READING BOROUGH COUNCIL

REPORT BY MANAGING DIRECTOR

TO: Health and Wellbeing Board

DATE: 10 October 2014 AGENDA ITEM: 9

TITLE: Health and Wellbeing Strategy Action Plan

LEAD Councillor Hoskin PORTFOLIO: Health

COUNCILLOR:

SERVICE: Public Health WARDS: Borough-Wide

LEAD OFFICER: Asmat Nisa TEL: 0118 937 3657

JOB TITLE: Consultant in Public E-MAIL: asmat.nisa@reading.gov.uk

Health - Reading

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1 This report updates the Board on the Health and Wellbeing Strategy activity delivered and progressed through 2013/14 and 2014/15 to date. The action plan captures and reports on delivery of activity from partners contributing to the plan.

1.2 Appendices with this report:

- A summary of Health and Wellbeing Strategy Goals and Objectives (Appendix 1)
- The updated Health and Wellbeing action plan for 2014/15 (Appendix 2);

2. RECOMMENDED ACTION

- 2.1 To note the progress of activity that contributed to the delivery of Health and Wellbeing Strategy to date, as set out in Appendix 1.
- 2.2 To agree the proposed process for developing a baseline action plan for 2015/16, as set out in paragraphs 4.2 to 4.5, to be presented to the Board in April 2015.
- 2.3 To agree the reviewed process for keeping the action plan updated, as set out in paragraphs 4.6 and 4.7.

3. POLICY CONTEXT

- 3.1 The Reading Health and Wellbeing Board has been working collaboratively with Health and Wellbeing partners since it was established in response to our statutory obligation. The Board is responsible for ensuring effective delivery of programmes and initiatives, which impact on health, across the Borough and this work is influenced by the jointly produced Health and Wellbeing Strategy for Reading.
- **3.2** The Health and Wellbeing Strategy was developed in 2013 and is due to be refreshed in 2016.

4. HEALTH AND WELLBEING STRATEGY AND ACTION PLAN

- **4.1** Following feedback from the last board and subsequent discussions with health partners and other contributors to the delivery of the strategy, the action plan for 2014/15 has been reviewed and progress updates collated on all activity in 2013/14 and 2014/15 to date (see Appendix 1).
- **4.2** Public Health proposes to review lessons learnt to date and develop a framework for the development of an improved baseline action plan for 2015/16.
- 4.3 It is proposed that the Public Health team hold a workshop with partners contributing to the health and wellbeing agenda, to ensure that the action plan for 2015/16 focuses on and captures, key deliverables from all partners that contribute to the delivery of the Health and Wellbeing Strategy 2013-2016. Key outcome measures will also be included in the action plan for 2015/16, following feedback from partners, to ensure the impact is clearly demonstrated.
- **4.4** The action plan for 2015/16 will be expanded to include contributions from other partners, including Healthwatch, voluntary sector providers and provider organisations.
- **4.5** Baseline action plan for 2015/16 to be presented to the Board in April 2015.
- 4.6 Public Health will monitor and track progress to the strategy and the delivery of activity. Partners will be asked to regularly review activity that they have put themselves forward as being accountable for, and provide progress updates that will be collated and reported to the Health and Wellbeing Board every six months. Usually requests will be issued electronically, but where there is an opportunity to review progress at regular meetings that have already been planned, public health will ask for the action plan to be added to the agenda, for example at regular quarterly update meetings with CCG partners.
- **4.7** The Public Health team has worked with partners to ensure key contacts for monitoring activity of each area have been identified. Partners have been asked to advise of any changes.

5. CONTRIBUTION TO STRATEGIC AIMS

5.1 The Health and Wellbeing Strategy and action plan will impact on the strategic aim of promoting equality, social inclusion and a safe and healthy environment for all.

6. COMMUNITY ENGAGEMENT AND INFORMATION

6.1 Our ongoing commitment to working with other local health services, partners, communities and local people in the work we do reflects how important we believe engagement in developing local health services is.

7. EQUALITY IMPACT ASSESSMENT

7.1 No equality impact assessment has been undertaken for this report.

8. LEGAL IMPLICATIONS

8.1 There are no legal implications associated with this report.

9. FINANCIAL IMPLICATIONS

9.1 The financial implications of the Strategy must be contained within current resources for all partners. For the Public Health team, this is absorbed within the ring fenced grant from the Department of Health. The Department of Health grant for Reading is £8.212 million for 2014/15 and will remain the same for 2015/16.

10. BACKGROUND PAPERS

10.1 Health and Wellbeing Strategy 2013 - 2016: http://www.reading.gov.uk/documents/Health_Social_Care/Public_Health/25 013/ReadingHealthandWellbeingStrategy.pdf

Our vision – A healthier Reading

Communities and agencies working together to make the most efficient use of available resources to improve life expectancy, reduce health inequalities and improve health and wellbeing across the life course

Goal One – Promote and protect the health of all communities particularly those disadvantaged

Objective 1 – Protect health and reduce the burden of communicable diseases by targeting services more effectively

Objective 2 - Ensure effective support is available to vulnerable and BME groups to protect their own health.

