

READING HEALTH AND WELLBEING BOARD

Date of Meeting	14 March 2025
Title	Health and Wellbeing Strategy Quarterly Implementation Plan Narrative Report
Purpose of the report	To note the report for information
Report author	Mary Maimo
Job title	Public Health and Wellbeing Manager
Organisation	Reading Borough Council
Recommendations	<p>That the Health and Wellbeing Board notes the following updates contained in the report:</p> <p>Priority 1 – Tasks supporting Actions 1 - 8 within this priority area including partnership working, proposing projects to support provision of a range of services to support people to be healthy, reduce health inequalities.</p> <p>Priority 2 – Tasks supporting Actions 1 - 6, focusing on identifying health and care needs of individuals at risk of poor outcomes and actions for supporting them. Including engaging with and funding projects that enable people to access information and support at a time and in a way that meets their needs.</p> <p>Priority 3 – Tasks supporting Actions 1 - 7, have been revised to Actions 1 – 3, focusing on: access to nursery places for disadvantaged 2-year olds, increase and develop the support available for children with SEND needs in early years (at home and when accessing early years provision) and promote availability of information for vulnerable families in reading, including those with no recourse to public funds.</p> <p>Priority 4 – Tasks supporting Actions 1 - 7 have been updated with a focus on addressing inequalities in mental health, training, the work of the Mental Health Support Teams (MHSTs) and Primary Mental Health Team (PMHT).</p> <p>Priority 5 – Tasks supporting Actions 1 - 8 have been updated with progress in awareness raising of local mental health support, strengthening a partnership approach to prevention and training, including suicide prevention action planning.</p>

1. Executive Summary

- 1.1.1 This report presents an overview on the implementation of the Berkshire West Health and Wellbeing Strategy 2021-2030 in Reading and, in Appendices A and B, detailed information on performance and progress towards achieving the local goals and actions set out in the both the overarching strategy and the locally agreed implementation plans.
- 1.1.2 The Health & Wellbeing Implementation Plans and dashboard report update (Appendix A) contain a detailed update on actions agreed for each implementation plan and the most recent update of key indicators in each priority area. Full data for key indicators for each priority is provided in the full Health & Wellbeing Dashboard Report (Appendix B).

2 Policy Context

2.1 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.

2.2 In 2021 The Berkshire West Health and Wellbeing Strategy for 2021-2030 was jointly developed and published on behalf of Health and Wellbeing Boards in Reading, West Berkshire and Wokingham. The strategy contains five priority areas:

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

2.3 In Reading the strategy was supplemented by the development of implementation plans for each priority area. These were presented to the Health and Wellbeing Board and approved in March 2022.

2.4 In 2016 the board had previously agreed to introduce regular performance updates, including a 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. The current Health and Wellbeing Dashboard Report has been developed to reflect the new priorities set out in the Berkshire West Health and Wellbeing Strategy 2021-2030 and the associated implementation plans.

2.5 The Health and Wellbeing Dashboard provides the latest data available to support the Board to scrutinise and evaluate the performance of the Partnership against the agreed priorities set out in the Health and Wellbeing Strategy. Some of the national 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 sometime after it was collected. Other data contained in this report is reported directly from local health service providers, including primary care providers, and, as these data are not validated or processed before publication, there may therefore be some minor discrepancies and corrections between reports.

2.6 At each Health & Wellbeing Board meeting Health & Wellbeing Strategy Priority Leads for Reading Borough Council will provide a narrative update against selected tasks and priority items that have been actioned during that period. Statistical data will be refreshed every six months. The reporting schedule for 2025/26 is therefore as follows:

Health and Wellbeing Board	Narrative updates - selected tasks and priorities	Data refresh
March 2025	✓	✗
July 2025	✓	✓
October 2025	✓	✗
January 2026	✓	✓
March 2026	✓	✗

