

READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	19 th March 2021		
REPORT TITLE:	Health and Wellbeing Dashboard and Action Plan - March 2021		
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ORGANISATION:	Reading Borough Council		

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report presents an update on the Health and Wellbeing Dashboard (Appendix A), which sets out local trends in a format previously agreed by the Board to provide the Board with an overview of performance and progress towards achieving local goals as set out in the 2017-20 Health and Wellbeing Strategy for Reading.
- 1.2 The appended document gives the Board a context for determining which parts of the Health and Wellbeing Strategy it wishes to review in more depth, such as by requesting separate reports. Identifying priorities from the Health and Wellbeing Strategy to provide themes for Health and Wellbeing Board meetings is in line with the 2016 Peer Review recommendation that the Health and Wellbeing Strategy should be used to drive the agenda of the Health and Wellbeing Board.

2. RECOMMENDED ACTION

- 2.1 That the Health and Wellbeing Board notes the following performance updates contained in the dashboard:

- Estimated dementia diagnosis rate (aged 65+) has been updated with monthly snapshots.
- The following NHS Healthcheck indicators are updated each quarter
 - People invited for a healthcheck
 - People taking up a healthcheck
 - People receiving a healthcheck
- Successful completion of alcohol treatment updated each quarter
- % adult social care users with as much social contact as they would like
- Bowel and breast cancer screening coverage

- 2.2 That the Health and Wellbeing Board notes the updates that have been included in this report on priority actions underpinning the current Health & Wellbeing Strategy.

3. POLICY CONTEXT

- 3.1 The Health and Social Care Act 2012 sets out the requirement on Health and Wellbeing Boards to use a Joint Strategic Needs Assessment (JSNA) and a Joint Health and Wellbeing Strategy (JHWS) to develop plans which:
- improve the health and wellbeing of the people in their area;
 - reduce health inequalities; and
 - promote the integration of services.
- 3.2 Reading's 2017-20 Health and Wellbeing Strategy sets out local plans as required under the Health and Social Care Act, and also addresses the local authority's obligations under the Care Act 2014 to promote the wellbeing of individuals and to provide or arrange services that reduce needs for support among people and their (unpaid/family) carers in the local area.
- 3.3 The current strategy is founded on three 'building blocks' - issues which underpin and are expected to be considered as part of the implementation plans to achieve all of the strategic priorities. These are:
- Developing an integrated approach to recognising and supporting all carers
 - High quality co-ordinated information to support wellbeing
 - Safeguarding vulnerable adults and children
- 3.4 The Strategy then sets out eight priorities:
- Supporting people to make healthy lifestyle choices (with a focus on tooth decay, obesity and physical activity)
 - Reducing loneliness and social isolation
 - Promoting positive mental health and wellbeing in children and young people
 - Reducing deaths by suicide
 - Reducing the amount of alcohol people drink to safe levels
 - Making Reading a place where people can live well with dementia
 - Increasing breast and bowel screening and prevention services
 - Reducing the number of people with tuberculosis
- 3.5 In July 2016, Reading's Health and Wellbeing Board agreed to introduce a regular Health and Wellbeing Dashboard report - at each meeting - to ensure that members of the board are kept informed about the Partnership's performance in its priority areas, compared to the national average and other similar local authority areas. There was also an agreement to present an updated Health and Wellbeing Action Plan to the Board across all priorities twice a year. Many activities contained within the Action Plan(s) were suspended or realigned in 2020 because of the impact of COVID-19, and leads for each priority area across the Strategy were then asked to produce a narrative summary by way of updating the Board.
- 3.6 Following agreement by the Health and Wellbeing Board chairs from West Berkshire, Reading and Wokingham to the development of a shared Joint Health and Wellbeing Strategy across the three boroughs, there has been extensive engagement with stakeholders, including residents, to identify the priorities for a new strategy. A public consultation closed on 28.02.2021 and the results are currently being analysed. This analysis will inform the development of a new Berkshire West Health and Wellbeing Strategy, which will be brought to a future Board meeting. The aim is to identify a small number of key priorities which:
- can meaningfully be addressed by Health and Wellbeing Board members working together;

- have a clear relevance for Berkshire West;
- are not already being addressed via another mechanism; and
- will support recovery from COVID-19.

