

To: Councillor Mpofu-Coles (Chair)
Councillors Lanzoni, Ballsdon,
Cresswell, Davies, Gittings, Griffith,
Keane, McEwan, McGoldrick, Naz,
Nikulina, O'Connell, DP Singh and
Woodward

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11 March 2025

Your contact is: Jemma Durkan - Committee Services

**NOTICE OF MEETING - ADULT SOCIAL CARE, CHILDREN'S SERVICES AND EDUCATION
COMMITTEE 19 MARCH 2025**

A meeting of the Adult Social Care, Children's Services and Education Committee will be held on
Wednesday, 19 March 2025 at 6.30 pm in the **Council Chambers, Civic Offices, Reading**.
The Agenda for the meeting is set out below.

AGENDA

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1. DECLARATIONS OF INTEREST

Councillors to declare any disclosable pecuniary interests they may have
in relation to the items for consideration.

2. DELEGATED DECISIONS

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3. MINUTES

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4. MINUTES OF OTHER BODIES

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5. PETITIONS

Petitions submitted pursuant to Standing Order 36 in relation to matters
falling within the Committee's Powers & Duties which have been
received by Head of Legal & Democratic Services no later than four clear
working days before the meeting.

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and assemble on the corner of Bridge Street and Fobney Street. You will be advised when it is safe to re-enter the
building.*

6. QUESTIONS FROM MEMBERS OF THE PUBLIC AND COUNCILLORS

Questions submitted pursuant to Standing Order 36 in relation to matters falling within the Committee's Powers & Duties which have been submitted in writing and received by the Head of Legal & Democratic Services no later than four clear working days before the meeting.

7. SUSPENSIONS AND EXCLUSIONS UPDATE 29 - 32

The Committee will receive an update on rates of suspensions and exclusions in Reading schools.

8. SEXUAL HEALTH SERVICES UPDATE 33 - 38

The Committee will receive an update on Sexual Health Services.

WEBCASTING NOTICE

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ACE	Min No.	Title	Delegated Decision
15.01.25	Item 35	Nursing Dementia Block Contract	<p>That the Executive Director of Communities and Adult Social Care be given delegated authority, in consultation with the Lead Councillor for Adult Social Care, to:</p> <ul style="list-style-type: none"> • Award the contracts to the successful provider(s) of four block bed contracts of five beds to run for five years with an option to extend for a further five years. The lifetime of the contract budget had been agreed at a maximum price of £10,061,613; • Negotiate, vary, extend and manage the contract(s) at the appropriate times throughout the lifecycle within the lifetime financial envelope stated and in accordance with the relevant Procurement Regulations and the contracts.

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ADULT SOCIAL CARE, CHILDREN'S SERVICES AND EDUCATION COMMITTEE MEETING MINUTES - 15 JANUARY 2025

Present: Councillor Mpofu-Coles (Chair);

Councillors Lanzoni (Vice-Chair), Ballsdon, Cresswell, Davies, Gittings, Griffith, Keane, McEwan, McGoldrick, Naz, Nikulina, O'Connell, DP Singh and Woodward

In attendance: Councillors McGoldrick and Nikulina

(Councillors McGoldrick and Nikulina were unable to attend in person, so attended remotely via Microsoft Teams, but did not vote on any of the items, in line with the requirements of the Local Government Act 1972)

26. MINUTES

The minutes of the meeting held on 16 October 2024 were confirmed as a correct record and signed by the Chair.

27. QUESTIONS FROM MEMBERS OF THE PUBLIC AND COUNCILLORS

One question on the following matter was submitted by Councillor Cresswell.

Question	Subject	Reply
Councillor Cresswell	Oral Health Strategy	Councillor McEwan

28. MENTAL HEALTH CHAMPIONS – ME2 CLUB

The Committee were joined by young people and representatives from the Me2 Club [Me2Club - Me2 Club](#) to provide information on the work of the club and how young people had been supported.

The members of the Me2 Club addressed the Committee and provided examples of their difficult experiences at school and outside of school. They explained how the club had helped them build confidence and supported them with their education and well-being. The young people explained that they helped the club with fundraising and the club provided social activities which helped young people come together and realise they were not alone in their experiences.

The Committee asked a number of questions and thanked the representatives from the Me2 Club for attending the meeting.

29. SUSPENSIONS AND EXCLUSIONS UPDATE

The Committee received an update on the current position regarding school exclusions and suspensions from school. The Brighter Futures for Children (BFfC) Not in Education, Employment, or Training (NEET) performance and data report was available at Appendix 1, and the Suspensions analysis – Key Lines of Enquiry was available at Appendix 2 to the report.

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The report explained that following the impact of the Covid-19 pandemic, there was national concern and national priority to re-engage children and young people in education and to ensure that all young people, including those most vulnerable, were securing positive destinations into adulthood through employment, education and training. The Committee were informed of two areas of priority performance improvements and consideration of further actions to support children and young people in Reading to thrive and succeed.

The Committee noted the key headlines from the analysis outlined in Appendix 1 which included:

- Persistent Disruptive Behaviour and Physical Abuse/Threat to Adult was the primary reason for SEND suspension. This could also be described or understood as distressed behaviour from children with SEND, and often with experience of trauma too (Reading had seen a greater rise of children looked after (CLA) with SEND than the national or South East picture, from 50.3% to 63.4%), who were struggling to cope in school and becoming significantly dysregulated.
- The majority of children (63%) were not receiving support before suspension.
- 18% of children in Reading had experienced 50% of the suspensions, enabling targeting of system support to schools on these children.
- The analysis showed how many children were known to Children's Social Care and to Youth Justice, which enabled the start to initiate pan-BFfC thinking and response and coordinate preventative activity.
- 20% of these children were eligible for Free School Meals and living in a wider context of poverty. Overall suspensions of students that were identified as being in receipt of Free School Meals had reduced by 14% at this point this academic year, when compared with 23/24.
- There was a potential disproportionate suspension of children with particular ethnic and cultural heritages, in line with the national picture, which required specific local action.

The report explained that suspension rates were a key area of concern in the local education system. Whilst permanent exclusions performance had improved over the previous four years and remained relatively stable, suspension rates had increased. Suspensions in some schools were concerning and impacted outcomes. As suspensions were actions taken by the Headteacher of the school, improvement required a partnership response with all school leaders. The Education Partnership Board has reducing suspensions as a key priority this academic year.

The report outlined that suspension rates had increased rapidly over the past three years throughout England. However, suspensions had increased by a slower rate in Reading. The permanent exclusion rate in England had grown just as rapidly over the past three years and the permanent exclusion rate in Reading had grown even faster albeit starting from a lower base. The availability, affordability, and quality of alternative provision had been identified by school leaders as a contributing factor, alongside the need to recruit and retain staff and secure community confidence in behaviour and safety.

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The Committee noted that systems to support risk assessment and risk prevention for children at risk of Suspension or not in receipt of full-time education (including bought back behaviour support offer) were being enhanced, with the Education Partnership Board being asked to endorse and promote a one-Reading approach to suspension reduction across all Reading schools, regardless of whether they were an academy or a Local Authority maintained school.

It was reported BFfC had been working closely with the Department for Education regarding the transfer of John Madejski Academy into Greenshaw Learning Trust, a new multi-academy trust. The Chief Executive of the trust would be invited to attend the next ACE meeting to discussion their work with BFfC, approach and ethos.

Following questions and discussion it was reported that schools were engaging in safeguarding and undertaking a multidisciplinary approach to focus on children that were not in school.

Following a discussion it was noted that a report on non-attendance had been requested at the last meeting and it was requested that this be provided at the next meeting. Also it was suggested that a Task and Finish Group be set up to help inform and support an action plan to tackle suspensions and exclusions in the area.

Resolved –

- (1) That the improved position regarding school exclusions and suspensions from schools be noted;**
- (2) That further actions being taken regarding suspensions from schools be noted;**
- (3) That the Chief Executives of priority Trusts be invited to attend the next meeting to share their plans to promote school inclusion and to reduce suspensions from schools be agreed;**
- (4) That a Task and Finish Group be set up to help inform/support an action plan to address suspensions and exclusions.**

30. SCHOOL PLACE PLANNING FOR CHILDREN WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITIES

The Committee received a report providing information on school place planning for children with Special Education Needs and Disabilities (SEND).