3 The Proposal

3.1.1 Overview

Priority 1 – Reduce the differences in health between different groups of people

The Reading Integration Board (RIB) is leading on this priority as the Board has a programme of projects which are focused on ensuring people get the right care at the right time and in the right place. A Population Health Management approach is used to provide services in areas where there is the greatest need, and to reach out to people in those communities on both a one to one and a group basis. The Programme of work includes a range of projects to support people who may find it more difficult to access services, and as a result there is a difference in their expected health outcomes. Through the Better Care Fund, we commission services to support people who are experiencing Dementia, Young Onset Dementia and Stroke recovery. This is alongside a range of community-based projects that are based within our communities providing services to reduce the impact of difference and support positive outcomes in addressing health and wellbeing needs. Grants provided in 2024/25 covered a range of community-based services to address inequalities, tackle isolation and meet people where they are to engage and support them in achieving improved outcomes (*please note these schemes also contribute towards Priority 5 actions*):

- **ACRE: Men-2-Men Project** to improve access to health services and promote health and wellbeing among participants and their friends.
- **Berkshire Vision:** Part-fund the Sight Loss Support outreach service supporting visually impaired people in Reading.
- **BOB ICB Autism and Crisis Care:** Project to reduce distress, anxiety and crisis of autistic people requiring paramedic intervention and being taken to hospital by ambulance.
- **Mustard Tree:** Starting Point Navigators provide support to young people aged 11-25 admitted to A&E and wards of the Royal Berkshire Hospital.
- **Parenting Special Children:** Specialist support for families and children with a range of Special Educational Needs and Disabilities, or SEND, including early life trauma by Reading-based charity.
- **RABBLE Theatre:** Programme of activity which is financially and physically accessible and encourages positive mental and physical health supporting a healthy life and building confidence.
- **Reading Gateway Church, Parish Nurse:** Help fund another nurse to combat loneliness and improve health and wellbeing, support those with mental health issues with health advice, and signpost to additional assistance. Establish a new garden wellbeing project.
- **Mencap, Family Health Advisor:** To help clients maintain and improve their physical and mental health by providing information, advice, casework, and practical support.
- **Refugee Support Group:** Mental Health awareness and activities programme to support refugees and asylum seekers in Reading to engage in social and wellbeing activities, build networks and get to know the local area.
- **Torch:** Set up a new service to appoint a new Parish Nurse to focus on areas of need and deprivation in West Reading.

Priority 2 – Support individuals at high risk of bad health outcomes to live healthy lives

Our Community Wellness Outreach project continues and operates on both a drop in and appointment basis. In Reading we had large cohorts of people that had not had an NHS Health Check and who are at higher risk of poor health outcomes. ONS Census (2021) shows that there is a larger proportion of people from an Indian, Pakistani, Asian or African ethnicity in Reading, compared to the ratios for England, and as at the end of January 2025, 55% of people seen are from these ethnically diverse groups, which will enable preventative support to be provided and reduce likelihood of developing more serious conditions. The data as at the end of January shows that there have been 2,537 Health Checks. Of the cohorts seen 68% of people were found to have very high/high body mass index (BMI) scores, 23% had high or very high blood pressure and 25% with high blood glucose levels, a pre-indicator of diabetes and 6% with high cholesterol. The usual age range for the NHS Health checks is from 40 years to 74 years. This project has delivered the

checks to everyone over 18 years of age in Reading to take an early detection and prevention approach. So far 32% of people have been below age 40. The general feedback is that people are happy that this service is being provided in the community with easy access and instant results, along with support and advice to enable them to take a pro-active approach to their health and wellbeing outcomes. The service has received a lot of positive feedback on the impact in communities and these short case studies demonstrate the impact:

- *A young female aged under 25 attended a CWO session with her sister. During her check she spoke to the nurse about her challenges with Mental health and weight management which was followed up with a referral to Sport in Mind. Sport in Mind contacted her regarding the different activities she could attend, and she was supported in a one-to-one translated call with RVA and Language Line to complete the registration form so she can drop into an activity and join in.*
- *A person wanted specific support for surviving bereavement by suicide. They had received counselling from Talking Therapies but felt this has not provided them with the support they needed as they wanted to speak to people who had similar lived experience. They were signposted to a group that met this need and were positive about joining their monthly meetings. They are also to be followed up clinically in a few months due to one of their results during their check.*