4. CURRENT POSITION (March 2021)

Update 2020

4.1 The Health and Wellbeing Dashboard provides the latest published and validated data available to support the Board to scrutinise and evaluate the performance of the Partnership against the agreed priorities set out in the current Reading Health and Wellbeing Strategy. Some of the data used to measure public health outcomes, particularly for those indicators based on annual national survey and hospital data, goes through a process of checking and validation before publication, which can mean that it is published some time after it was collected. As changes to population health usually happen gradually this is usually adequate and appropriate, but in the last year change in the wake of the COVID-19 pandemic and lockdown has been rapid and it is possible that the outcomes reflected in the most recent data do not reflect the current picture.

[Public Health England's 'Wider Impacts of Coronavirus' tool \(WICH\)](#) is a collection of metrics that measure changes over time in key areas of health and wellbeing that may have been affected by the pandemic.

Priority 1: Supporting people to make healthy lifestyle choices (with a focus on tooth decay, obesity and physical activity)

4.2 While there continue to be more people in Reading than the average whose weight is within the recommended range, the percentage of adults in Reading who are overweight or obese increased in 2019. In the same period, the percentage of adults who meet criteria for being physically active decreased to below the England average. Smoking increased slightly in both the general population and amongst those in routine and maintenance professions, although the year-on-year change was too small to be considered reliable. Little information is available about how levels of physical activity, healthy eating and smoking were affected locally during 2020. A survey across Berkshire suggests activity levels may have increased during the first lockdown starting in March 2020 but decreased in the second lockdown, with inclement weather and lack of access to facilities reported as the most significant barriers.

4.3 As in previous periods, Reading is unlikely to meet local or national targets for delivering NHS health checks to eligible residents (those aged 40-74 without certain specified diagnoses). The NHS health check assesses people's risk of stroke, heart disease, kidney disease, diabetes and dementia, and leads to targeted advice. The position is of particular concern given the emerging evidence that those who have diabetes and contracted COVID-19 appear to have worse clinical outcomes. This is also true for individuals with high blood pressure and for those carrying excess weight, all increasing the risk of mortality. The NHS Health Check programme is thus a valuable way to identify people across Reading at increased risk of having undiagnosed comorbidities, and likely to benefit from a conversation with a healthcare professional about healthy weight, physical activity and smoking cessation to reduce the impacts of COVID19.

4.4 The NHS Health Checks programme remains on pause due to the impact of lockdown and the need for GP practices to focus their efforts on the COVID vaccination programme. This period of pause is allowing time for Public Health to work with NHS partners to re-focus the programme so that it can better target those at higher risk of cardiovascular disease, many of whom are also at greatest risk from COVID-19. Over the next few months, a priority is for NHS health checks to restart safely.

- 4.5 Following heavy promotion of the smoking cessation service by Smokefree Berkshire providers and Reading Borough Council in April and May last year, there was a sustained increase in the numbers of people setting a quit date between June and November 2020. This increase was also reflected in the greater numbers of people staying quit at 4 and 12 weeks, with the majority of those quitters being in targeted groups. There was an anticipated seasonal dip in referrals in December, which also continued into January. Promotion of the service will increase again as National No Smoking Day approaches providing a fresh impetus for people who may be struggling to quit due to the impact of lockdown on their mental wellbeing. A remote service in line with national recommendations is expected to continue until the end of the year.
- 4.6 Public Health has worked in partnership with the commissioners and providers of Reading's new leisure service contract, and this has been planned to host a range of additional Public Health services, including an adult weight management programme. However, COVID-19 necessitated closing leisure provision and significantly delayed the signing of contracts. In the interim, acknowledging the gap in provision, the Public Health team has supported the Mayor's Better Health Campaign and promoted a range of national health campaigns and Public Health England resources to support residents to eat healthier and to be more physically active. Residents are signposted to download the NHS 12-week weight loss app, Change for life, NHS Healthier You and Active 10 app to help lose weight and get more physically active. Information has also been shared via the Reading Services Guide and Wellbeing Newsletter.