The report explained that the School Place Planning Strategy 2022-2027 that had been considered by the Committee in March 2024 (Minute 36 refers), set out how Brighter Futures for Children on behalf of Reading Borough Council delivered sufficient school places in the

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context of the Council's statutory duties, ensuring that school place delivery supported the achievement of the best outcomes for children in Reading.

The Strategy confirmed that there were more than sufficient primary school places, and with the delivery of the new secondary academy, River Academy from September 2024, sufficient secondary places, for the duration of the Strategy. The Strategy had been updated with the latest capacity and census data and was appended to the report.

The Strategy identified two key challenges for Reading:

- Addressing the budget and surplus place challenges in community primary schools. An increasing number of primary schools were facing challenges in balancing their budgets, and with no projected increase in primary age pupils, the spare capacity in the system created further potential budget risks for schools; and
- Meeting the rising challenge of sufficiency of specialist provision for children with Special Educational Needs and Disability (SEND) provision and the pressures on the Dedicated Schools Grant High Needs Block. The strategy set out in some detail the needs analysis and population projections which confirmed the need for a 180 place all through (primary and secondary) special school to meet current lack of sufficiency in special school provision in Reading.

The report explained that following a detailed options appraisal, which had included considerations of whether school closures were required, a preferred option of expansion and split site relocation of Holy Brook school to the site of Whitley Park School and Ridgeway Primary School was recommended, in order to:

- i) address the immediate risks and pressures associated with the insufficiency of Special Educational school places in Reading, whilst also;
- ii) minimising disruption to school staff and pupils; and
- iii) improving the range and number of school places available in suitable provision for Reading's children with Special Educational Needs and Disability (SEND).

There would be extensive informal pre-statutory consultation and formal statutory consultation taken for any significant change to school organisation. Dedicated engagement sessions would be held with, the parents of current pupils impacted by any proposed change, Reading Families Forum and Special United, Reading's forum for children and young people with Special Educational Needs and Disability.

Officers thanked the ACE Task and Finish Group for their input on the options being considered for the development of a new special school.

Resolved –

- (1) That the options appraisal process undertaken and the proposal to develop split site special school provision as the preferred option for a**

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new 180 – place special school provision as presented to the ACE Committee Task and Finish Group be noted.

(2) That public consultation on two proposals set out in the associated report as the first stages of the plan to develop split site special school provision be agreed:

- a. To consult on the Federation of Holybrook Primary School and Whitley Park Primary School**
- b. To consult on the location of Holybrook Primary School, to expand from the current site to also include areas of Whitley Park School site and Ridgeway Primary school site.**

31. INEQUALITIES IN MATERNITY SERVICES

The Committee received a presentation from Christine Harding, Director of Midwifery, Royal Berkshire Hospital, on work being undertaken to address inequalities in maternity care.

The Committee were provided with the following information:

- The Royal Berkshire NHS Foundation Trust was the main provider of maternity services for the population of Reading, Newbury, Wokingham and the towns and villages of west Berkshire.
- 5800 bookings per year for maternity care and 4600 births.
- On a typical day 13 babies were born across three different settings.
- There was more awareness around birth inequalities following publication of confidential inquiries for families from the global majority and high deprivation.
- A clinical dashboard was being redeveloped to collect data to help understand the population and outcomes relating to certain recognised protected characteristics and to support service improvement.
- Engagement work was being undertaken with groups such as Enthusiastic Maternity and Neonatal Voices Partnership.
- Maternity services were promoted during Black History Month and to help build relationships.
- Community Engagement leads had been appointed.
- A new provider for translation services had been piloted to give instant access to a face to face interpreter via video call on an I-pad which could be wheeled into any clinical environment.
- Access to services were being improved for appointments and working with black women to help improve health outcomes.
- A Neuro Diverse Pathway was being developed to support patients with the development of an education tool kit 'grab bag' for midwives to give 1 to 1 sessions. The project would be developed across Berkshire, Oxfordshire and Buckinghamshire.
- A Continuity of Care Team provided antenatal, labour and postnatal care for women in areas of high deprivation. Evidence had shown this had an impact on the reduction of perinatal mortality.

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- A series of pregnancy after loss care pathways had been introduced to ensure that women received the best possible care in pregnancies after a loss.

The Committee discussed the report and presentation and thanked Christine for the information.

The Chair requested that a more detailed report be provided to the Committee in 12 months with specific data regarding the Global Majority women (BAME) and further information regarding the translation services.

Resolved – That a further report be submitted to the Committee in 12 months to include data specific to the Reading area.

32. SCHOOL ADMISSION ARRANGEMENTS 2026 - 2027

The Committee received a report to determine the school admission arrangements for 2026/2027 as follows:

- The admissions arrangements for Community Primary Schools in Reading for the school year 2026/27.
- The coordinated scheme for primary and junior schools for the 2026/27 school year.
- The coordinated scheme for secondary schools for the 2026/27 school year.
- The Relevant Area for 2026.
- Maps of the Primary catchment areas

Copies of the schemes, policies and relevant area were appended to the report at Annexes A, B C, D and E.

Resolved – That the School Admissions Arrangements 2026-2027 be agreed.

33. CHILDREN'S SOCIAL CARE ANNUAL COMPLAINTS REPORT

The Committee received a report providing an overview of complaints, compliments, Subject Access Requests (SARs) activity and performance for Children's Social Care Social Care for the period from 1 April 2023 to 31 March 2024. Nayana George, Information Rights Services Manager, provided an overview to the Committee.

The report stated that over the period from 1 April 2023 to 31 March 2024 the service had received 75 statutory complaints, which was an decrease of 2 (2.6%) against the 77 received in 2022/23. To give context, in 2023/24, 3,003 children in total were referred into children's social care, so the number of statutory complaints represents 2.5%. These referrals were regarding a mix of both new and existing children and young people. This compared to 2,843 referrals and 2.7% for 2022/23. Of the 75 complaints received 17 (13.0%) were resolved through alternative dispute resolution (ADR) by the social care teams. The remaining 58 (87.0%) had progressed to a formal investigation, although one of these was subsequently withdrawn by the complainant once the investigation had commenced and 57 were

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investigated to outcome. The top complaint themes were quality of service provided or received, staff conduct and communication.

During the reporting period, 10 complaints progressed to a Stage 2 investigation. Some of these related to Stage 1 complaints received in this reporting year, and some to Stage 1 complaints that had been received in the previous reporting year (2022/23). There were also four cases that were reviewed by a Stage 3 review panel.

It was noted that both the Customer Relations Team, on Brighter Futures for Children's (BFfC) behalf, and BFfC's Communications & Compliance and HR/Training teams had continued to raise awareness of the complaints process with both staff and the public.

Between 1 April 2023 and 31 March 2024, the Local Government & Social Care Ombudsman (LG&SCO) had received eight representations from dissatisfied service users for issues relating to BFfC. This was an decrease of 15 from the previous year. Of the eight cases, the LGSCO assessed all eight and investigated two. One was upheld the other was awaiting a final outcome. In respect of the one case upheld, the LGSCO asked the Council/BFfC to apologise, provide financial redress and improve the information about advocacy providers on the website. Of the remaining six cases, two were deemed premature and investigated by BFfC, the remaining four were all assessed but not investigated as they were either, not within the LGSCO's jurisdiction to investigate or closed after initial enquiry/assessment. There were no formal public reports issued in 2023/24.

During the same period a total of 50 compliments had been received.

The Customer Relations Team had processed all SARs requests for BFfC. These were open and closed children's social care cases (historical cases where paper and microfiche files were held at the records centre) and Special Education Needs and/or Disabilities (SEND) cases.

In 2023/24, the Customer Relations Team had received 75 requests for records, 16 more than the 59 requests received in 2022/23 relating to BFfC. Of the 75 requests received 71 requests were completed. The remaining four cases were waiting to be processed as at the end of March 2024, this number would have altered by the time the report was presented at ACE.