Objective 3 – Increase awareness and uptake of Immunisation and Screening programmes

Goal Three – Reduce the impact of long term conditions with approaches focused on specific groups

Objective 1 - Assist and support ability to self-care in all adults and young people with existing long term conditions

Objective 2 - Ensure high quality long term condition services are available to all including those with a learning disability

Objective 3 - Build on and strengthen the quality and amount of support available to adult and young carers in Reading

Goal Two – Increase the focus on early years and the whole family to help reduce health inequalities

Objective 1 – Ensure high quality maternity services, family support, childcare and early years education is accessible to all

Objective 2 – Reduce inequalities in early development of physical and emotional health, education, language and social skills

Objective 3 - Improve identification and reduce the effects of domestic violence on emotional wellbeing for the whole family

Goal Four – Promote health-enabling behaviours & lifestyle tailored to the differing needs of communities

Objective 1 – Improve tobacco control and reduce harm due to alcohol and drug misuse in Reading

Objective 2 – Enhance support and target causes of lifestyle choices impacting health for adults and children

Objective 3 – Reduce the prevalence, social and health impacts of obesity in Reading including targeting key causes

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | |
|---|---|---|--|------------|--|--|--|--|--|
| _ | G O What Do We Want To Achieve bab bj | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | |
| , | Assess the need, demand and service provision for sexual health services across Reading and identify gaps (Extended). | Undertake a sexual health needs assessment | Public Health | Green | Needs assessment completed. Outcomes used to inform content of Integrated Sexual Health Services specification. | Complete Sexual Health Services tender process. | | | |
| , | prevention awareness within BME communities | Commission a community based HIV needs assessment to map Reading based African community groups and to assess the acceptability and feasibility of approaches to increase HIV testing | Public Health/Adult Social Care | Green | Community Health Action Trust commissioned. Project Undertaken. | Finalise and circulate project write up and recommendations. | | | |
| , | | Enhanced testing in primary care | Public Health | Green | Piloted enhanced testing. Report produced and recommendations provided to the CCG. | No further action in primary care, as enhanced testing was considered not to be best use of resources. However, other methods of increasing uptake to be considered. | | | |
| • | reduce late diagnosis | Increase awareness and information about HIV and HIV services (including eligibility, confidentiality, treatment and what it means to live with HIV); and promote preventative services | Public Health, NHS England, voluntary orgs (Secondary Care Blood Donation Service) | Amber | Community Health Action Trust project commissioned and undertaken. Reading sex workers HIV awareness campaign delivered and independently evaluated. Scope and detail of HIV services clearly described within the integrated sexual health service specification. | Develop Sexual Health IT Platform for promotion and dissemintaion of information. | | | |
| 7 | - [: | Increase opportunity to and uptake of HIV testing and disseminate information about opportunities for testing to targeted/vulnerable groups | Public Health, Adult Social Care | Amber | As above. | Develop Sexual Health IT Platform for promotion and dissemintaion of information. | | | |
| , | | Extend opportunities for accessible confidential testing for HIV, and ensure information is available and accessible in a range of formats appropriate to at-risk HIV groups. Care planning, diabetes/care homes. Directory of signposting services to support self care. | PDSN Network, Adult Social Care, Public Health | Amber | As above. | Develop Sexual Health IT Platform for promotion and dissemintaion of information. | | | |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | | | |
|---|--|--|--|--|------------|---|--|--|--|--|--|
| | O bj | What Do We Want To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | | |
| - | П | To provide high quality care/treatment | | Secondary care/Hospital | Green | Over 90 professionals and volunteers working in drug and alcohol treatment services have been trained to carry out point-of-care tests for Hepatitis C and HIV, focussing on increasing the proportion of injecting drug users that receive a test. Asian Blood Borne Virus (BBV) project raises awareness of BBVs and tackles stigma and discrimination by providing regular workshops for South Asian communities and testing for Hepatitis C and HIV at clinics set up across Reading. Two workshops updating on latest BBV research were provided to all trainees in both projects. | The new drug and alcohol treatment provider, commissioned by Reading DAAT will continue to support the BBV Champions project and deliver targeted testing. Two workshops to be delivered every year updating all trainees in both projects on latest BBV research. | | | | |
| 1 | 1.2 | • | 1 3 | Community Safety, Adult Social Care | Green | The Safe Place scheme to provide support for people with a Learning Disability has been put in place. | Further promotion of the Safe Place scheme for service users and providers. | | | | |
| 1 | 1.2 | | enhanced response for vulnerable people and communities | Community Safety, Housing, Neighbourhoods and Community Services | Green | Police anti-social behaviour risk assessment has been introduced across the whole of Thames Valley Area. This inlcudes an assessment of vulnerable people and communities. | The policy and procedure for tackling anti-social behaviour is being reviewed to co-incide with the implementation of the new anti-social behaviour legislation, which goes live on 20th October 2014. | | | | |
| 1 | .2 | | Reduce the number of Category 1 hazards under the Housing Health & Safety Rating System, to improve living conditions. | Regulatory Services | Green | 54 properties were made free of category 1 hazards across private sector housing. | Continue to monitor and take action if Category 1 hazards are identified in properties. | | | | |
| - | 1.2 | | private sector housing | Regulatory Services | Green | service requests and during proactive inspections and both formal and informal action is taken to deal with overcrowding. | Ongoing. | | | | |
| - | | Provide better access to information on how to protect own health. | 3 | Housing, Neighbourhoods and Community Services | Amber | Unauthorised Encampment Procedure has been drafted. | Gypsy, Roma and Traveller Achievement Network meetings are utilised to provide service overviews and referral mechanisms, but this still needs to be formalised. Identify health lead officer to collate information relating to services available across Reading. | | | | |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | |
|---|--|--|---|---|------------|--|---|--|--|
| | O a bj | What Do We Want To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | |
| - | 1.2 | | Develop better information pathways to support BME communities | All Health and Wellbeing Partners | Green | Information pathways have been established through providers of commissioned health and wellbeing services, Council services and partner organisations including Reading Voluntary Action, online through our Reading Services Guide and the Council's website, via local forums and community events and the local media. | Opportunities will be explored on an ongoing basis and new pathways adopted as appropriate. | | |
| - | | Protect the vulnerable from aggressive doorstep selling, rogue traders and scams | Support the National Scams Hub and provide advice to victims. Provide a rapid response and full investigation of doorstep selling offences. | Regulatory Services | Green | Set up the service and put in place a process on approaching potential victims effectively. List of potential victims is received from National Scams Hub montly. | Developing a strategy on working with neighbouring boroughs and police to visit potential victims and support or refer them to the appropriate agency and take enforcement action against fraudsters. | | |
| - | 1.2 | | Provision of Grants & Loans (inc Disabled Facilities Grants) | Regulatory Services | Green | Provided through Home Improvement Agency who have a vetted list of contractors. | Ongoing. | | |
| - | | | Review screening checks for communicable diseases, e.g. tuberculosis & measles, chlamydia, flu | Commissioned by PHE Area Team and Public Health, provided by Primary Care | Green | The Chlamydia screening specification reviewed and updated. Public Health team supported delivery of flu campaign. Flu vouchers provided to eligible staff. | Pilot 'dual testing' for Chlamydia. Work in partnership to deliver the flu campaign. | | |
| 7 | 1.3 | | GP Practice targets for health checks are achieved and a wide range of community interventions ensure access to health checks though alternative settings | Public Health | Amber | offered a health check to date. Completed health | Ongoing review of options for improving uptake of NHS Health Checks offered by GP practices and additional access to health checks beyond GP setting. | | |
| - | 1.3 | | Develop targeted improvements to increase uptake of screening in people with a learning disability | Reading Learning Disability Partnership Board, Adult Social Care | Amber | Being Healthy sub group of the Learning Disability Partnership Board have worked with People With Learning Disabilities, Healthwatch and Berkshire Healthcare Foundation Trust to increase uptake. | Build targets into the new disability strategy currently being developed. | | |
| - | | • | Provide support and oversee local screening programmes | Cervical & breast screening commissioned by Area Team/PHE, bowel screening commissioned by PHE, all three screenings provided by Primary Care | Amber | Bowel screening campaign carried out by South Reading and North and West Reading Clinical Commissioning Groups during 2013/14 with some success. For North & West Reading CCG there was a increase in screening from 55.5% to 61.9%. | New local initiatives to be considered to take this forward in conjunction with Public Health England as appropriate. | | |
| - | က | | Provide advice to PHE Immunisation leads as appropriate to ensure effective evidence based interventions are developed to meet local needs | Commissioned by NHS, provided by Public Health, CCGs | Green | See progress below. | No further steps. | | |