Priority 3 – Help families and children in early years

The Early help strategy 2024-2026 is complete and is due for presentation at ACE on 19 March 2025. We are grateful for all the contributions from senior leaders of the One Reading Partnership Board in the co-design and development of this partnership approach. The strategy has received a full endorsement from the partnership and has commenced the more practical focused work in the tactical delivery group. This is a partnership document which sets out the joint approach to integrating services to co-deliver early help services. The strategy focuses on four priorities and to galvanise the partnership in these ways: developing the 'best start for life' plan, a pathway for Early help across early years and parenting support. A safeguarding adolescents programme, a multi-agency approach to making Reading a great and safe place for young people inside and outside of their home. Belonging, improving access to services and breaking down barriers for vulnerable families getting the help they need. And Family hubs, a co-located and integrated approach to local services.

The continued efforts of the Early years team and portage are successfully providing sufficient nursery places for the 2-year-olds (who experience disadvantage) across Reading. There has been a lot of activity to promote the offer and access through various platforms and targeted information sharing. Publicity through Family information Service (FIS) and communication targeted directly to parents and carers. The Early years team are sending information directly to identified vulnerable families and encouraging them to request codes in a timely way. Two-year-old funding leaflets are published in the 12 most spoken languages in Reading which improves access to understanding and entitlement for families. Early years and childcare teams produce quarterly and monthly reports on uptake on 2year old funding to track trends and adapt the approach to maintain the uptake. 41 families have accessed Time for 2's which has been running successfully for 1 year through children's centres in Reading. This support is available for eligible children and families for 2year old funding and supports them while they wait for a place in their desired location. It actively supports their readiness to start in the setting. The commitment to the disadvantaged two-year-old offer is evidenced in the continued expanded childcare entitlement rollout.

There is a commitment across the partnership to increase and develop the support available for children with SEND needs in early years (at home and those accessing early years provision) and the actions agreed are to support emerging needs with a view to meet need, minimise problems escalating and reduce the demand for high-cost interventions as children grow. The work underway

has focussed on supporting practitioners to identify need and offer support early on and to provide families with the spaces, advice, skills and resources that will support children to thrive.

The Holiday and activity fund (HAF) programme has been another highly successful programme this year. For the first time, the programme has introduced specific activities for children with SEND with plans to further expand the offer for 2025.

Focused work has developed the ordinarily available provision (OAP) in early years setting. The focus is on staff being upskilled with improved knowledge and confidence to effectively meet the needs of children with SEND in mainstream PBI settings. Dingley's promise pilot in a local mainstream setting is looking at how to improve a smooth transition of children with SEND into a mainstream class setting (Reception) - Lead by Rebecca Bateman.

The third main strand of priority 3 is a focus on the availability of and access to information for vulnerable families regarding community based, targeted and statutory services. Reading Borough Council is a Council of Sanctuary and information needs to be freely available on what support and services are available for families with young children across all demographic groups and immigration status, including those who have no recourse to public funds (NRPF).

Family information service (FIS) continues to be a highly effective service at maintaining up to date records of available support and resources as well as publicising them to the families who need it most.

Priority 4 - Promote good mental health and wellbeing for all children and young people

Following on from the previous updates to Health and Well-Being Board we offer the following updates:

- The design of a new Emotional and Mental Health Triage for children and young people has commenced. We have had excellent support from our voluntary sector leaders with expertise in this field, who are actively contributing to co-design of the Triage. Following discussion with other regional leaders with good practice in this area, we have drawn on existing good practice as a blueprint for the design for Reading. We very much appreciate the active support from leaders in Berkshire Healthcare Foundation Trust (BHFT), BOB ICB and Public Health in the co-design of these new arrangements. To ensure appropriate safeguarding interface and governance, Andrea King and Jonny Bradish presented the proposals around EMH Triage to Berkshire West Safeguarding Children's Partnership (BWSCP) MASH Steering Group and received full endorsement and support from all statutory partners. Andrea and Jonny have also spent time with colleagues in CSPOA (children's services front door), working with operational managers with oversight of safety, protection and early help partnership resources, to embed the design of EMH Triage in these arrangements, ensuring 'No Wrong Door' for children. We will undertake a similar process with CAMHS CPE (Common Point of Entry). Workstream 3 of the SEND Strategy Board are overseeing the details of these arrangements and have a round table discussion about Triage design on 25th February 25.
- The Primary Mental Health Team (PMHT) have provided a report on their activity and impact on improving outcomes for Reading's children and young people, which was reviewed by the Quarterly Public Health Board on the 17th of February. This report demonstrates the significant demand on emotional and mental health resources in Reading, in line with the national picture. It also demonstrates PMHT's significant impact on improving mental health outcomes for children (using clinical measures i.e., Routine Outcome Measures) i.e., 80% of children had improved outcomes (e.g., RCADS, CORs, Goals, etc). In addition, 24 Schools had been supported with mental health surgery support and the evaluation of these effectiveness of these surgeries demonstrated that 100% of school leaders attending these surgeries described themselves as 'more confident' to respond to the emotional health needs of their students. The relatively small investment in PMHT was noted in the context of significant demand for this support and a 4-5 month waiting list is in place for PMHT support currently; the risks to each child waiting are assessed on a 4-6 weekly basis.