The main reasons for the backlog were restrictions posed by the pandemic, move of paper records from Dawin Close to Bennet Road with restricted access and lack of resources to redact files. In all cases the Customer Relations Team and the Information Governance Team had kept in regular contact with requestors to ensure they were kept up to date on the progress of their requests. Extra BFfC resource had been deployed to help the Customer Relations Team clear backlogs, and the Council had purchased new software for the redaction work.

Resolved –

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- (1) That the contents of the report and intended actions to further improve service delivery and the management of representations, particularly complaints, in children's services in Reading be noted;**
- (2) That the continuing work to raise awareness of all conflict resolution processes, including the statutory complaints process and encourage appropriate use by children, young people and their families be noted.**

34. ADULT SOCIAL CARE ANNUAL COMPLAINTS REPORT

The Committee received a report providing an overview of complaints and compliments activity and performance for Adult Social Care for the period from 1 April 2023 to 31 March 2024. A summary of Adult Social Care Complaints and Compliments 2023/24 was attached to the report at Appendix A. Nayana George, Information Rights Services Manager, provided an overview to the Committee.

The report stated that over the period from 1 April 2023 to 31 March 2024 the service had received seven corporate complaints, which was a 30% significant decrease compared to the 10 that had been received in 2022/23, and 50 statutory complaints, which was a 55.1% decrease compared to the 89 that had been received in 2022/23. There were no requests for a corporate Stage 2 investigation during this period.

The main themes for the period 2023/24 for both corporate and statutory complaints were:

- Quality of Service Provided
- Staff Conduct
- Financial

Between 1 April 2023 and 31 March 2024, the Local Government & Social Care Ombudsman had received two representations from dissatisfied service users for issues relating to Adult Care & Health Services, which was three less than the previous year. Of these two cases, one was about the Council's financial assessment and the customer's assessed contribution which the LGSCO had investigated, the outcome was no fault found, the remaining one was about adult social care provided at home which was deemed premature and investigated at the LGSCO's request by the Council. The Council shared the findings with the LGSCO who closed the case without further investigation.

In the year 2023/24 12 compliments were received in comparison to the previous year when six were recorded.

Resolved –

- (1) That the contents of the report be noted;**
- (2) That the action taken in response to learning from complaints, as described in the summary at Appendix A to the report, be noted.**

35. NURSING DEMENTIA BLOCK BED CONTRACT

The Committee received a report to consider Nursing Dementia Block Bed Contracts to secure future provision for Reading residents.

The report explained that ACE Committee on 22 October 2020 (Minute 2 refers) had authorised Adult Social Care commissioning to offer and manage new block contracts of up to 15 beds each to total 30 beds (for 01/10/2021), each contract would be for the term of two years with the option to extend for up to a further four years. One of the nursing dementia block contracts (of 15 beds) was terminated by the provider in September 2023, more than halving the Council's secured provision. A Needs Analysis had been completed in 2024 to determine the provision, needs and options within the Borough and determined the need to replace the terminated contract with four contracts of five beds each totalling 20 block beds over a 10-year contract.

It was reported that the South of England was currently experiencing capacity issues in the market for nursing dementia beds resulting in hospital discharge delays and causing an increase in the fees paid for such placements. Reading Council therefore must ensure that provision was available to meet the Council's needs. The report outlined the need and demand in Reading for service users requiring nursing dementia care.

Commissioning officers were preparing a tender for the Council to secure future provision for Reading residents and reduce the overall cost of placements for the Council. The report outlined options considered and recommended that the Council commission four block bed contracts of five beds under a capped tender price of £1,009 per bed per week. The contracts would run for five years with an option to extend for a further five years with the full lifetime of the contract at a maximum price of £10,061,613 and cost avoidance of £2,074,148.

Resolved –

- (1) That the Executive Director of Communities and Adult Social Care be given delegated authority, in consultation with the Lead Councillor for Adult Social Care, to:**
 - **Award the contracts to the successful provider(s) of four block bed contracts of five beds to run for five years with an option to extend for a further five years. The lifetime of the contract budget had been agreed at a maximum price of £10,061,613;**
 - **Negotiate, vary, extend and manage the contract(s) at the appropriate times throughout the lifecycle within the lifetime financial envelope stated and in accordance with the relevant Procurement Regulations and the contracts.**

36. YOUTH JUSTICE SERVICE INSPECTION

The Committee received a report on the Youth Justice Service inspection undertaken by His Majesty's Inspectorate of Probation (HMIP) between 9 and 13 September 2024. The

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inspection had focused on four domains; 1 - Governance and Leadership, 2 - Post Court Work, 3 - Pre-Court Work and 4 - Resettlement.

The report explained that HMIP had published their inspection report on 3 December 2024. Overall, the service was rated as Inadequate, with four sub ratings provided for domains 1 – 3. Domain 4 was not rated as there were no resettlement cases to inspect.

The report made the following eight recommendations:

- The Reading Youth Justice Service manager should:
 - ensure that quality assurance arrangements, oversight of practice, and supervision arrangements consistently supported staff and volunteer development.
 - ensure that assessing activity always considered how best to achieve safety for the child and the community.
 - ensure that planning activity was comprehensive and that it aligned effectively with activity undertaken by other services, including the consideration of appropriate contingency arrangements.
 - ensure that staff consistently liaised with all relevant services when delivering interventions.
 - ensure that commensurate focus was given to the needs of victims.
- The Reading Youth Justice Management Board should:
 - ensure that the YJS was both sufficiently resourced and structured to facilitate the delivery of high-quality interventions for children and the victims of crime
 - assure itself that the disproportionality action plan was being used effectively across the partnership to enhance equality, diversity, inclusion and belonging (EDIB)
 - work together to ensure that children had access to, and could engage with, high-quality, aspirational education, training and employment opportunities.

The report explained that a detailed and robust improvement plan had been created and endorsed by the Reading Youth Justice Management Board and submitted to HMIP by 20 December 2024. The plan set out in detail how the service and partnership would meet the recommendations and address the findings. Following the inspection, the service had undertaken a full review of all open cases to provide assurance that case work met a minimum level of safety for both children and victims.

The Committee discussed the report and it was noted that all staff posts had been filled and offered. The HMIP had not given an indication of when the next inspection would take place however, the service would be given time to improve before the next inspection.

The officers were thanked for their hard work and report. The Committee requested that an update on the improvement plan be provided in six months.

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Resolved – That the contents of the Youth Justice Service HMIP inspection report be noted and the Youth Justice Service Improvement Plan be endorsed.

(The meeting closed at 9.35 pm)

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Present:

Councillor Ruth McEwan (Chair)	Lead Councillor for Education and Public Health, Reading Borough Council (RBC)
Andy Ciecierski	Clinical Director for Caversham Primary Care Network
Rachael Corser	Chief Nursing Officer, BOB ICB
Councillor Paul Gittings	Lead Councillor for Adult Social Care, RBC
Councillor Wendy Griffith	Lead Councillor for Children, RBC
Alice Kunjappy-Clifton	Lead Officer, Healthwatch Reading
Gail Muirhead	Prevention Manager, Royal Berkshire Fire & Rescue Service (RBFRS)
Matt Pearce	Director of Public Health for Reading and West Berkshire
Katie Prichard-Thomas	Chief Nursing Officer, RBFT
Rachel Spencer	Chief Executive, Reading Voluntary Action
Councillor Liz Terry	Leader of the Council, RBC

Also in attendance:

Jamie Evans	Area Director, Healthwatch Reading, Healthwatch West Berkshire & Healthwatch Wokingham Borough
Lara Fromings	Assistant Director for Transformation, Commissioning and Performance, RBC
Tariq Gomma	Engagement Officer, Healthwatch Reading
Mary Maimo	Public Health & Wellbeing Manager, RBC
George Mathew	Inequalities Lead, Alliance for Cohesion and Racial Equality (ACRE)
Bev Nicholson	Integration Programme Manager, RBC
Dayna White	Neighbourhoods and Partnerships Manager, RBC

Apologies:

Steve Leonard	West Hub Group Manager, Royal Berkshire Fire & Rescue Service (RBFRS)
Caroline Lynch	Trust Secretary, Royal Berkshire NHS Foundation Trust (RBFT)
Councillor Alice Mpofu-Coles	Chair of the Adult Social Care, Children's Services and Education Committee, RBC
Lara Patel	Executive Director of Children's Services, Brighter Futures for Children (BFfC)
Melissa Wise	Executive Director – Community & Adult Social Care Services, RBC
Martin White	Consultant in Public Health, RBC

15. MINUTES

The Minutes of the meeting held on 12 July 2024 were confirmed as a correct record and signed by the Chair.

