion of children with special educational needs among the Wokingham children in need population. Whilst there are relatively fewer children eligible for free school meals in Wokingham than seen nationally, the percentage of these children with statements of special educational need is higher than seen elsewhere (JSNA).</i></p>	<p>Local Offer published online setting out Education, Social care and Health services available for children and families (Sep 2014)</p> <p>Education and social care personal budgets tested with EHCP cohort (July 2014)</p> <p>Arrangements for allocation of personal budgets across implemented (Sep 2014)</p> <p>Education, Health and Care Assessments tested on cohort (July 2014)</p> <p>Education Health and Care Plans implemented (Sep 2014)</p> <p>Transfer arrangements in place (Sep 2014)</p> <p>Changes to transition services (April 2015)</p> <p>Personal Budgets trialled in children’s social care. Quality Assurance has confirmed that Personal Budgets are considered with each new Education, Health and Care Plan assessment (Apr 2015).</p>	<p>First publication of service feedback due 31st August 2015.</p> <p>EHCP program of transfers underway to be completed.</p> <p>Positive feedback from schools and families regarding the quality of the process to be included and help shape the next steps actions plan.</p> <p>Training and awareness raising on EHCP processes and on transfer review process being offered to health staff.</p> <p>The Wokingham Children with Disability Strategy is currently subject to consultation with partner agencies and in particular the Wokingham CCG.</p>

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Care Act reforms update



WOKINGHAM
BOROUGH COUNCIL

Overview of April 2015 reforms



- * New rights for carers
- * New national eligibility criteria framework and assessments for care and support services
- * Prevention services
- * Better planning of transition between children's and adults' services
- * Easier to move between areas (continuation of services)
- * Universal deferred payments
- * Universal information and advice (including signposting to independent financial advice)
- * Safer services (statutory Safeguarding Board)
- * Market development
- * Managing market failure
- * Partnership working with NHS, housing and education

Implementation of April 2015 reforms



- * Assessments of needs reflect the new eligibility criteria
- * New assessments and statutory services for carers
- * Improved transition arrangements between children and adult services (e.g. young carers protocol, new transition guidance)
- * Independent advocacy services provided to customers and carers
- * Improved information and advice (new adult social care website, factsheets for customers and development of an online screening tool)

Implementation of April 2015 reforms cont.



- * Over 60 prevention services ranging from specialist information and advice, befriending services through to clubs and support groups are currently funded by WBC
- * Carers are supported through 20 community based services
- * Market Position Statement has been developed in partnership with local providers
- * Market Provider Failure protocol is in place
- * New safeguarding regulations have been implemented and training is available for staff
- * A number of projects with NHS funded through the Better Care Fund

Implementation of April 2015 reforms cont.



- * Streamlined financial framework (following 2 public consultations)
 - * Fair and equitable charging framework based on the individual customer's ability to pay (personal budgets)
 - * Carers are not charged for support
 - * Self-funders are required to pay for management of their support services
 - * Universal deferred payments
- * Extensive programme of training and staff development
- * Awareness raising campaign including personal letters to customers, public events, social media, online information and Wokingham Borough News articles

Delay of April 2016 reforms



- * **Care cap of £72,000** - after reaching the cap, all eligible residential and non-residential care would be provided free of charge to self-funders; free lifetime care for young adults with disabilities (if they became disabled before they are 21)
- * **Delayed till April 2020**
- * **Implications:**
 - * the delay means that LAs will not have to pick up the costs till April 2020 (there was no clear information on how this was to be funded)
 - * no need to assess self-funders from October (in preparation for April 2015)
 - * no impact on current social care customers fully funded by LA
 - * self-funders and customers who pay full cost or contribute to the cost of their care will have continue paying for their support

Delay of April 2016 reforms cont.