- The H&WBB are asked to note that the MHST (Mental Health Support Team) offer is going through re-tender with BOB ICB. Reading have led a combined Berkshire West tender proposal. We recognise the uncertainty that the tender process generates for systems leaders and particularly for schools who have high confidence in Reading's MHST offer, which performs very favourably in a regional and national context. The outcome of the tender will be known on 1st May and we will keep H&WBB updated.

Reading has recently been highlighted as an area of national best practice for investment in, and the effectiveness of, coproduction by the government commissioned national review, led by Safe Lives. Reading education leaders will be contributing this good practice to a national webinar in Spring 2025.

Priority 5 – Promote good mental health for all adults

The Reading Mental Health and Wellbeing Network has continued to meet on a quarterly basis now using an agenda model that allows an opportunity to showcase progress on the implementation plan through presentations by each partner organisation. At the most recent meeting in February the group has received presentations from the Ready Friends Befriending Forum, Nature and Health Benefits and the Wellbeing Platform Support Hub.

As reported previously the Closing the Gap 2 procurement process continues to move towards the procurement phase in preparation for October 2025 and the Mental Health and Wellbeing elements of Closing the Gap are main investment of the public health grant in Adult Mental Health and Wellbeing for Reading. A recent further engagement session provided an opportunity to share with the stakeholder partners the proposal to reallocate a greater proportion of this investment towards the establishment of an agreed systematic approach to primary prevention.

The Mental Health Needs Assessment continues to be at the final editing stage in preparation for publication on the Berkshire Observatory website, the home of the Reading Joint Strategic Needs Assessment. This ongoing delay is a consequence of the limited capacity the small Public Health team and publication is now expected to be in May and will be reported at the next board meeting.

The Reading Suicide Prevention Action Planning group has met on a quarterly basis and links with the newly reestablished Pan Berkshire Suicide prevention planning group has strengthened. This allows for collaborative decision making about the recommissioning of the AMPARO bereavement service across the Thames Valley, and development of the specification for a near real time surveillance system for Berkshire. There has also been reporting about the preventative action that is taking place in Reading. This includes reporting of a safeguarding review that ensures the findings from a safeguarding review inform local practice and interagency collaboration to prevent future risk to life, collaboration around a suspected cluster response and the Welcome Platform Support Hub at Reading West.

4 Contribution to Reading's Health and Wellbeing Strategic Aims

- 4.1 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. It contributes to all the [Berkshire West Joint Health & Wellbeing Strategy 2021-30](#) priorities.

5 Environmental and Climate Implications

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

6 Community Engagement

- 6.1 A wide range of voluntary and public sector partners and members of the public were encouraged to participate in the development of the 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. Key engage will continue to be a part of the process of implementing, reviewing and updating actions within the strategy to ensure it continues to address local need.

7 Equality Implications

- 7.1 Not applicable - an Equality Impact Assessment is not required in relation to the specific proposal to present an update to the Board in this format.

8 Other Relevant Considerations

- 8.1 Not applicable.

9 Legal Implications

- 9.1 Not applicable.

10 Financial Implications

- 10.1 The proposal to update the board on performance and progress in implementing the Berkshire West Health and Wellbeing Strategy in Reading offers improved efficiency and value for money by ensuring Board members are better able to determine how effort and resources are most likely to be invested beneficially on behalf of the local community.