16. HEALTH AND WELLBEING STRATEGY QUARTERLY IMPLEMENTATION PLAN NARRATIVE AND DASHBOARD REPORT

Mary Maimo presented a report and gave a presentation which gave an overview of the implementation of the Berkshire West Health and Wellbeing Strategy 2021-2030 in Reading and provided detailed information on performance and progress towards achieving the local goals and actions set out in both the overarching strategy and in the locally agreed implementation plans.

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The Health and Wellbeing Implementation Plans and Dashboard Update was attached at Appendix A and contained detailed narrative updates on the actions agreed for each of the implementation plans and included the most recent update of key information in each of the following five priority areas:

- Priority 1 - Reduce the differences in health between different groups of people;
- Priority 2 - Support individuals at high risk of bad health outcomes to live healthy lives.
- Priority 3 - Help families and children in early years;
- Priority 4 - Promote good mental health and wellbeing for all children and young people;
- Priority 5 - Promote good mental health and wellbeing for all adults.

The report set out details of updates to the data and performance indicators which had been included in the Health and Wellbeing Dashboard since the last report.

Resolved – That the report be noted.

17. INTEGRATION PROGRAMME UPDATE

Bev Nicholson submitted a report and gave a presentation giving an update on the Integration Programme and the performance of Reading against the national Better Care Fund (BCF) targets for April to June 2024 (Quarter 1) and outlining the spend against the BCF plan, including the Adult Social Care (ASC) Discharge Fund to support hospital discharges in 2024/25.

The BCF metrics had been agreed with system partners during the BCF Planning process. Outcomes, recorded at the end of June 2024 (Quarter 1), were:

- The number of avoidable admissions (unplanned hospitalisation for chronic ambulatory care) (Not Met)
- The number of emergency hospital admissions due to falls in people aged 65 and over, per 100,000 population (Met)
- An increase in the proportion of people discharged home using data on discharge to their usual place of residence (Met)
- The number of older adults whose long-term care needs were met by admission to residential or nursing care per 100,000 population (Not Met)

Further details against each of the targets were set out in the report which demonstrated the effectiveness of the collaborative work with system partners.

The report also covered the Better Care Fund Quarter 1 return for 2024/25, attached at Appendix 1. The Quarter 1 return had been signed off through the delegated authority process in advance of submission by 29 August 2024. One of the National Conditions to be met was that the Council and the Integrated Care Board should have agreed the Section 75 Framework Agreement with the Integrated Care Board, for pooled funding, covering the period 2024/25. The Agreement was still in the process of being reviewed, with a view to signing and sealing by 29 October 2024, in order to remain compliant with the National BCF Conditions.

Resolved –

- (1) That the Quarter 1 (2024/25) BCF Return be noted;

- (2) That it be noted that the Quarter 1 (2024/25) BCF Return had been formally signed off and submitted by the deadline of 29 August 2024;
- (3) That it be noted that the Section 75 Framework Agreement for 2024/25 was in the process of being agreed between the Council and the Integrated Care Board to be signed and sealed by 29 October 2024, ahead of the Q2 BCF return, to remain compliant with the BCF National Conditions.

18. GP ACCESS PROJECT – NEW WAYS OF WORKING – HEALTHWATCH REPORT

Further to Minute 20 of the meeting held on 6 October 2023, Alice Kunjappy-Clifton submitted a report by Healthwatch in Berkshire West presenting the results of a project to get local views of the new ways of working introduced at GP practices and the impact on accessing GP-led services. The Reading-specific data from the project was also presented in a separate report.

The report explained that, following the introduction of new ways of working at GP practices, Healthwatch had heard that people registered with local GPs were not aware of the new ways of working and their expectations did not match what they might experience when contacting their practice or seeking help. Healthwatch Reading, Healthwatch West Berkshire and Healthwatch Wokingham Borough had therefore joined together for a collaborative project to raise awareness of the new ways of working and explore public understanding of them, in order to support GP surgeries to improve communication with the public, make efficient use of pathways, increase appropriate access to services and reduce complaints.

The report explained the new ways of working, which included: cloud telephony; care navigation/triage and involvement of other professionals; digital services and consultation alternatives. It stated that Healthwatch had conducted an online survey and focus groups and a total of 555 people had participated in the project across Berkshire West (total in Reading 185), 205 through focus groups (58 in Reading) and 350 through the survey (127 in Reading). The report gave details of the demographic data of respondents in Reading.

The report set out the results of the survey, covering the following areas, and setting out recommendations for each section, as well as giving examples through individual stories and quotes:

Accessing GP services

- how people accessed GP services
- difficulties accessing services
- the impact of the cost of living
- the impact of increased use of technology
- what went well with appointments

Care Navigation/Triage

- Raising awareness, including the production of a simple infographic
- Triage concerns, including trust, privacy, difficulties, efficiency and other issues

The NHS App

- Awareness and usage

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- Issues and concerns, including problems downloading/setting up, appointment booking, complex/confusing/difficult to use, limited functionality

Communication

- Inclusivity
- Listening to messages
- Consultation methods
- Communication methods
- Publicising information

The report had appended responses from the Head of Primary Care Operations at BOB ICB and the Strategy and Partnerships Lead at Brookside Group Practice.

Alice Kunjappy-Clifton explained that, since the new ways of working had been introduced in 2022, the services available for access to GP-led services varied greatly, and good communication of a consistent message was key, not just by the NHS but also with the Council, partners and community organisations. So far, since completion of the report, the feedback being received from the public was that things had not improved.

Rachael Corser referred to the response in the report from the BOB ICB and explained that the report would help inform some of the improvements planned in the recently launched Primary Care Strategy and that the report would be taken through the ICB's Quality Committee.

Andy Ciecierski acknowledged the issues raised in the report and explained that there was no NHS England mandate for all GP practices to provide a uniform system and there was also poor national messaging about the changes. It would be important for practices to work with patients and stakeholders across the health system to look at how to utilise the technology and systems available to the best effect, and this was a national challenge for General Practice. He said that there were useful messages within the report to take away and work on with colleagues and Patient Participation Groups to get messages out in as clear and consistent a way as possible.

Resolved – That the report be noted.

19. HEALTHWATCH READING – KEY ACTIVITIES UPDATE

Alice Kunjappy-Clifton submitted an update on key activities being carried out and planned by Healthwatch Reading, including:

- GP Access Project
- Talking Together: NHS Billing Errors Event
- Thinking Together: Interpreters Services Event
- Review of Healthwatch Reading Workplan
- Update on the Women's Hub project in Berkshire West and the impact for Reading.

Resolved –

- (1) That the report be noted;
- (2) That a report giving an update on the Women's Hub project be brought to a future meeting.

20. READING URGENT CARE CENTRE PILOT EVALUATION SUMMARY

Rachael Corser submitted a report giving a high-level summary of the evaluation of the Urgent Care Centre (UCC) pilot, which had been commissioned by the BOB ICB, located at Broad Street Mall and operational from 5 December 2022. The report gave an update on the service activity and the emerging conclusions from the pilot to inform future commissioning intentions.

The report stated that demand across NHS urgent care services had consistently increased in recent years, resulting in significant pressure on the local system, particularly in emergency and primary care. Several actions had been taken across the BOB area to ease pressures over the winter of 2021/22, including commissioning additional capacity in primary care and trialling primary care overflow hubs with the ability to divert patients from the Royal Berkshire NHS Foundation Trust Emergency Department (ED). However, these initiatives, although helpful for a small number of patients, had not had a significant impact on levels of ED demand related to minor illness presentations.

Subsequently, BOB ICB had agreed in July 2022 to pilot a primary care-led UCC until the end of March 2024 that allowed appropriate Berkshire West and non-Berkshire West patients to be diverted from the ED, provided additional appointments for GP practices when reaching capacity and allowed patients to self-present to the service. A procurement process had been undertaken through which HCRG Care Services Ltd had been identified as the preferred provider.