- * **Increased capital thresholds**

- * in a care home: upper limit would be **£118,000** (if property is taken into account) or **£27,000** (if property is disregarded); and lower limit would be **£17,000**,
- * in non-residential care: upper limit would be **£27,000** and lower limit would also be **£17,000**

- * **Delayed till April 2020**

- * **Implications:**

- * Current capital thresholds apply - the upper limit for both residential and non-residential care is **£23,250** and the lower limit is **£14,250**
- * More people would be eligible for free or subsidised care if these changes were implemented (it was not clear how this was to be funded)
- * No impact on current customers

Delay of April 2016 reforms cont.



- * **A duty on councils to meet the eligible needs of self-funders in care homes at their request**
- * **Delayed till April 2020**
- * **Implications:**
 - * No additional pressure on resources
 - * Positive impact on providers and LA (self-funders being entitled to lower rates negotiated by LA would potentially lead to destabilisation of the market and higher prices for LA)

Delay of April 2016 reforms cont.



- * **New appeals process** for adult social care (to appeal against decisions made about care and support)
- * **Deferred until the Spending Review in the Autumn**
- * **Implications:**
 - * No additional pressure on resources
 - * Decision on the timetable for appeals implementation will be made after the Spending Review.
 - * Social care customers and carers have access to an existing complaints system, and ultimately, the Local Government Ombudsman

Funding



- * The Department of Health is expected to advise local authorities on what will occur with the implementation funding in the light of the delay
- * The forthcoming Spending Review will determine the level of funding for social care

Agenda Item 24.

TITLE	Appointment of Voluntary Sector representative to Health and Wellbeing Board
FOR CONSIDERATION BY	Health and Wellbeing Board on 13 August 2015
WARD	None Specific
DIRECTOR	Andrew Moulton, Head of Governance and Improvement Services

OUTCOME / BENEFITS TO THE COMMUNITY
Voluntary Sector representation on the Health and Wellbeing Board.
RECOMMENDATION
1) That Clare Rebbeck be appointed to the Health and Wellbeing Board as a representative from the Voluntary Sector.
2) That it be recommended to Council, via the Constitution Review Working Group that section 4.4.23 of the Council's Constitution be amended to reflect the addition of a Voluntary Sector representative on the Health and Wellbeing Board.
3) That it be recommended to Council, via the Constitution Review Working Group that the Health and Wellbeing Board agrees amendments to its terms of reference in future without requiring the agreement of Council, due to the evolving nature of the Board.
SUMMARY OF REPORT
The purpose of the report is to appoint a representative of the Voluntary Sector to the Health and Wellbeing Board.

Background

Section 194 (2) of the Health and Social Care Act 2012 sets out the required 'core membership' of the Health and Wellbeing Board. The Health and Wellbeing Board may appoint such additional persons to be members of the Board as it thinks appropriate. The appointment of any additional members to the Health and Wellbeing Board will take place at Board meetings. This could include representatives from other groups or stakeholders, such as the voluntary sector, who can bring in particular skills or perspectives, or have key responsibilities which can support the work of boards.

It is proposed that Clare Rebbeck of Involve, Wokingham Borough be appointed to the Health and Wellbeing Board as Voluntary Sector representative.

The Council's Constitution, section 4.4.23, will require amendment to reflect the addition of a representative from the Voluntary Sector to the Health and Wellbeing Board.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions

to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial Year (Year 3)	N/A	N/A	N/A

Other financial information relevant to the Recommendation/Decision	
N/A	
Cross-Council Implications	
N/A	
Reasons for considering the report in Part 2	
N/A	
List of Background Papers	
N/A	
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Date 20.07.15	Version No. 1

Agenda Item 25.

TITLE	Delegation of Response to Consultations on Pharmacy Applications
FOR CONSIDERATION BY	Health and Wellbeing Board on 13 August 2015
WARD	None Specific
DIRECTOR	Andrew Moulton, Head of Governance and Improvement Services

OUTCOME / BENEFITS TO THE COMMUNITY

That a response is made on behalf of the Health and Wellbeing Board to any forthcoming pharmacy applications on which the Board is consulted.

RECOMMENDATION

That the formulation of consultation responses on behalf of the Health and Wellbeing Board to pharmacy applications received from the Thames Valley Primary Care Agency, be delegated to the Consultant in Public Health in consultation with the Chairman of the Health and Wellbeing Board.