11 Timetable for Implementation

- 11.1 The Berkshire West Health and Wellbeing Strategy is a 10-year strategy (2021-2030). Implementation plans are for three years however will continue to be reviewed on an annual basis.

12 Background Papers

- 12.1 There are none.

Appendices

A. Health & Wellbeing Implementation Plans Narrative Update

B. Key Indicators for each Priority Area

APPENDIX A - HEALTH AND WELLBEING IMPLEMENTATION PLANS NARRATIVE AND DASHBOARD REPORT UPDATE

PRIORITY 1: Reduce the differences in health between different groups of people, Implementation Plan narrative update

Action name	Status	Commentary (100-word max)
1. Take a 'Health in All Policies' approach that embeds health and wellbeing across policies and services.	Green	Ensure Service Policy reviews and proposals for new services and policies undertake Equality Impact Assessments, which also consider the impact of climate change on our residents, e.g. increase in hospital admissions for respiratory conditions due to heatwave/extreme cold weather, as well as the impact of any new services on our climate. Information and advice is provided through our public health teams via alerts and general communications to support a healthy environment.
2. Address the challenge of funding in all areas and ensure that decisions on changing services, to improve outcomes, does not adversely affect people with poorer health.	Green	Ensure Services are delivered as far as possible, close to the communities that they are designed to serve, and are accessible via public transport, and consider the impact on Climate. The Better Care Fund will offer Grants for Community based projects to meet the Health and Wellbeing needs of the localities, taking a Population Health Management (PHM) approach. These are based within communities and community hubs, to ensure they are accessible by the people in those locations.
3. Use information and intelligence to identify the communities and groups who experience poorer outcomes and ensure the right services and support are available to them while measuring the impact of our work.	Green	We use a Population Health Management approach to identify people at risk of poorer outcomes, sharing information with system partners to enable risk stratification and identify service gaps. We continue to use the JOY App and Marketplace for referrals and signposting and use Connected Care and the Berkshire West Inequalities Dashboard to identify groups of people who may be at risk of poor health outcomes, and then provide targeted information, advice and support. The PHM Data shows that there has been improvement in the number of people who have had a health check, and conditions such as hypertension and diabetes are being identified at an earlier stage to improve outcomes.
4. Ensure an effective programme of NHS Health Checks and follow up support services that are designed to meet the needs of all people in the community, ensuring appropriate communication and engagement methods that are culturally sensitive.	Green	The Community Wellness Outreach service is delivering NHS Health Checks in community settings where uptake has been previously low. The focus is on 'place based' support services, where possible, including those offered by RBC, particularly those 'free at the point of use' - green spaces, libraries, some leisure facilities, Reading Green Wellbeing Network programmes. Hospital navigators supporting people into long-term mentoring. Outreach to faith-based organisations to build a network of 'Community Advocates', providing pastoral support to local communities.
5. Continue to develop the ways we work with ethnically diverse community leaders, voluntary sector, unpaid carers, and self-help groups that sit within Local Authorities.	Green	We work closely with Voluntary and Community sector partners in this area such as Association for Cohesion and Racial Equality (ACRE) and Reading Community Learning Centre, as well as Whitley Community Development Association and other community groups based within and reaching into communities to build trust and enable access to appropriate services to meet their needs. We have the Reading Services Guide and the JOY platform, which is used across Reading to enable easy referral to services and to identify gaps in the marketplace that can be highlighted together with the data that identifies a need. Our Place Based Partnerships team, New Directions College and Compass Recovery College also work in partnership with these organisations and communities to provide an integrated and collaborative approach to addressing challenges.