7

| | | | Hea | ılth and Wellbeir | ng Action Pla | ın 2014/15 | |
|---|---------|---|---|---|---------------|---|---|
| | O Wha | at Do We Want To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps |
| - | 1.3 | | Work with health visitors to improve year 1 immunisation targets | Commissioned by NHS England, provided by primary care | Green | Successful pilot in 2013/14 for year 1 immunisations. North & West Reading CCG achieved the 95% target. South Reading CCG achieved 94.5%; target missed in South Reading by 0.5%. | No further steps. |
| | | | | | | CCGs recommended to commissioner (NHS England) to work directly with the provider, Berkshire Healthcare Foundation Trust. | |
| - | upta | ake - Develop to increased ake of MMR | Scrutinise vaccine uptake results and provide leadership. Campaign - Primary Health/Children Centres/Health Visitors | Commissioned by Public Health England, provided by Berkshire Healthcare Foundation Trust and GP practices | Green | MMR catch up campaign in Reading successfully implemented between February and May 2014. | Immunization working group discussing next steps at Berkshire and Thames Valley level. |
| 6 | and | parenting support for all ily types. | Participate in the maternity working group and work jointly with the midwifery team. | | Green | 78% of referrals have accessed Children's centre provision as of Q1 of 2014/15. | Continue to monitor access of referrals. Set up materity services in South and East Reading Children's Centres programmes. |
| 2 | - acce | essibility of antenatal cation opportunities | Review and scope out existing provision of antenatal education from statutory and voluntary providers. Provide input and detail to commissioners (NHS England). | Early Help | Amber | Project has been planned up to implementation with appropriate support from Children's Centres, CCGs and BHFT. | Project management resource identification to start implementation. |
| 2 | 2.1 | | Educating new parents on appropriate use of A &E and how to manage common childhood ailments | Commissioned by CCGs, supported by Public Health, Children's Directorate | Green | Childhood illnesses booklet developed. See CCG website: http://www.nwreadingccg.nhs.uk/images/publica tions/Your-Health/NWR_Common_childhood-illnesses.pdf | Childhood illnesses booklet to be widely circulated. Roadshow with messages targeted at families and use of NHS services scheduled for October 2014. South Reading CCG to run a minor ailments clinic from November 2014 to April 2015 to manage A&E demand and educate families on appropriate |
| | Incre | ease access to good quality | Provide 15 hours free early education childcare to | Early Years & | Amber | 222 new places funded during the year to meet | use of NHS services. Grow supply towards 850 places through all types |
| 2 | 7. & af | ffordable childcare. | all two year olds meeting the free school meals criteria | Extended Schools | | actual demand from families. | of settings including schools. Activate broad market advertising as eligibility increases to 40% of families from 20%. |
| 2 | | rove quality of provision in ate, voluntary and ependent sector | | Early Years & Extended Schools | Green | National policy has removed this remit from local authorities, Focus is on OfSTED judgements only now. | Develop robust system to support those settings rated less than good and signpost of appropriate training and services to support excellence. |
| 2 | | vision of childcare for older dren aged five and over | Joint working - engagement with schools. | Early Years & Extended Schools | Green | 26 After school clubs run by schools. Reading Borough Council filling the gap with 3 more where market is not developing. | Push further into non established areas and help schools develop 8am-6pm services to support working families. |