SUMMARY OF REPORT

Health and Wellbeing Boards were required to have a Pharmaceutical Needs Assessments, an overview of local pharmaceutical needs, services and gaps in provision in the local area, in place by 1st April 2015.

The Wokingham Pharmaceutical Needs Assessment does not make a recommendation for new pharmacy provision in the area at this stage.

The Health and Wellbeing Board is consulted on various types of applications for new pharmacy contracts in the Borough or adjoining areas. Due to the fact that the consultation periods for the applications may not coincide with the timing of the Health and Wellbeing Board meetings it is proposed that the formulation of consultation responses on behalf of the Health and Wellbeing Board to pharmacy applications received from the Thames Valley Primary Care Agency, be delegated to the Consultant in Public Health in consultation with the Chairman of the Health and Wellbeing Board.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial Year (Year 3)	N/A	N/A	N/A

Other financial information relevant to the Recommendation/Decision
N/A

Cross-Council Implications
N/A



Reasons for considering the report in Part 2
N/A












List of Background Papers
N/A

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Health and Wellbeing Board Performance Report

Reporting Period: April to June 2015 (Quarter 1)

Key:		Performance Improving compared to previous period
		Performance Deteriorating compared to previous period

HWB Priority	HWB Strategy Objective	Performance Indicator (Better Care Fund Indicator are in BOLD)	Year End Target 2015-16	Benchmark 2013-14 Average	Provenance of Benchmark	Reporting Frequency	Period	Expected Performance this Period	Actual Performance this Period	RAG this Period	Direction of Performance (see key)	Expected Performance to Date	Actual Performance to Date	RAG to Date	Projected Year End Performance	Commentary
BCF	5a	Total non-elective admissions in to hospital (general & acute), all-age	Q3 (Oct 15 - Dec 15) 2,977	1,695	Berkshire West CCG Average per 1,000 population. Wok is 1,650 per 1,000 population	Quarterly	Quarter 4	2,869	2,796	Green		2,869	2,796	Green	2,939	Awaiting quarter 1 2015-16 data
BCF	5a	Permanent admissions of older people (aged 65 and over) to residential and nursing care homes	163	TBC	TBC	Monthly	Jun-15	14	9	Green	No change	42	31	Green	186	Social care team working in RBFT to support improved decision making on resident and nursing care homes placement.
BCF	5a	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	70%	TBC	TBC	Annual	January to March	70%	77.9%	Green		70%	77.9%	Green	NA	The indicator changed for 15-16 to monitor every person who is discharged from hospital into reablement. The indicator has only been in place since 1st April 2015 and we are only just past the first 91 days. There is currently no data to report for 15-16.
BCF	5a	Delayed transfers of care (delayed days) from hospital per 100,000 population (aged 18+).	4,999	TBC	TBC	Monthly	Jun-15	340	255	Green		1,020	765	Green	3,060	Royal Berkshire Fit to go lists remains low.
BCF	5b	Number of patients going through reablement	900	TBC	TBC	Monthly	Jun-15	75	62	Green		225	238	Green	952	START have two FTE carers commencing induction on 31.3.15 and an on-going recruitment programme to build capacity.
BCF	5b	Adult Social Care User Experience Survey: Q3b Do care and support services help you in having control over your daily life?	87.7%	88.4%	South East region average	Annual	2014-15	87.7%	90.4%	Green		87.7%	90.4%	Green	87.7%	
		National GP survey is Section 8 Question 32: In the last 6 months, have you had enough support from local services or organisations to help you to manage your long-term health condition(s)? Please think about all services and organisations, not just health services.	Not set	64%	England	Annual	2014-15	64%	Survey currently being undertaken	NA	NA	64%	Survey currently being undertaken	NA	Not set	Data is based on collection during July-September 2014 and January-March 2015. Current performance is 66% which consists of fieldwork from January-March 2014 and July-September 2014.
		Adult Social Care User Experience Survey: 2. Thinking about the good and bad things that make up your quality of life, how would you rate the quality of your life as a whole?	88%	TBC	TBC	Annual	2014-15	88%	92.5%	Green		88%	92.5%	Green	88%	This indicator is a percentage of all respondents to the survey who said their quality of life was 'So good, it could not be better', 'very good', 'good' or 'alright'. Includes responses to easy read surveys.
		Number of Adult Safeguarding Referrals	Not set	TBC	TBC	Monthly	Jun-15	40	31	NA		120	110	NA	NA	This is an area of significant concern and impact nationally and is something we need to monitor closely as a Board.
CCG - Local quality priority		Increase the number of referrals to the BHFT memory clinic	505	TBC	TBC	Qtrly	Quarter 4	130	144	Green		505	556	Green	NA	Local target, to support increase in diagnosis of Dementia. Awaiting Quarter 1 data
CCG - Local quality priority		Percentage of report dementia diagnosis	56.9%	TBC	TBC	Annual	Mar-15	55%	58.1%	Green		55%	58.1%	Green	NA	Expectation to achieve 67% for March 2016
CCG national quality priority		IAPT Access: The proportion of people with depression /anxiety that have entered psychological therapies	15.9%	TBC	TBC	Qtrly	Quarter 3	3.8%	4.3%	Green		7.5%	11.9%	Green	15.9%	Increased investment from the CCG to the IAPT service in 2014-15. Awaiting quarter 4 data
CCG national quality priority		IAPT recovery rate	50%	TBC	TBC	Qtrly	Quarter 3	50%	59.5%	Green		50%	60.5%	Green	65%	Increased investment from the CCG to the IAPT service in 2014-15. Awaiting quarter 4 data