6. Ensure fairer access to services and support for those in most need through effective signposting, targeted health education and promoting digital inclusion, all in a way that empowers communities to take ownership of their own health.	Green	The Social Prescribers, Community Health Champions, Community Connectors, Family Health Advisors and Parish Nurses are key to building relationships with people in our different communities across Reading, and in particular within our ethnically diverse populations. They work in an integrated way to support and enable education about health and wellbeing and to promote screening programmes and health checks that are being delivered locally in communities - providing the information and encouraging engagement in the areas where people are most in need. These health and education programmes, and screening programmes are being well attended and feedback from community members has been very positive as being located within the community has made them more easily accessible. People are encouraged and supported to use the NHS App, and to find information and advice about what they can do to maintain or improve health and fitness. Information can be provided in different languages and mediums to reach different communities based on their needs.
7. Increase the visibility and signposting of existing services and improve access to services for people at higher risk of bad health outcomes, whilst also providing pastoral support through faith-based organisations linked to health and social care services.	Green	There are a number of organisations supported through commissioned contracts, and smaller community grants for faith based and community organisations that specifically support people at higher risk of bad health outcomes. Pastoral support is provided alongside education about health risks and what opportunities there are to reduce risk and improve outcomes. The Parish Nurse project through Reading Gateway Church is a great example of community focused activities and provision of pastoral support. Communicare provide information and advice on benefits and other financial welfare issues, and we work with community leaders in our faith-based settings to ensure there are opportunities for people to access these services in a way that best meets their needs.
8. Monitor and assess how Covid-19 has differentially impacted our local populations, including through the displacement or disruption of usual services. Ensure health inequalities exacerbated by COVID-19 are addressed as we recover and ensure access to services.	Green	People who were at higher risk of poor outcomes due to contracting Covid-19 and leading to Long Covid or other complications are supported through the Long Covid programme being delivered by Primary Care. Our primary care and voluntary and community sector providers continue to be key participants in identifying health inequalities, especially those that were exacerbated by COVID-19, and enable onward referrals to appropriate support services. The JOY App is being used extensively across Primary Care and Social Prescribing services enabling people to access the right activities and information for them alongside a programme of delivering Health Checks in community settings to reach into communities. A risk stratification guidance document has been shared with GP surgeries by the Integrated Care Board, in relation to Chronic Obstructive Pulmonary Disease (COPD), a respiratory condition that has led to the highest number of hospital admissions in Reading.

PRIORITY 2: Support individuals at high risk of bad health outcomes to live healthy lives, Implementation Plan narrative update

Action name	Status	Commentary (100-word max)
1. Identify people at risk of poor health outcomes, using Population Health Management data and local data sources, as well as increase visibility of existing services, and signposting to those services, as well as improving access for people at risk of poor health outcomes.	Green	The Community Wellness Outreach project of delivering NHS Health Checks in ethnically diverse communities, where there are higher levels of deprivation, are a key aspect of the work being undertaken to support people at higher risk. We are working with Primary Care services who sending messages to people in the target groups, who have never had a health check and are in areas of higher deprivation, as we know that if conditions go undetected then there is a higher risk of developing long term conditions such as diabetes and heart disease. When someone attends one of the Community Wellness Outreach sessions, they can also be referred to one of the Social Prescribers for one-to-one support and referred to a range of other services, depending on their needs, to support their wellbeing.
2. To raise awareness and understanding of dementia. Working in partnership with other sectors, we can introduce an integrated programme ensuring the	Green	In Reading 67.5% of those aged 65 or over are estimated to have a coded diagnosis of dementia as of September 2024, which is higher than England (65.5%). The Dementia diagnosis rates have improved year on year since 2021. A Dementia Friendly Reading Steering Group was formed, and a self-assessment was undertaken ahead of applying for Dementia Friendly Community status with the Alzheimer's Society and the data from the self-assessment is currently being processed. Our Community Health Champions are working with our Voluntary and Community Sector partners to build