8

| | Health and Wellbeing Action Plan 2014/15 O What Do We Want To Achieve What Will We Do Key delivery RAG Status Progress Update (Includes progress made in Next Steps Next S | | | | | | | | | |
|---------|--|---|--|--|------------|---|---|--|--|--|
| G oa | bj | | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | |
| 2 | To engage value of the commission budgets. | with single plan, joint iing, personal | Provide impartial support to parents seeking assessment for children with special educational needs or disabilities through the parent partnership service | SEN team | Green | Extremely busy Parent Partnership service has seen an increase in staffing to meet demand. | National changes will increase demand further. Department for Education three year funding to be used for further resources. | | | |
| 2 | 2.2 | | Influence decisions for the SEN panel for support children aged 0-5 with SEN | SEN team | Amber | Significant change in Special Education Needs world has required review of the whole system and the role of the panel. Local Offer and the new Education, Health and Care plan process are in place. | New system in place with more school to school moderation. Review of Action Plan planned including admission arrangements and the role of the SEN panel in those decisions. | | | |
| 2 | Reduce spe inequality | ech and language | Implement the language strategy and deliver supported projects | Early Years & Extended Schools | Amber | Core contract in place and service being used. Focus of Local Authority resources on other areas of Special Education Needs have meant few, additional projects underway. | SEN Action Plan review and a new contract basis for academic year 15/16 onwards. | | | |
| 2 | 2.2 | | Provide access to speech and language therapies within the Early Years settings | Early Years & Extended Schools | Green | Existing contract well utilised and providing services. | Continue to monitor and ensure quality of service delivered until end of contract period. | | | |
| 2 | 2.2 | | Improve access for BME groups to early speech and language intervention | Early Help, Adult Social Care | Amber | Existing contract for speech and language support to targeted children was extended, however, this was not specifically targeted at BME children. | No immediate plans for speech and language intervention targeted specifically at BME groups due to resource constraints. | | | |
| | breastfeedi Reading but | e prevalence of ing across all areas of t with a particular e low rate wards | Support the Unicef Baby Friendly Initiative to achieve UNICEF accreditation. Breastfeeding network commissioned to work with breastfeeding volunteers locally. | Public Health / Berkshire Healthcare Foundation Trust | Green | Baby Friendly Initiative (BFI) delivered in Berkshire and completed Level 3 UNICEF accreditation in October 2014. Breastfeeding Network delivering well evidenced outcomes. | Confirm future BFI funding arrangements and outcomes. | | | |
| 2 | 2.2 | | Continued implementation of the Breastfeeding Peer Support Project | Commissioned by NHS England, provided by BHFT, Public Health, Breastfeeding Network | Green | Successful implementation of the project, reporting to Public Health department shows good uptake. | Identify future funding arrangements to ensure the service can continue. | | | |
| 2 | 2.2 | | Promote breastfeeding in collaboration with key stakeholders | Commissioned by NHS England & and provided by BHFT | Green | Worked collaboratively with Berkshire Healthcare Foundation Trust to promote breastfeeding. | Continue to work with Berkshire Healthcare Foundation Trust to promote breastfeeding. Develop new ways of reaching the target population. | | | |
| | | | | | | | Awareness campaign scheduled for March 2015 to coincide with breastfeeding week. | | | |
| 2 | Improved 0 | oral Health in the <5s | Mid term evaluation of the Brushing for Life project. Continued Implementation of the Brushing for Life intervention | Public Health / BHFT | Green | Public Health continue to provide toothbrushes to children centres through Brushing for Life. | Complete Brushing for Life evaluation to access outcomes and value for money. | | | |
| 2 | | teenage pregnancies | Continued implementation of designated young people friendly drop-in clinics and promotion of the Young people's health website (JUICE). | Public Health | Green | JUICE points provision available across sites in Reading. JUICE points provision included within sexual health services specification. | Ensure new sexual health provision delivers effective young peoples services that are easy to access (JUICE). | | | |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | | |
|---|--|--|--|--|------------|--|---|--|--|--|
| _ | O What | t Do We Want To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | |
| c | healtl | th and wellbeing mation and support | Improve/develop use of technologies to get information to parents on H&WB information & support including Mental Health Issues | Early Help | Green | Bid in place to resource developing peri-natal support in Children's Centre. | Locate resource to implement bid. | | | |
| c | 2.2 | | Children's Centres as a 'hub' to access support to children & families (L 5 years) | Early Help, CCGs | Amber | Family and professional consultation completed. Ongoing discussion corporately about model to use consistently in Reading. | Finalise the model with corporate colleagues for wider discussion. | | | |
| c | of do | | Implement the IRIS project as a Pilot in 12 of the Reading practices (6 in each CCG). Higher referral rates to police & early help services. | Public Health, Berkshire Women's Aid | Amber | 11 Practices recruited to project, 13 expressions of interest. 10 practices receiving training each quarter. 9 Practices referring to the advocate educator. 22 referrals received. 2 referrals to MARAC from Primary care. Public Health funding secured to continue the pilot into year 2, agreed a full evaluation will be completed at pilot end. | Further Training for GPs, more practices to be recruited and pathways for referral developed. | | | |
| c | 2.3 | | Review Domestic Violence commissioning strategy | Housing, Neighbourhoods and Community Services | Green | Priorities agreed, draft strategy to be completed in Autumn, will then need to be approved for consultation. | Draft strategy to be completed and approved for consultation. Outcomes family choice project. | | | |
| c | scope Condi | e of the Long Term litions board to enhance improve LTC services and | Patient education programmes - talking health and web based. Moderated online network | Long Term Conditions programme board, CCG, Adult Social Care | Green | Diabetes website, talking health service for people with long term conditions and moderated online network (SHARON and Young Sharon programme) are all in place. | Develop website for respiratory diseases. Quality improvement project is also planned. | | | |
| c | 7.8. | | Chronic Fatigue Syndrome service - create a community CF/ ME Service | Long Term Conditions programme board, CCG, Adult Social Care | Green | An integrated Chronic Fatigue Syndrome service has been put in place with Berkshire Healthcare Foundation Trust. | Completed. | | | |
| c | 3.7 | | Diabetes Education, commission and implement structured patient education programmes for both Type 1 and Type 2 | Long Term Conditions programme board, CCG, Adult Social Care | Green | Programmes have been put in place. Monthly highlight reports are submitted to Long Term Conditions programme board. | Ongoing. | | | |
| c | 3.1 | | Epilepsy, establish an epilepsy nurse specialist post. Develop Website | Long Term Conditions programme board, CCG, Adult Social Care | Green | Epilepsy nurse specialist post has been established. | Further work in neurology, to include development of a strategy, headache review and parkinsons disease review. | | | |