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Agenda Item 32.

TITLE	CCG Cluster Profiles
FOR CONSIDERATION BY	Health and Wellbeing Board on 13 August 2015
WARD	None Specific
DIRECTOR	Stuart Rowbotham, Director of Health and Wellbeing

OUTCOME / BENEFITS TO THE COMMUNITY

To note the progress of the Cluster Work being undertaken by Wokingham CCG, to have the best available services offered to the registered residents of Wokingham Borough CCG and to best distribute and plan services according to the needs identified.

RECOMMENDATION

To note the progress of the Cluster Work by Wokingham Borough Council's Public Health Team and the wider Cluster Project Team

SUMMARY OF REPORT

To note the progress of the CCG Cluster work ongoing.

Background

The neighbourhood Clusters project is part of the wider Better Care Fund and is aimed at primary prevention and self-care.

A Wokingham CCG Locality Profile has been created by the Public Health Central Team in Bracknell; this is part of the Joint Strategic Needs Assessment for Wokingham Borough Council. Its aim is to support GP commissioners to identify the priorities for the local area and develop their commissioning priorities accordingly. This was then broken down further into Cluster profiles as requested by the Wokingham CCG Cluster project team. There are three clusters within Wokingham CCG, North, East and West, with the aim of encouraging collaborative working between Health and Social Care.

The Cluster Profiles have been written by the Public Health team at Wokingham Borough Council and supported by the Public Health Central team. The first draft was completed and then sent through to the Cluster Project team for feedback; this feedback has since been incorporated into the Cluster Profiles which are now in their final stage of completion.

Analysis of Issues

No issues identified

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial Year (Year 3)	N/A	N/A	N/A

Other financial information relevant to the Recommendation/Decision

N/A

Cross-Council Implications

N/A

Reasons for considering the report in Part 2

N/A

List of Background Papers

Wokingham CCG Cluster Profiles
Wokingham CCG Area Profile -

http://www.wokinghamccg.nhs.uk/images/about_us/Wokinghamccg_health_Profile_2014.pdf

Contact Darrell Gale	Service Public Health
Telephone No 0118 908 8195	Email Darrell.gale@wokingham.gov.uk
Date 3 August 2015	Version No. 1

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HEALTH AND WELLBEING BOARD

Forward Programme from June 2015

Please note that the forward programme is a 'live' document and subject to change at short notice.