The UCC had opened on 5 December 2022 and HCRG had been contracted to provide the service until March 2024. The contract had subsequently been extended until March 2025 to enable the procurement of a further pilot, responding to and incorporating the findings of the evaluation.

The report gave details of the evaluation, setting out details of activity, capacity, impact on the ED and patient attendance. It stated that the UCC had been commissioned on a pilot basis and, although not delivering all of the intended benefits, the data had shown that a primary care-orientated service had been used by a large number of patients.

The conclusions drawn had noted the following points:

- A significant majority of practices with the highest utilisation of registered patients were within central and south Reading which suggested a Reading location would best meet need.
- The highest Did Not Attend rates reported had been for those patients booked in by the RBH ED which would indicate the redirection of patients was not having the desired impact on ED demand. A model of co-location at the RBH would both improve the volume of attendances from ED patients while also increasing the possibility of reaching 100% utilisation and meet the need from those registered with central and south Reading practices.
- It was likely that the large number of patients accessing the service who were registered outside of BOB ICS would reduce if the service was co-located on the RBH site. While a balance should be sought, a number of those patients accessed this service for ease and alternative models of same day access were available within their host localities. It was important that the needs of the Reading population were met.
- Co-location at the RBH would better support access outside of the shopping mall's core hours.

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- BOB ICB's position following the analysis of the pilot, allied with a commitment to improving access to emergency and primary care health services for the local population, was to progress the work under way to commission a service that responded to the evaluation outcome and delivered an improved offer to patients to be co-located at the RBH site.

Members of the Board discussed the report and the points made included:

- How was it known that the presence of the UCC did not reduce ED attendances if it was only those who did not go to the UCC from their referral by the ED that were monitored? Surely those who did go to the UCC without having been referred might have ended up in ED if the UCC had not been there, in which case that might have reduced the pressure?
- Out of the 2,500 attendees from outside the BOB area, how many of these overlapped with the unregistered patients? Had they been asked if they worked in Reading, as these might have been people who worked in Reading town centre even if they lived elsewhere, and easy access to a GP near their work was a useful benefit of the UCC, assisting both their health and Reading's economy.
- These other benefits of the UCC being in the town centre, including as a walk-in GP clinic, may have proved its worth for some patients and undermined the logic of the proposal to co-locate. It would be important to monitor patients who were attending the ED and/or the UCC because they were unable to get on a GP list.
- It was noted that 1,300 unregistered patients had attended the UCC and it was queried what was in place to support those patients to register or what would be in place in the new UCC.
- Rachael Corser said that national evidence was that co-locating a UCC with a main ED had more impact on reducing ED attendances. She said that she would see if more information could be obtained on the detail of attendees from out of the BOB area and on unregistered attendees - who they were and how they were supported - as well as ensuring that it was clear in the next evaluation about the intention of the UCC (about moving some of the non-emergency care but urgent care needs of the population) and looking separately at gaps/unmet need in primary care access.
- Katie Prichard-Thomas noted that if people referred by the ED to the UCC did not then attend the off-site UCC, this could also cause re-attendance at ED at a later date. She also noted that co-location could stream off 70-90 patients every day out of the ED and travel from the RBH off-site to the UCC could be negative for patient experience and safety. She said that she thought the decision to co-locate was the right one and noted that a pilot had started the previous week.
- Alice Kunjappy-Clifton said that the terminology itself was confusing to people outside the NHS. It was not clear to the public what the difference was between urgent and emergency care, so this needed to be clearly set out for the public in communications. Rachael Corser said that RBFT could work with Healthwatch on how to promote the use of emergency and urgent care appropriately.
- Co-location on one site would be helpful if you needed referral between the two, especially because of problems with parking.

Resolved –

- (1) That the report be noted;

- (2) That Rachael Corser find out further information as set out above and give an update on this, and on progress with the UCC, to the next meeting.

21. DIRECTOR OF PUBLIC HEALTH'S ANNUAL REPORT 2024

Matt Pearce submitted the Director of Public Health's Annual Report on the health of the local population for 2024.

The report explained that Directors of Public Health had a statutory requirement to write an annual report describing the health of the population, which was evidence-based and a way of informing local people about the health of their community. It was underpinned by the Joint Strategic Needs Assessment for Reading and set direction for the local public health system. It would inform decision makers in local healthcare services, partner agencies, voluntary partners and communities to take preventative action that would prevent health inequalities and protect and improve health.

The 2024 Annual Report was the first standalone Reading Borough Council report for many years and set out the ambitions of the Council's public health team and outlined how they would work to improve the health and wellbeing of the local population and reduce health inequalities over the coming year.

The Annual Report also outlined the current position of public health in Reading and described the work carried out in the context of the three main domains of public health – health protection, health improvement and healthcare. It also explained that the Council had established a Public Health Board, which would oversee how the public health grant (from the Office of Health Improvement and Disparities) was invested and provide guidance and direction to the Council and its associated bodies.

The strategic priorities set out in the 2024 Annual Report formed the basis of the Public Health Team's service plan, their collaborative work with other Council directorates and influence with wider system partners over the coming year. However, these could not be set in stone as they might need to change and evolve in response to threats to health and the changing needs of the population, changes in national policy and local priorities.

Resolved – That the report be noted.

22. REVIEW OF THE READING HEALTH AND WELLBEING BOARD

Matt Pearce submitted a report proposing a review of the Health and Wellbeing Board's governance arrangements and working practices to increase its overall effectiveness in improving the health and wellbeing of the local population and reducing health inequalities. A draft brief for the review had been prepared and was attached at Appendix A, which included current strengths, drivers for change and next steps, including the following initial key lines of enquiry:

- How can we strengthen the role of the Health and Wellbeing Board so that it can oversee improvements to population health?
- How can we ensure that all system partners and stakeholders have a shared understanding of the purpose of the Health and Wellbeing Board, the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy and to what extent do they currently believe this is being fulfilled?

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- What does effective governance and accountability look like for the Health and Wellbeing Board and how should it operate/link across the different geographical footprints, eg neighbourhood, place and system?
- Provide clarity on the role and status of the Health and Wellbeing Board within the current committee system and its interface with other committees eg the Adult Social Care, Children's Services and Education Committee, which is the Council's Health Overview & Scrutiny Committee.

The report explained that Health and Wellbeing Boards were a formal statutory committee of the local authority, and provided a forum where political, clinical, professional and community leaders from across the health and care system could come together to improve the health and wellbeing of their local population and reduce health inequalities. They had been in place since 2013 and were a single point of continuity in a constantly shifting health and care landscape.

The last few years had been a time of significant and complex change, with the Health and Care Act 2022 introducing major reforms to the NHS landscape, including the formation of Integrated Care Systems, and a greater focus on 'place' level activity. Health and Wellbeing Boards needed to evolve and adapt to operate within this new context.

With the appointment of a new substantive Director of Public Health for Reading and West Berkshire, this provided a timely opportunity to review the governance arrangements of the Health and Wellbeing Board to strengthen its role in the new system architecture and operate effectively.

The Local Government Association had been approached and had confirmed that they would be able to support a review within the 2024/25 financial year. It was therefore proposed to undertake reviews of the Reading and West Berkshire Health and Wellbeing Boards in tandem. This would allow for synergies and opportunities for joint working at the Berkshire West Place level to be identified. It was proposed that the review be carried out towards the end of 2024.

Members of the Board suggested that the review should include looking at how to encourage more participation and involvement from members of the public in the Board.

Resolved –

- (1) That the carrying out of a review of the Health and Wellbeing Board, facilitated by the Local Government Association, be approved, in line with the brief set out in Appendix A, and also to include looking at public participation and involvement in the Board;
- (2) That members of the Board participate actively in the review.

23. COMMUNITY HEALTH CHAMPIONS PROGRAMME UPDATE

Dayna White submitted a report and gave a presentation giving an update on the Community Health Champions (CHCs) programme and the progress being made towards the programme goals since the last update report to the Board on 15 March 2024 (Minute 45 refers).

The report explained that the Community Health Champions project was a partnership project, delivered by the Public Health and Wellbeing team, the Alliance for Cohesion and

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Racial Equality (ACRE) and New Directions, which aimed to build a supported network of champions through the delivery of a growing programme of training and promotional events, to develop health knowledge amongst communities and strengthen community action, self-help and engagement with health-promoting activities and interventions.