| | Health and Wellbeing Action Plan 2014/15 O What Do We Want To Achieve What Will We Do | | | | | | | | | |
|---|--|---|---|--|------------|---|---|--|--|--|
| _ | O a bj | | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | |
| 2 | 3.1 | | Care home in reach services - Dementia | Long Term Conditions programme board, CCG, Adult Social Care | Green | Improvements to care of people with dementia have been delivered in 3 care homes in Reading by training care staff and working alongside them to model good practice. A dementia friendly garden has been constructed at The Willows Care Home in Reading. | Report on Dementia Service Development Across the West of Berkshire to be presented to the Health and Wellbeing Board in October 2014. Continue to work closely with care homes and support them in delivering improvements to care of people with dementia. | | | |
| 2 | 3.1 | | Older people's mental health | Long Term Conditions programme board, CCG, Adult Social Care | Amber | RBC Mental Health staff have been seconded to BHFT, Frail Elderly Care Pathway is being developed to support older people to remain well for longer, Enhanced Support to Care Homes has worked with a number of care homes on good practice modelling, the Discharge to Assess are being developed with a view to having operational to cover the winter. | Dedicated Mental Health Project Manager is now in place and is currently developing a benefit analysis of Mental Health Integration. | | | |
| c | 3.1 | treatment(s) and support in managing long term conditions | Offer preventive health checks in community locations to adults aged 40-74 who are at risk of developing vascular disease. Target specific groups better. | Public Health | Green | Community based NHS Health Check programme for 2013/14 completed. Offered in workplaces (RBC, local school), education (Reading Community Learning Centre) and at community group events. | Review community NHS Health Checks programme for 2014/15. Identify barriers to health checks and work collaboratively with partners to identify solutions. | | | |
| ٥ | | Co-Production with patient participation groups | For pathway & support | Adult Social Care | Green | Links established with patient participation groups, led by GP surgeries. | Ongoing. | | | |
| ٥ | 3.1 | Support the work of the Home Improvement Agency | Enable the ability for people to remain living in their own homes by reducing accidents in the home | Regulatory Services | Green | Through the provision of the Home Improvement Agency contract cicra 3,000 customers were assisted through grants, minor adaptations and handihelp services. | Ongoing. | | | |
| 2 | 3.2 | available | Deliver activity within the Learning Disability Plan - A Big Voice. 2014 end date. Refresh of Learning Disabilities plan ongoing | Adult Social Care | Amber | Consultation event has taken place regarding priorities for inclusion in the Learning Disability Big Plan. The Learning Disability Big Plan was signed off at the Partnership Board. | Develop a new Disability Strategy on the basis of the Learning Disability Big Plan. | | | |
| 0 | 3.2 | 0 0 | Support the Reading Learning Disability Partnership Board to engage with LTC projects | Adult Social Care | Amber | Plan is being developed to assess what role the Reading Learning Disability Partnership Board can play in achieving this. | Long term conditions projects to include impact on people with learning disabilities. Plans to be established to assess what role the Reading Learning Disability Partnership Board can play in achieving this. | | | |
| c | 3.2 | | Access to services for people with learning disabilities. Health & Social Care Joint Assessment | Adult Social Care | Amber | Joint Health & Social Care Assessment not yet established but a Workforce Development Workstream has been developed addressing issues across the West of Berkshire across key partners. | Join Health & Social Care assessment to be delivered as part of the Berkshire West Integration project. | | | |
| 0 | 3.2 | | LD Liaison Nurse in Royal Berkshire Foundation Trust | Adult Social Care | Green | The Liason nurse role continues to work well. The nurse is active in many health forums. | Ongoing. | | | |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | |
|----|--|---|---|--|------------|---|---|--|--|
| | O bj | | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | |
| 3 | 3.2 | | Learning Disabilities Health Checks | Adult Social Care | Amber | Health Passport was launched in spring 2014. | Strategies for increasing uptake are being developed by the Learning Disability Partnership Board in conjuction with the roll out of the Health Passport. | | |
| co | 3.2 | | Identify those who do not access services who we should target | Adult Social Care | Amber | Reading Services Guide has been developed to enable residents better access to information about services. | Develop Information and Advice Strategy that will increase awareness of services. | | |
| 3 | 3.3 | support provided for carers in | Review National Carers Strategy against local provision. Plan in plan & resource in place across West Berkshire. Now needs to be implemented. | Adult Social Care | Amber | National Carers Strategy review has been delayed, hence Berkshire West work delayed as well. A Carers Collaborative commissioning group comprising is in the process of scoping the development of joint Carers Strategy. | Identify resource to carry out local data analysis once the National Carers Strategy has been reviewed by Department for Health. | | |
| 3 | 3.3 | marginalised groups. | Deliver activity within the Reading Carers Action Plan. Including: Reading Carers Communication. Gaps identified. | Carers Steering Group, Adult Social Care | Green | Berkshire West Carers Information Advice and Support contract is in place with targets to reach hidden carers. | Monitor contract on a quarterly basis. Refresh the Reading Carers Information Pack every 6 months. | | |
| | 33 | | | | | Updated Reading Carers Information Pack has been published: http://www.reading.gov.uk/documents/27827/R eading-CIPfv14-May2014.pdf | Reading Carers Action Plan will be updated as part of the local update of National Carers Strategy | | |
| e | 3.3 | | Respite opportunities. Some respite available. Lack of capacity. Strict criteria needs to be met. | PDSN Network, Adult Social Care | Green | A range of carer breaks services have been commissioned from pooled health and social care budgets. | Review what has been commissioned and plan for recommissioning. Needs to be refreshed in line with Better Care Fund. | | |
| 3 | 3.3 | Service provision and needs are better matched. | Review future commissioning plans against the needs of carers | Carers Steering Group, Adult Social Care | Green | We have involved carers in the reference group for development of our market position statement. | Develop detailed commissioning strategies for the market position statement. | | |
| 3 | 3.3 | | Support for carers in a wider sense. E.g.; support at home etc. | Carers Steering Group, Adult Social Care | Green | Maintained the Carers Steering Group to seek and respond to feedback on the appropriateness of service provision. | Ongoing. | | |
| 33 | 3.3 | | Development of the sector to provide community capacity. | Adult Social Care | Green | Market development was supported within business and usual. | In 2014/15 the following two specific projects will be looking to increase capacity: Quality and Diversity of Services project and Information, Advice, Advocacy and Prevention project within the Care Act implementation programme. | | |
| 4 | 4.1 | Detect and take action against illegal tobacco suppliers | Implement/enhance the Berkshire-wide Tobacco Control Plan | Regulatory Services | Green | Intelligence led approach to taking enforcement action. On completion of the operation press release provided. | Ongoing. | | |
| 4 | 4.1 | Detect and take action against illegal alcohol consumption/supply | Identify areas where there is known underage drinking for targeted intelligence led enforcement response. | Regulatory Services | Green | Intelligence led through Community Alcohol Partnership and police. Test purchasing has been carried out with 1 fail. | Licensing review for the shop that failed test purchasing. | | |