The order in which items are listed at this stage may not reflect the order they subsequently appear on the agenda / are dealt with at the scrutiny meeting.

All Meetings start at 5pm in the Civic Offices, Shute End, Wokingham, unless otherwise stated.

HEALTH AND WELLBEING BOARD FORWARD PROGRAMME 2015/16

DATE OF MEETING	ITEM	PURPOSE OF REPORT	REASON FOR CONSIDERATION	RESPONSIBLE OFFICER / CONTACT OFFICER	CATEGORY
8 October 2015	Safeguarding Adults Partnership Board – annual report and business plan'	To receive the Safeguarding Adults Partnership Board – annual report and business plan	For information	Stuart Rowbotham, Director of Health and Wellbeing	Organisation and governance
	Local Account	To monitor the Local Account	To monitor performance	Stuart Rowbotham	Organisation and governance
	Update on H&WBS priorities	To discuss priorities for refreshed Health and Wellbeing Strategy	Progress	Health and Wellbeing Board	Health and Wellbeing
	Performance metrics	To receive an update on performance regarding: <ul style="list-style-type: none"> • Better Care Fund • Implementation of Care Act • Health and Wellbeing Strategy • NHS, Adult Social Care and Public Health Outcomes Framework 	To monitor performance	Health and Wellbeing Board	Performance
	School readiness - impact	Update on School readiness - impact	For information	Judith Ramsden, Director of Children's Services	Health and Wellbeing
	Updates from Board members	To receive an update on the work of Board members	To update on the work of Board members	Health and Wellbeing Board	Organisation and governance

	Forward Programme	Standing item.	Consider items for future consideration	Democratic Services	
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DATE OF MEETING	ITEM	PURPOSE OF REPORT	REASON FOR CONSIDERATION	RESPONSIBLE OFFICER / CONTACT OFFICER	CATEGORY
10 December 2015	Performance metrics	To receive an update on performance regarding: <ul style="list-style-type: none"> • Better Care Fund • Implementation of Care Act • Health and Wellbeing Strategy • NHS, Adult Social Care and Public Health Outcomes Framework 	To monitor performance	Health and Wellbeing Board	Performance
	Updates from Board members	To receive an update on the work of Board members	To update on the work of Board members	Health and Wellbeing Board	Organisation and governance
	Forward Programme	Standing item.	Consider items for future consideration	Democratic Services	

DATE OF MEETING	ITEM	PURPOSE OF REPORT	REASON FOR CONSIDERATION	RESPONSIBLE OFFICER / CONTACT OFFICER	CATEGORY
11 February 2015	Performance metrics	To receive an update on performance regarding: <ul style="list-style-type: none"> • Better Care Fund • Implementation of Care Act • Health and Wellbeing Strategy • NHS, Adult Social Care and Public Health Outcomes Framework 	To monitor performance	Health and Wellbeing Board	Performance
	Health and Wellbeing Strategy	To sign off refreshed Health and Wellbeing Board	To sign off refreshed Health and Wellbeing Board	Health and Wellbeing Board	Health and Wellbeing
	Updates from Board members	To receive an update on the work of Board members	To update on the work of Board members	Health and Wellbeing Board	Organisation and governance
	Forward Programme	Standing item.	Consider items for future consideration	Democratic Services	

DATE OF MEETING	ITEM	PURPOSE OF REPORT	REASON FOR CONSIDERATION	RESPONSIBLE OFFICER / CONTACT OFFICER	CATEGORY
14 April 2015	Performance metrics	To receive an update on performance regarding: <ul style="list-style-type: none"> • Better Care Fund • Implementation of Care Act • Health and Wellbeing Strategy • NHS, Adult Social Care and Public Health Outcomes Framework 	To monitor performance	Health and Wellbeing Board	Performance
	Updates from Board members	To receive an update on the work of Board members	To update on the work of Board members	Health and Wellbeing Board	Organisation and governance
	Forward Programme	Standing item.	Consider items for future consideration	Democratic Services	

Site visits:

- Wokingham Hospital - TBC

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