Priority 2: Reducing loneliness and social isolation

- 4.7 The results from the 2019/20 Adult Social Care Survey were published in November 2020 and tell us that a higher proportion of respondents to the survey than previously reported that they have as much social contact than they would like (48.6% compared to 47.1% the previous year). Reading Borough Council was among the 24 local authorities that chose to carry out the Adult Social Care Survey for 2020. The results are considered likely to be affected by the COVID-19 pandemic and subsequent lockdown and may not be considered comparable to previous or future years.
- 4.8 The latest carers survey results were collected during 2018/19 when the proportion of carers reporting that they had as much social contact as they would like decreased from the previous period. This was in line with similar decreases seen across England and in local authorities with similar levels of deprivation to Reading. The next survey will be carried out in 2021/22 and is not, therefore, expected to be affected by the immediate impact of the 2020 COVID-19 pandemic and lockdown.
- 4.9 Loneliness and social isolation have remained key issues of concern during lockdowns and ongoing social distancing restrictions, and have featured strongly in Reading's COVID response as well as recovery plans. In recognition of the risks associated with social isolation, a range of local services reached out during lockdowns to existing users to offer short wellbeing checks or links into more substantive social connection support. Many local groups increased capacity for befriending support during lockdown - by diverting staff and volunteers from suspended face-to-face activities, by deploying new volunteers coming forward, and by making use of additional capacity of existing volunteers in some cases. Support was offered mostly by telephone but also other virtual channels and letter writing. Befriending resource was also increased for groups where there were apparent gaps, e.g. younger adults. The transition to virtual support has not suited everyone, however, and some people have suspended or declined offers of support in this way.
- 4.10 There have been anecdotal reports that people being supported to reduce loneliness or isolation have experienced higher levels of anxiety or other emotional problems since the

onset of the pandemic. Reading Borough Council's Wellbeing Team, incorporating Compass Recovery College, has developed and delivered a range of courses to local befrienders to increase their knowledge, skills and confidence in supporting people with mental health needs, and in supporting people to transition out of lockdown restrictions. This will involve developing confidence in physical and social skills in many cases.

- 4.11 The pandemic has highlighted the increased risk of social isolation for people who are digitally excluded, and this is an area of increased focus now for the Loneliness and Social Isolation Steering Group.

Priority 3: Promoting positive mental health and wellbeing in children and young people

- 4.12 The number and proportion of primary school children with social, emotional or mental health need increased very slightly between 2017 and 2018, both in Reading and across England. The proportion in Reading continues to be very slightly higher than the national average and the average amongst local authority areas with similar levels of deprivation and above, but the difference is not large enough to be statistically different. In the same period, the proportion of secondary school children with social, emotional or mental health needs has fallen very slightly, but not significantly enough to bring it in line with the national average.
- 4.13 Across a range of Berkshire West providers, there was suppressed demand throughout the first COVID-19 lockdown period in requests for help for children and young people. However, many cases both known and unknown did present with higher acuity of issues, as seen by a significant increase in the work of the Rapid Response crisis team for children and young people in the Child and Adolescent Mental Health Service. In particular, there continues to be a concerning increase in eating disorder patients presenting at community and acute settings. In between the 1st and 2nd national lockdown when schools returned there was an increase back towards normal levels of referrals and demand. However, with the lockdown from Christmas there has been a variety of provider experiences, with elements of suppression of demand in some areas and others continuing to experience high demand.
- 4.14 All providers originally moved swiftly to a digital or telephone offer of support although many children and young people paused their interventions. With schools returning, many providers balanced an element of online as well as opening up safe face to face where possible, although this proved difficult at times. Due to COVID the CCG with local authority partners jointly commission the online youth counselling service, Kooth, which is showing good use in the last report (January 2021).
- 4.15 There continues to be good collaboration, and currently the Future in Mind partnership is focusing on understanding the impact of its work since the last Local Transformation Plan (Oct 2019) to ensure a continued focus on the right priorities. Work is continuing to build a robust crisis offer, strengthen the eating disorder offer, continue to tackle waiting times, and meet the expected surge in demand due to lockdown and COVID.
- 4.16 The Reading Mental Health Support Team is performing well and showing first signs of its impact. The mental health triage is in place and has good feedback from service users. The Primary Mental Health workers continue to have a long waiting list. The teams are looking at what interventions can be offered for children and young people on the waiting lists. The majority of referrals in are for anxiety, low mood/depression, oppositional behaviour/self-regulation needs.