It set out a summary of the progress during the past four months of the programme, including the progress on champion recruitment and training, the community groups who had been engaged, the events delivered by the programme and the award of small project grants for health and wellbeing community projects.

George Mathew addressed the Board, speaking about his experience of the programme, and noting that it was hoped that the target of 100 Community Champions would be achieved by the end of October 2024.

Resolved – That the report and presentation be noted.

24. BOB ICB UPDATE BRIEFING

Rachael Corser submitted a report presenting a briefing from the BOB Integrated Care Board, as at September 2024.

The report covered the following areas:

- ICB Board meeting – 16 July 2024
- GP Collective Action
- BOB ICB Operational Model
- Place Update – Berkshire West

Rachael Corser reported at the meeting that there had been another ICB Board meeting on 17 September 2024, as well as an extraordinary private ICB Board meeting to sign off the new BOB ICB Operational Model, which was now in the first stages of implementation.

She also reported that Sarah Webster had now had her baby and that Rachael Corser would be the ICB representative on the Board whilst Sarah was on maternity leave.

It was noted that it would be helpful for all partners to be given information about who was doing what in the new ICB Operational Model and who the new contacts were, and also to know what impact the current financial situation in the healthcare system was likely to have on local activities and strategies.

Rachael Corser said that she would ensure that changes in the ICB and new contacts would be shared with partners and suggested that a brief update on the financial position of the healthcare system could be included in the update to the next meeting.

Resolved -

- (1) That the report be noted;
- (2) That Rachael Corser include a brief update on the financial position of the healthcare system in the update to the next meeting.

25. ROYAL BERKSHIRE FIRE AND RESCUE SERVICE HUB PLAN – WEST HUB 2024/25 – INFORMATION ITEM

A web link was provided to the Royal Berkshire Fire and Rescue Service's Hub Plan for the West Hub (which included Reading) for 2024/25, setting out strategic priorities and objectives. The Hub Plans had replaced the Service's previous Local Service Plans that had represented each of the unitary authority areas in Berkshire.

Resolved – That the plan be noted.

26. BERKSHIRE SEASONAL INFLUENZA AND COVID-19 CAMPAIGN – INFORMATION ITEM

The Board received an information report giving an update on the 2024-25 seasonal flu campaign across Berkshire West, the communications plans, local outreach programmes and the arrangements for employees of Reading Borough Council.

Resolved – That the report be noted.

27. ROYAL BERKSHIRE NHS FOUNDATION TRUST INTEGRATED PERFORMANCE REPORT – INFORMATION ITEM

A web link was provided to the Royal Berkshire NHS Foundation Trust's Integrated Performance Report from August 2024.

Resolved – That the report be noted.

28. BOB ICB ANNUAL REPORT AND JOINT CAPITAL RESOURCE USE PLAN – INFORMATION ITEM

The Board received a report providing web links to the BOB ICB's Annual Report for 2023/24 and the BOB ICS's Joint Capital Resource Use Plan for 2024/25.

Resolved – That the report and plan be noted.

29. DATE OF NEXT MEETING

Resolved – That it be noted that the next meeting of the Health and Wellbeing Board would be held at 2.00pm on 17 January 2025.

(The meeting started at 2.00 pm and closed at 4.01 pm)

Adult Social Care, Children's Services and Education Committee

18 March 2025



Reading
Borough Council
Working better with you

Title	School Suspensions update
Report author	Brian Grady, Director of Education
Lead Councillor	Councillor Wendy Griffith; Councillor Ruth McEwan
Corporate priority	Inclusive Economy
Recommendations	<ol style="list-style-type: none"> 1. That ACE note the establishment of a Task and Finish Group regarding suspensions from schools. 2. That ACE receive updates at the March ACE Committee from the Task and Finish Group and local school Multi Academy Trusts on their plans to promote school inclusion and to reduce suspensions.

1. Executive Summary

- 1.1. Adults Social Care, Children's Services and Education (ACE) Committee on 15 January 2025 received an update on rates of suspensions and exclusions in Reading schools.
- 1.2. At this meeting, ACE Committee noted the improved position regarding school exclusions, the position regarding suspensions and the actions being taken to reduce school suspension rates in Reading.
- 1.3. This update confirms the next steps being taken to support efforts to reduce suspension rates in Reading, in particular:
 - ACE invitation to the Chief Executives of priority Trusts to attend ACE Committee to share their plans to promote school inclusion and to reduce suspensions from schools.
 - The establishment of an ACE Task and Finish group to consider what other actions can be taken to reduce suspensions from schools

2. Policy Context

- 2.1. **Suspensions from school:** Children engaging with and attending school is one of the key national challenges we face following the pandemic. As a result, there is a tension between children being ready to learn in school and regulating well, the need for children to be in school, and the pressures on Headteachers from responding to dysregulated behaviour of some pupils (which can sometimes cause safety risks for other pupils and for staff). In Reading, we take a trauma – informed approach to behaviour, which seeks to address root causes rather than punish incidences of behaviour.
- 2.2. Only the headteacher of a school can suspend or permanently exclude a pupil on disciplinary grounds. A pupil may be suspended for one or more fixed periods (up to a maximum of 45 school days in a single academic year), or permanently excluded. A pupil's behaviour outside school can be considered grounds for a suspension or

permanent exclusion. Any decision of a headteacher, including suspension or permanent exclusion, must be made in line with the principles of administrative law, i.e. that it is: lawful (with respect to the legislation relating directly to suspensions and permanent exclusions and a school's wider legal duties); reasonable; fair; and proportionate.

3. The current position

3.1. Task and Finish group

3.2. A Terms of Reference for the Task and Finish Group has been drafted and is appended to this report. The membership of the Task and Finish group is to be agreed by the Chair of ACE Committee in consultation with the Lead Member for Children's Services, the Lead Councillor for Public Health and Education, and the Leader of the Council.

3.3. As well as working with officers to review causes and potential solutions regarding school suspensions, the Task and Finish Group will engage directly with local Academy Trust secondary schools and undertake visits to better understand practice and challenges, as well as collaborate on solutions. The Task and Finish Group will also engage wider partners and stakeholders to secure change and improvement for Reading children.

3.4. The Director of Education, Brighter Futures for Children has presented the Task and Finish group proposal to the Reading Secondary and College Leaders group and has invited all Reading secondary schools to engage in this process. A number of schools have confirmed their interest in hosting visits of the group, including The Wren School and JMA.

3.5. Invitation to priority Trusts to attend ACE Committee

3.6. Greenshaw Learning Trust, the new host Trust for JMA school, and Excalibur Trust, the host Trust for The Wren School, have been invited to attend March ACE Committee, to discuss their inclusion approaches and to answer councillor questions regarding their plans to promote school inclusion and to reduce suspensions.

4. Contribution to Strategic Aims

4.1. Reducing suspensions will directly improve engagement of young people in education, and as a result engagement in employment and training. These actions and outcomes will directly contribute to the strategic aims of the Council regarding Thriving Communities and an Inclusive Economy.

4.2. The Council's new Corporate Plan has established three themes for the years 2022/25. These themes are:

- Healthy Environment
- Thriving Communities
- Inclusive Economy

4.3. These themes are underpinned by "Our Foundations" explaining the ways we work at the Council:

- People first
- Digital transformation
- Building self-reliance
- Getting the best value
- Collaborating with others

5. Environmental and Climate Implications

- 5.1. Not applicable to this report.

6. Community Engagement

- 6.1. Key areas of engagement relevant to this report have been with Reading Secondary and College Leaders Group.

7. Equality Implications

- 7.1. Support for young people with the additional protected characteristic of disability is a key feature and priority of this report.

8. Legal Implications

- 8.1. Not applicable to this report.

9. Financial Implications

- 9.1. Not applicable to this report.

Appendices

- 1. **Draft Task and Finish group Terms of Reference**

Appendix 1: Draft Task and Finish group Suspensions and School Attendance Terms of Reference

Introduction

Following agreement at its meeting on 15 January 2025 the Adult Social Care, Children's Services and Education (ACE) Committee agreed to establish a Task and Finish Group to receive updates on the work being undertaken in schools in Reading regarding the increased rate and number of school suspensions.