| Health and Wellbeing Action Plan 2014/15 | | | | | | | |
|--|---|---------------------------|--|--|------------|---|--|
| _ | O What Do We Want | To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps |
| _ | Detect illegal and punsafe alcohol productobacco and NPS | | Intelligence led enforcement visits | Regulatory Services | Green | Carried out enforcement action on 6 premises with counterfiet alcohol products, 157 bottles were seized in total. | Prosecute one of the shops with counterfiet alcohol products, issue formal warnings to the other 5. Work with Home Office on research into NPS. Looking into what Trading Standards can do to |
| _ | Ensure businesses a with marketing req tobacco products in display bans and pl packaging. | quirements of ncluding | Intelligence led enforcement visits | Regulatory Services | Green | Carried out action to ensure businesses comply with display bans. | restrict the sale. Carry out action to confirm plain packaging is complied with, provided this comes into effect on national level. |
| - | Reduction in drug r deaths | | Establish notification pathways and family support mechanisms, and identify appropriate intervention, prevention and training activities. | DAAT, Adult Social Care | | A system has been put in place to collate information about all potential drug related deaths (DRDs) in Reading. This is an agreed procedure with the Coroner. Where the deceased was known to services a comprehensive report is collated and forwarded to the coroner asap for the inquest. DAAT collates updates and outcome DRD group was set up in Reading, with attendance from West Berkshire. This meeting was chaired by the Chair of Reading User Forum (RUF). | Enhanced harm reduction and relapse prevention measures have been written into service specification for our new provider who will commence 1st Oct 14. DAAT to manage performance. New provider is keen to work with the DAAT to roll out take home Naloxone training for service users and carers. Work on ensuring risk of overdose on prison release with new provider. DRD meeting Terms of Reference and membership to be reviewed as RUF Chair has now retired. Action plan to be refreshed. |
| | Reduction in drink related harm/injur | - | Run First Stop Bus in the Town Centre | Regulatory Services | Green | First Stop Bus is positioned in the Town Centre every Friday and Saturday night. Approximately 300 people have been treated so far. 80% required medical attention, of those 70% required an ambulance. A&E noticed reduction of alcohol related incidents. | Continue with the current service, expand to include day time uses such as health checks. Work with third parties including Reading University to develop further uses for the bus. |
| _ | 1.4 | | Better links with Reading University to build activity & capacity in these areas. | / Public Health | Green | Links with Reading University and Thames Valley University have been established. Volunteers have begun signing up for the First Stop Bus service. Currently discussing how volunteers could contribute to improving health in deprived communities. | Roll out a programme of activities. |
| _ | Reduce alcohol cor young people | | Introduce Community Alcohol Partnerships across Reading | Regulatory Services | Green | Maintained existing Community Alcohol Partnerships areas in Tilehurst and Cavensham. | Additional resource secured to roll out across Reading. |
| _ | Provide national ar information to smo Smoke free homes campaign | okers on a and cars | Provide information to smokers via doctors surgeries, pharmacies libraries and work place newsletters on smoke free homes and cars main messages | Regulatory Services, Tobacco Control Alliance Coordinator | Amber | Updated Tobacco Control plan and responded to consultation on smoking in cars. | Agree action plan and provide information to smokers in line with the action plan. |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | | |
|---|--|--|--|------------|--|---|--|--|--|--|
| | O What Do We Want To Achieve bj | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | | |
| | Secondary School pupils smoking and drinking habits | Survey as many 11-18 year olds in full time education in Reading on their smoking and drinking habits. | Regulatory Services, Tobacco Control Alliance Coordinator | Amber | No coordinator resource was available to carry out the survey in 2013/14. Survey has now been planned and is due to be carried out in 1 secondary school in October 2014. | Secure agreement with other secondary schools and carry out the survey | | | | |
| 4 | pupils in secondary schools-to provide stop smoking support to | Following smoking survey report, provide as required a peer mentoring programme for Reading Secondary schools. Provide mentor training and refresher training through the year | Regulatory Services, Tobacco Control Alliance Coordinator | Red | The survey is still being carried out, therefore peer mentoring has been delayed. | Peer monitoring to take place once the survey has been completed. | | | | |
| 4 | between Tobacco Control Alliance Partners | Share intelligence regarding illegal tobacco and non compliance of tobacco related legislation between Police, HMRC, Unitary Authority, Public Health and Royal Berkshire Fire and Rescue Service | Regulatory Services, Tobacco Control Alliance Coordinator | Green | Established links and a process to share intelligence with partners. | Intellingence to be shared on ongoing basis. | | | | |
| 4 | | Deliver a programme of personalised travel planning, incentives, fare discounts and concessionary fares, workplace challenges, cycle training, new infrastructure and reallocating road space | Transport Team, Environment, Culture and Sport | Green | on the draft Cycling Strategy, adopted as Council policy in March 2014: http://www.reading.gov.uk/council/strategies-plans-and-policies/TransportStrategy/Itp-3-substrategies/. Funding was secured through the Local Sustainable Transport Fund (LSTF) to deliver a project based around 'Active Neighbourhoods' and 'Interactive Online Networks'. The LSTF Outputs Report 2013/14 was submitted to the DfT. More | All areas of the LSTF programme continue to progress well, including the planned delivery of the pedestrian and cycle bridge, increasing the number of cycle parking facilities, the launch of ReadyBike, and the delivery of training and sessions supporting active travel. Additional revenue funding has been secured for the delivery of active travel measures in 2015/16. Ongoing promotion of active travel, including Freshers Fayre and UoR Green Week in the Autumn. The recruitment of a fixed term Walking Coordinator with the aim of promoting health walks. To continue progressing key infrastructure projects deliverd as part of the LSTF programme and the Local Transport Plan and supporting strategies. | | | | |
| 4 | 121 | Complete an evaluation to measure and review success. | Commissioned by CCG's, supported by Public Health | Green | Reading wide Beat the Street programme commssioned by CCGs and with support from Public Health and Transport. | Complete an evaluation of Beat the Street programme as delivered in May/June 2014. | | | | |
| 4 | Access to wider workforce, community, peer support role | Review Health Trainer Service and Activity | Public Health | Green | Review completed. Contract was not extended as outcomes were not as strong as expected. | Review service model and approach and agree next step with Berkshire-wide partners. | | | | |