Priority 4: Reducing deaths by suicide

- 4.17 The mortality rate for deaths by suicide and injury of undetermined intent for local authority areas for 2017-2019 was published in September 2020. The rate in Reading remained in line with the national average, and average for local authority areas with similar levels of deprivation, and but is now showing an increase from the previous period. 38 deaths were recorded between 2017 and 2019, compared to 28 between 2016 and 2018, increasing the rate per 100,000 population from 7.2 to 9.9.
- 4.18 Ahead of the publication of nationally validated data, Reading along with other areas across the Thames Valley monitors suicide rates via a Real Time Surveillance System based on police reports of deaths suspected to be by suicide. Comparator rates month by month have been tracked very closely since COVID-19 lockdown measures were put in place in England, and cases are being checked for possible COVID links. To date, there has been no increase in the overall Berkshire rates for 2020. However, the Berkshire Suicide Prevention Group is also monitoring fluctuations in rates for different sections of the community within the total.
- 4.19 Partners remain vigilant and proactive in enhancing support around areas of heightened risk. Financial pressure is one such area which is particularly pertinent given the economic impacts of COVID. Reading Borough Council has adopted the national Samaritans / Citizens Advice Council Tax Protocol to target mental wellbeing support on those in problem debt, and put in place a range of additional measures to focus on supporting people to clear their debts. Funding has also been secured from Health Education England to deliver Mental Health First Aid and Suicide Prevention First Aid to frontline staff supporting people at points of financial difficulty, including JobCentre staff and third sector providers in Berkshire.
- 4.20 With a history of mental health difficulties being another known risk factor, Reading's efforts to build people's resilience and coping skills have continued via Compass Recovery College. Student enrolment with Compass has continued on an upward trend, despite being slowed by COVID-19 and lockdown which narrowed the range of opportunities for new enrolments. A wide range of courses have been adapted for virtual delivery, supplemented by outdoor wellbeing courses and social activities when these were allowed. Compass is currently partnering with the Samaritans to deliver a Money Matters course, and with RBC's Wellbeing Team to deliver training to voluntary and community groups which enhances skills and confidence in addressing mental health challenges.
- 4.21 On behalf of all of the Berkshire authorities, Reading continues to commission a specialist support service for Berkshire residents bereaved by suicide, with delivery adapted to reflect social distancing requirements. A very positive evaluation of Phase I of this pilot service has now been published. A further evaluation encompassing similar services across the Thames Valley is currently underway.
- 4.22 The Berkshire Suicide Prevention Strategy is due to be refreshed in 2021. This will be informed by ONS data, Real time Surveillance data, the Berkshire Suicide Audit and a 2015-20 audit into suicides by children and young people (up to age 25).

Priority 5: Reducing the amount of alcohol people drink to safe levels

- 4.23 The proportion of people receiving alcohol treatment who successfully completed treatment decreased during 2020, falling below the England average. From March 2020, Reading's commissioned drug and alcohol treatment provider retained people who use their services in treatment during the COVID outbreak in order to provide ongoing support through a period of increased social isolation and other pressures. As a direct result, only a small number have completed and left treatment during this period.

4.24 The rate of hospital admissions where the primary diagnosis is an alcohol-related condition increased slightly in 2018/19, both in Reading and in England. The rate in Reading continues to be below the English average. Although it is not clear, at present, what impact the COVID-19 pandemic and lockdown has had on hospital admissions for alcohol-related conditions, any sudden reduction in admissions during 2019/20 should be considered as a potential effect of reluctance to present for treatment, rather than a sign of decreasing prevalence of alcohol-related conditions or reduced need for treatment.

Priority 6: Making Reading a place where people can live well with dementia

4.25 As memory clinics were suspended to protect vulnerable patients between March and October 2020, the rate of diagnosis of dementia amongst those aged 65 and older fell below the national target for two thirds of people with dementia to have their condition diagnosed. A similar trend was seen across England and in local authority areas with similar levels of deprivation as measured through IMD. Memory clinics have now re-opened but are working with substantial backlogs and with the additional challenges of adhering to COVID-19 safety measures. The Berkshire West Memory Clinic has experienced delays in diagnosing patients due to the constraints of social distancing and older people being fearful of attending appointments during COVID-19.

4.26 Dementia Champions, co-ordinated through the Dementia Friendly Reading Steering Group, have delivered Dementia Friends sessions on virtual platforms. These have been in high demand since COVID-19, with more local businesses and services wishing to understand how better to support people living with and affected by dementia. However, with many of the national Dementia Friends team furloughed, updated statistics have not been issued. Local data suggests approx. 500 dementia friends have been created since February 2020, reaching people in England and staff residing in foreign countries, who are working for English companies calling people who may be diagnosed with dementia.

4.27 The Dementia Friendly Reading Group is working with the University of Reading to produce a dementia toolbox (AMuSED). This is an interactive box that aims to stimulate the brain, and engage a person living with dementia to promote positive memories through physical and visual techniques. The Group is supporting the UoR to design, plan and produce the kit, that will be available to purchase across Berkshire.