Suspension rates are a key area of concern in our local education system. Whilst permanent exclusions performance has improved over the past four years and remains relatively stable, suspension rates have increased. Suspensions in some schools are concerning and impact outcomes.

As suspensions are actions taken by the Headteacher of the school, improvement requires a partnership response with all school leaders. The Education Partnership Board have reducing suspensions as a key priority this academic year. Suspension rates have increased rapidly over the past three years throughout the whole of England. In Reading, suspensions have increased by a slower rate and for 2022/23 the suspension rate in Reading was lower than the suspension rates in England and the South East. However, suspension rates remain a key area of local concern.

Scope/Role

The Group agrees to:

- (1) To act as a consultative Group on the development of school-led responses to suspensions.
- (2) To consider work being undertaken to reduce the risk of suspensions and to consider what further action can be taken to collectively support our children and young people to thrive and succeed.
- (3) To review best practice to inform local practice
- (4) To make recommendations to ACE Committee and other decision-making bodies, as necessary, on reducing the risks of school suspensions.

Membership

The proposed membership of the Task and Finish Group will be agreed by the Chair, ACE Committee in consultation with the Lead Member for Children's Services, the Lead Councillor for Public Health and Education, and the Leader of the Council.

The Task and Finish Group may invite officers and members when relevant to discussions. The Task and Finish Group will also meet with school leaders and visit schools to observe and understand better current practices, and engage with relevant stakeholders and partners to help contribute to the most effective solutions.

(A table of membership to be added once decided)

Meetings

The meetings will take place via Teams when necessary. School visits will be in person. Updates will be provided to the ACE Committee at its meeting in March 2025.

Confidentiality

All materials and information shared with the Group are assumed to be confidential, unless otherwise stated.

Florey Clinic ACE Report March 2025



Florey Clinic, Sexual Health and
Contraception services in Reading, Wokingham and West
Berkshire.

Report to:

Reading Adult Social Care, Children's and Education
(ACE) Committee meeting

March 2025

Florey Clinic ACE Report March 2025

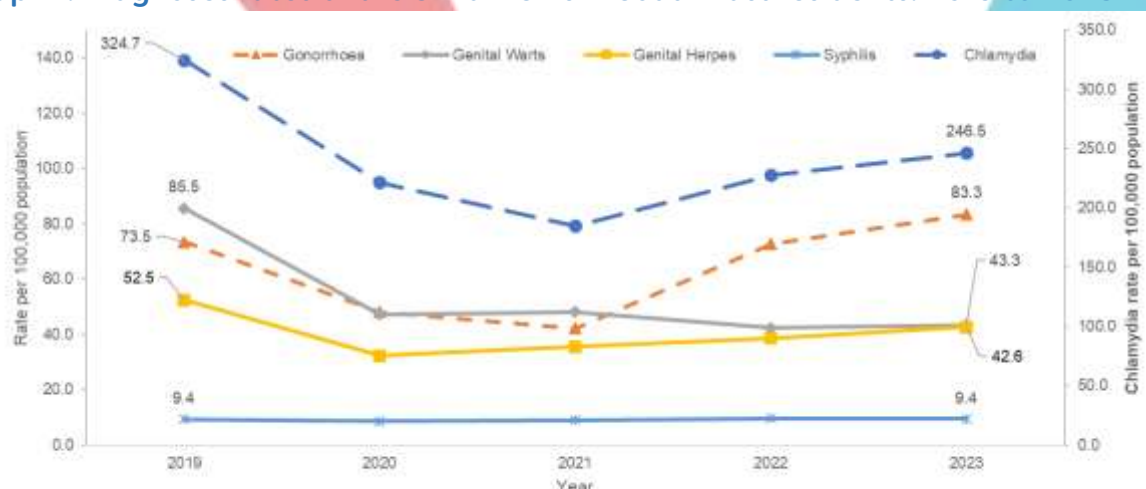
Florey Clinic Overview

The Florey Clinic, part of the Royal Berkshire NHS Foundation Trust, offers comprehensive Contraception and Sexual Health (CaSH) services. These services include sexual health, contraception, psychosexual counselling, and care for individuals living with Human Immunodeficiency Virus (HIV). The clinic is commissioned by the local authorities to deliver sexual health services across Reading, West Berkshire, and Wokingham. Additionally, the contraception service is specifically commissioned to provide all forms of contraception including long-acting reversible contraception (LARC) for individuals aged 25 and under, emergency contraception for all, and specialist contraception and LARC services via referral. CaSH services are designed to be open access, ensuring that anyone can attend the service, thereby reducing health inequities for individuals who may face barriers accessing other healthcare services. The Florey Clinic offers a variety of options for service users, including face-to-face appointments, walk in clinics, telephone consultations, online booking, home testing and specialist outreach services where appropriate. This diverse range of options provides users with the flexibility to choose how they would like to attend that best suits their needs.

National and Regional Sexually Transmitted Infection Data

The UK Health Security Agency (UKHSA) 2023 report showed that there was a 5% increase of diagnoses of sexually transmitted infections (STI) in England since 2022. Gonorrhoea diagnoses reached a record high, in England, in 2023. Although there has been an increase in STI diagnoses in England, the diagnoses rates of STIs in the south east has not returned to pre COVID levels, shown in Graph 2. Another notable point from the UKHSA 2023 report is among heterosexuals attending sexual health services, most chlamydia and gonorrhoea diagnoses were in people aged 15 to 24 years. With diagnosis rates in the south east not returning to pre pandemic levels and diagnosis high in young people the reports highlights the need for sexual health services to improve access and testing in young people.

Graph 1: Diagnoses rates of the 5 main STIs in South East residents: 2019 to 2023



Graph 1: Sexually transmitted infections (STIs): annual data - GOV.UK (www.gov.uk)

Florey Clinic ACE Report March 2025

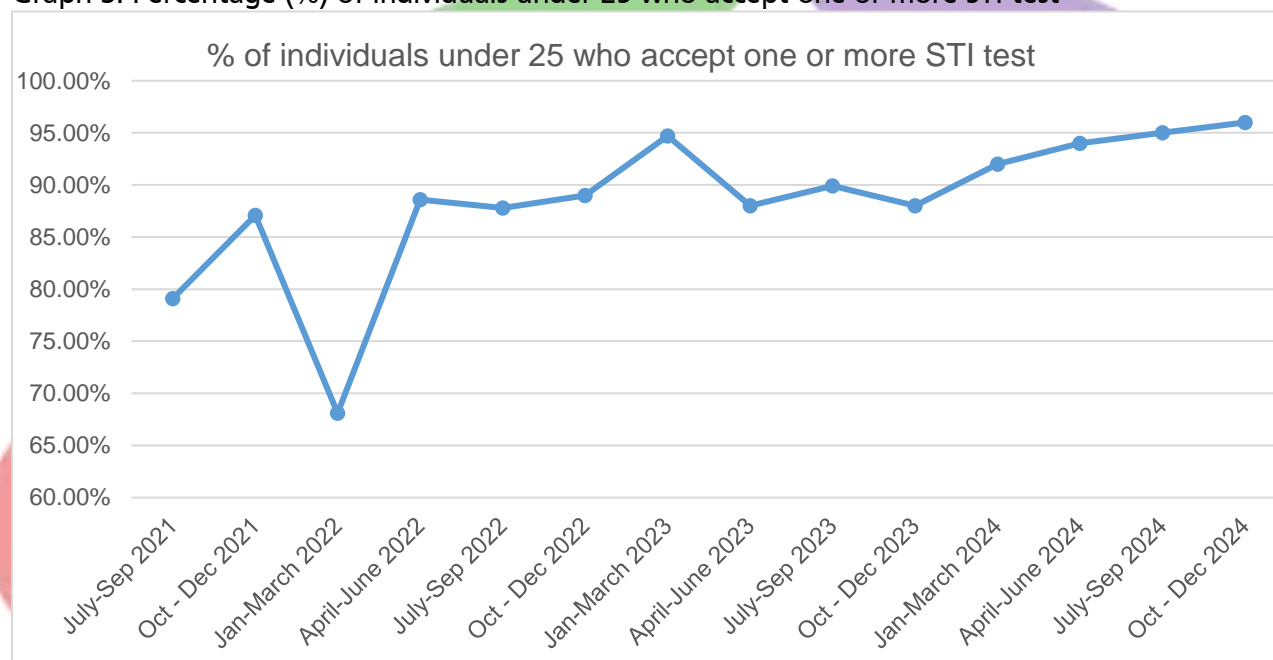
Young People Testing at Florey Clinic

The Florey clinic has been committed to the testing of STIs amongst young people. Working on improved access and alternative ways to access, which may be more appealing for young people, such as improved online booking and online testing services. Looking at the period from July 2021 to December 2024 analysis focuses on two key metrics: the percentage of individuals under 25 who accept one or more STI test, Graph 3, and the total number of under 25s tested for Chlamydia, Graph 4. By examining these trends, we can gain insights into the effectiveness of Florey's outreach and testing initiatives.