| | Health and Wellbeing Action Plan 2014/15 | | | | | | | | | | |
|---|--|---|---|---|------------|--|--|--|--|--|--|
| _ | O a bj | What Do We Want To Achieve | What Will We Do | Key delivery partners | RAG Status | Progress Update (Includes progress made in 2013/14) | Next Steps | | | | |
| | 5 | Key pathways for risk factors e.g. diabetes, obesity, coronary heart disease etc. | Develop /renew pathways | Public Health | Green | Stakeholder event held In October 2014 to identify and share Best Practice for prevention diabetes to identify the current service provision and referral pathways. Analysis of options for renewing obesity treatment pathways. | are any gaps. Commission Eat 4 Health to provide additional service. Raise awareness of risk factors for diabetes through a Pharmacy based campaign. Berkshire-wide workshop to be held on treatment | | | | |
| - | 4.3 | | Promote good quality information and advice on nutrition through our childrens' centres | Early Help | Green | Range of provision and sessions available in Childrens' Centres to provide information and advice on nutrition | pathways for obesity. Understand impact. | | | | |
| - | 3 | | Provide family learning for cooking on a budget and healthy eating | New Directions, Environment, Culture and Sport | Green | The following corses were delivered: x3 'Lets Get Cooking' courses - Teaching Adults to cook Healthy meals x2 'Packed Lunches' courses - Healthy Lunches for children x3 Cooking at an Easy Pace - Teaching Adults to cook on a budget | | | | | |
| , | 4.3 | | Introduce Eat Well Get Well initiatives such as British Health Foundation Healthy hearts scheme to tackle obesity | Regulatory Services / Public Health | Amber | Applied for funding to enable delivery of Eat Well Get Well intiatives, however, no funding secured to date. | Explore further options for funding and continue to deliver other physical activity and healthy weight programmes, such as Let's Get Going, Beat the Street, Eat4Health, Walking Programmes, free swimming for children. | | | | |
| • | 1.3 | Reception Children and Year 6 children are weighed and measured each year. | Continued implementation of the National Child Measurement Programme | Public Health, BHFT | Amber | target, this is being addressed by matrix lead. | To continue running the National Child Measurement Programme in Reading schools. Plan to send out results letters to parents in 2014/15 school year as recommended by Public Health England. | | | | |
| , | | | Continued implementation of the Lets Get Going Project in 2 Reading Primary Schools (Katesgrove and Newtown) | Public Health Berkshire Youth - Lets Get Going Co- ordinator | Green | Let's Get Going (LGG) rolled out to a further 5 schools, identified due to their high levels of childhood obesity as identified through the National Child Measurement Programme. | LGG contract has been extended for one year with extended provision due to partnership work with John Madejski Academy feeder schools. Anticipated 10-12 courses to be run in 2014/15. | | | | |