4.28 The rate of diagnosis of dementia amongst those aged 65 and older fell below the national target for two thirds of people with dementia to have their condition diagnosed. This is in line with the England average and similar to the average for local authority areas with similar levels of deprivation as measured through IMD and seems likely to be related to the COVID-19 lockdown.

4.29 The Berkshire West Dementia Steering Group, including representatives from the three unitary authorities in Berkshire West, the CCG and local voluntary sector groups, has completed an FAQs guide to getting support around dementia during lockdown, including accessing NHS services to obtain a diagnosis of dementia. The group had also started work on refreshing the Berkshire West Action Plan on the prevention and delivery of dementia related services. This will feed into to the Mental Health and Learning Disability Board's priorities for 2021/2022 specifically around dementia.

4.30 Dementia Cafés for people living with dementia are now being held virtually by Age UK Berkshire monthly and the Younger People With Dementia Charity continues to offer virtual social and stimulation activities throughout the week to support people living with or caring for someone with dementia to connect to others and offer peer support throughout COVID-19.

Priority 7: Increasing breast and bowel screening and prevention services

- 4.31 Locally set targets for breast and bowel cancer screening, which have been set at minimum coverage standards, have been met. More than 10,000 people were screened for bowel cancer and more than 10,000 for breast cancer during 2020.
- 4.32 Reading Borough Council has been active in promoting uptake of screening by residents during the COVID-19 pandemic, reinforcing NHS messages about the importance of keeping screening appointments and providing reassurance about the COVID-safe environments in which the tests are being carried out, but it not yet clear what the impact will be on screening coverage statistics for 2020.
- 4.33 Cancer screening services have now returned to pre-COVID levels of operation, and virtual cancer awareness sessions and health and wellbeing sessions are being organised to support the cancer champions in their role. The Macmillan Cancer Educator is working closely with communication teams at RBH, RBC and BWCCG to produce COVID-19 compliant information, and this has been shared with different communities and networks.

Priority 8: reducing the number of people with tuberculosis

- 4.34 Although incidence of tuberculosis (TB) continues to be higher in Reading than elsewhere, the latest published data confirms ongoing improvement in line with targets. As a result, incidence of TB in Reading has more than halved since reaching a peak in 2008-10 of 38.4 cases per 100,000 population (176 cases) to 17.8 cases per 100,000 in 2016-18 (87 cases).
- 4.35 TB Strategy Group meetings and the TB cohort review meeting led by Public Health England were cancelled early in 2020 because of COVID-19 constraints, but the TB Strategy Group meetings resumed from December 2020. The New Entrants Screening Service (NESS) clinics at Royal Berkshire Hospital resumed from 5th October 2020, and there are now four NESS clinics operating per week, including one evening clinic per month at Long Barn Lane Surgery. TB teams have continued to see patients needing to start treatment for Latent TB.
- 4.36 The BCG clinic at Royal Berkshire Hospital has been running twice a week. Two asylum seekers housed temporarily in a local hotel during the pandemic were referred for TB screening. The TB Homeless Memorandum of Understanding has been approved and is in place for homeless patients who have no recourse to public funds.

5. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

- 5.1 This proposal supports Corporate Plan priorities by ensuring that Health and Wellbeing Board members are kept informed of performance and progress against key indicators, including those that support corporate strategies.

6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

- 6.1 The recommended action will have no impact on the Council's ability to respond to the Climate Emergency.

7. COMMUNITY & STAKEHOLDER ENGAGEMENT

- 7.1 A wide range of voluntary and public sector partners and members of the public were encouraged to participate in the development of the current Health and Wellbeing Strategy. The indicators included in this report reflect those areas highlighted during the development of the strategy and included in the final version.

8. EQUALITY IMPACT ASSESSMENT

- 8.1 An Equality Impact Assessment is not required in relation to the specific proposal to present the dashboard and updates in this format. This are tools which Board members can use to monitor the success of the Health and Wellbeing strategy as a vehicle for tackling inequalities.

9. LEGAL IMPLICATIONS

- 9.1 There are no legal implications.

10. FINANCIAL IMPLICATIONS

- 10.1 The proposal to note the report in Appendix A offers value for money by ensuring that Board members are better able to determine how effort and resources are most likely to be invested beneficially in advance of the full Health and Wellbeing Dashboard.

11. BACKGROUND PAPERS

APPENDIX A - Health and Wellbeing Dashboard - March 2021