The percentage of individuals under 25 who accept one or more STI test, Graph 3, shows a general upward trend in the percentage of people who accept a test for STIs. The percentage dipped in the first quarter of 2022 but recovered significantly in the following quarters. The highest percentage recorded was 96.0% in the last quarter of 2024 showing the significant improvements made in young people accepting testing.

The total number of under 25s tested for Chlamydia, Graph 4, the number of tests conducted shows a significant increase since 2021. There was a notable spike in the number of tests from April-June 2023 onwards with the numbers remaining relatively high through to the end of 2024, indicating sustained efforts in testing.

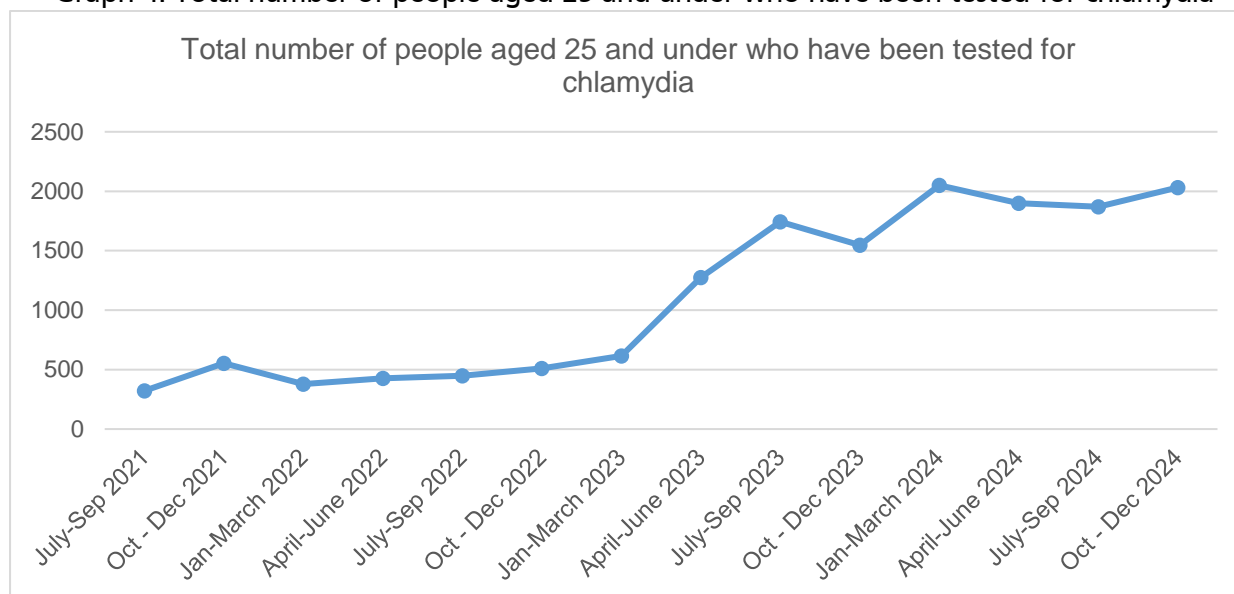
Graph 3: Percentage (%) of individuals under 25 who accept one or more STI test



Graph 3: taken from internal data

Florey Clinic ACE Report March 2025

Graph 4: Total number of people aged 25 and under who have been tested for chlamydia



Graph 4: taken from internal data

“Let’s Get to Zero” – Florey Clinic Bus Project

To enhance HIV and STI knowledge amongst young people, the Florey Clinic sought additional funding to support with the government's ambitious goal of achieving zero HIV transmissions by 2030. This initiative, known as the "Let's Get to Zero" project, aimed to improve education on the tools and methods available to reach this target, with a particular focus on individuals under 25. The project recognised the importance of targeted outreach and community engagement in addressing the gaps in awareness and testing uptake among young people.

The "Let's Get to Zero" project employed the following strategies:

1. **Pop-up Clinics via the Florey Bus:** The health bus was used as a resource in high-traffic areas to engage directly with the public, providing information, materials, and testing services. Branded materials and banners to enhance visibility.
2. **Social Media Campaigns:** Targeted younger audiences on platforms like Instagram, TikTok, and Facebook. QR codes on promotional materials enabled access to home testing kits and HIV prevention information.
3. **Community Collaborations:** Partnered with local HIV charities, drug and alcohol services, and youth groups to promote the project and extend its reach.
4. **Engagement with Educational Institutions:** Outreach at universities and colleges, including Freshers’ Fairs, to engage directly with students and promote testing and awareness.
5. **Participation in Public Events:** Actively participated in events such as Pride and the Black History Conference to engage diverse audiences and demonstrate inclusivity.

Florey Clinic ACE Report March 2025

Outcomes and Analysis of the "Let's Get to Zero" Project

1. Increasing Knowledge and Awareness of the 2030 Target

Awareness Campaign: Raised awareness about the government's goal to end HIV transmission by 2030, initially known by only 20% of survey respondents. Social media campaign played a crucial role in engaging younger audiences. Throughout the campaign, 76,368 users were reached, and the content was viewed a total of 268,690 times, with each user seeing the content an average of 3.52 times. Link clicks totalled 2,753, demonstrating a strong level of engagement.

Outreach Efforts: Distributed leaflets with key messages about the 2030 target, HIV prevention methods, and clinic information. The distribution of branded condoms and HIV prevention materials helped attract attention. Many individuals requested condoms, and the visibility of this material encouraged participation and increased awareness about HIV prevention.

Visibility and Media Coverage: Enhanced visibility through the health bus, social media, and collaborations. Media coverage, including a segment on BBC South Today, helped to amplify the message.

2. Increasing Uptake of HIV and STI Testing

Health Bus Initiative: Made testing more accessible and convenient, with 77% of those tested being new to the Florey clinic.

Testing Events: 175 individuals tested across 24 events, with strong engagement in key areas such as Reading town centre.

Online Testing: Distributed leaflets with QR codes for online testing, with 51 people opting for this method of testing.

Community Engagement: Normalised testing through visibility at local events, facilitating conversations about sexual health.

3. Improvement in public health outcomes

Testing and Referrals: While no individuals tested positive for HIV throughout the project the health bus testing allowed for the identification of other STIs and participants were contacted and linked into relevant services for timely care. The bus contributed to re-engagement into HIV care. One individual living with HIV who had been lost to follow-up back into the service.

Conclusion

The data trend shows an increase in STI testing among under 25s at the Florey Clinic. Both the percentage of individuals tested and the total number of tests conducted have shown significant increases over the observed period. This suggests successful outreach and testing initiatives by the clinic. The six month "Let's Get to Zero" project at the Florey Clinic successfully enhanced HIV and STI knowledge among young people, aligning with the

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government goal of zero HIV transmissions by 2030. Continued efforts in this direction are likely to further improve public health outcomes.

Future Plans

Given the success and positive feedback of the "Let's Get to Zero" bus project, the Florey Clinic is currently in discussions with local authorities to secure continued funding for a testing bus which can be used within Reading, West Berkshire and Wokingham. In addition to seeking further support for the bus project, the clinic is developing a new media campaign aimed at improving knowledge and awareness of available services for Reading residents. This campaign will be inclusive, targeting all community groups to ensure broader access to sexual health services and to reduce stigma. The Florey Clinic also has plans to engage with young people through consultations to better understand their needs and to enhance access and testing for young residents in Reading.