| | | Health and Wellbeing Action Plan 2014/15 | | | | | | | | |
|---|-----------|---|---|--|-------|---|---|--|--|--|
| 0 | O a bj | What Do We Want To Achieve | | Key delivery partners | | Progress Update (Includes progress made in 2013/14) | Next Steps | | | |
| | 4.3 | and action plan for Reading (to include adults and children and | Scope out the existing services commissioned across Reading that translate as "assets" in a strategy and action plan to reduce obesity in adults and children in Reading and identify gaps and needs. | Public Health | Amber | Scoping event and activity completed, steering group set up. Draft strategy written and being edited prior to consultation. | Develop action plan to meet identified needs. Sign off Healthy Weight Strategy and work with partners to deliver, track and monitor activity. | | | |
| | 4.3 | Increase access and availability of specialist healthy lifestyle courses (exercise and nutrition) | Health Programme with the opportunity being | Public Health | Green | Eat 4 Health contract retendered across Berkshire West. | Work with new provider (Solutions for Health) to promote and monitor uptake of classes. Assess potential need for additional classes for pre diabetes patients. | | | |
| _ | 4.3 | Increase access to physical activity programmes | GAP Analysis & mapping | Public Health / Environment, Culture and Sport | Green | | Extend Let's Get Going offer to a further 5-7 schools (academic year 14/15). Recruit to Reading Walks Co-Ordinator Post (funding confirmed). | | | |
| , | 4.3 | · | Review operation of current scheme and investigate alternative options. | Environment, Culture and Sport | Amber | Commenced the scoping and assessing of alternative options. | Complete scoping and assessment of options. Prepare a paper for CMT in October 2014. | | | |