Dementia Pathway is robust and extended to include pre diagnosis support, and improve early diagnosis rates, rehabilitation and support for people affected by dementia and their unpaid carers.		relationships and confidence with people to know what support and information is available to them, and we fund Young People with Dementia services through the Better Care Fund, to provide activities, advice and information for people with early onset dementia to enable them to remain active and engaged within their communities.
3. Improve identification and support for unpaid carers of all ages. Work with unpaid carers and partner agencies to promote the health and wellbeing of unpaid carers by giving them a break from their caring responsibilities, whilst allowing them to fulfil their caring role.	Green	The Unpaid Carer's Strategy has been implemented and we have funding through the Accelerating Reform Fund to develop pilot projects for Carer's Breaks and Identification of Unpaid Carers. We have a co-production group of people with lived experience and who are currently Carers, and the proposal for the Carer's Breaks service offer is being developed based on the input from the co-production group. The identification of carer's is being undertaken at the BOB Consortium level to take a joint approach across all 5 Local Authority areas.
4. We will work together to reduce the number of rough sleepers and improve their mental and physical health through improved access to local services.	Green	RBC has a dedicated Rough Sleeping Initiatives Team including a Rough Sleeping Initiatives Co-ordinator and Partnerships Officer and who commission all accommodation and support services for people that sleep rough. Services include a rough sleeping outreach service (managed by St Mungo's) and circa 250 supported accommodation units for this cohort (provided by Launchpad, St Mungo's, and The Salvation Army). Launchpad are one of our homelessness charity partners, and there are regular NHS Health Check sessions being provided for the people using their services every month. In Reading there are two other outreach teams working directly and specifically with those sleeping rough / who have formerly slept rough. These are the Health Outreach Liaison Team (HOLT) commissioned by the NHS and the Multiple Disadvantage Outreach Team (MDOT), commissioned by RBC Public Health.
5. Prevent, promote awareness, and provide support to people affected by domestic abuse in line with proposals outlined in the Domestic Abuse Bill.	Green	We continue to work closely with our Voluntary and Community Sector partners, Adult Social Care, Housing and Thames Valley Police to ensure safeguarding concerns are reported to enable action to be taken to support people at risk of domestic abuse, and a Tackling Domestic Abuse Strategy has been developed and implemented. Provision of appropriate safe environments to support people affected by domestic abuse. Local media campaigns to advertise the range of Domestic Abuse support available to both men and women using online resources such as the Reading Services Guide, local newspapers, Reading Borough Council's Facebook and Twitter networks. We provided a grant to Parents and Children Together (PACT) to support more victims of domestic abuse through expanding a pilot project with the Royal Berkshire Hospital (RBH). The pilot began in April 2023 to refer patients from all departments of the Hospital who they believe are experiencing domestic abuse to PACT's trauma-informed Alana House team who come to the hospital to provide in-person support. Quarterly reports are provided to the Reading Integration Board by PACT and since April 2024, the project has supported 32 Reading residents, provided 623 hours of keywork to those referred for support, and of the 16 service users receiving accommodation support: 3 moved to settled accommodation; 6 moved from unsafe to safe accommodation; 4 were supported to sustain their existing accommodation; and 3 went from homelessness to being accommodated.
6. Support people with learning disabilities through working with voluntary organisations in order to concentrate on issues that matter most to them.	Green	Reading is performing better than the England average for supporting people with a Learning Disability into employment. We continue to work closely with our Voluntary and Community Sector partners, some of whom are specialists in supporting people with Learning Disabilities. We have continued to fund a part-time Outreach worker post and have contributed to the Autism Strategy for Berkshire West. We also have the Compass Recovery College which provides free training and information for people with both low-level mental illness and long-term conditions affecting their mental health, including Learning Disabilities.

PRIORITY 3: Help families and children in early years, Implementation Plan narrative update

Action name	Status	Commentary (100-word max)
1. Increase the number of 2-year-olds (who experience disadvantage) accessing nursery places across Reading	Green	Sufficiency of places for children who are 2yrs old is sound and generally where there are families waiting, it is due to waiting for a preferred location rather than a space. There is a quality service offer for children who are waiting which is well used and offers preparatory support to children and their families in readiness for the place available when they accept it. Action - moved to Green.
2. Increase and develop the support available for children with SEND needs in early years (at home and accessing early years provision)	Green	Through the development of new SEND resources for schools' significant guidance on managing social and emotional ill health needs at ordinarily available (OAP at universal level) and in Graduated Responses (GR) to children with more significant needs in partnership between BFFC and ICB leaders. These resources were launched successfully in October 2024 and have been well received. HAF are now offering SEND specific activities for children and their siblings as part of this successful programme.
3. Promote availability of information for vulnerable families in Reading, including those with no recourse to public funds	Amber	There is regular liaison with the Family Information Service to ensure information is shared through FIS/SEND Local Offer and BFFC Comms team; and family help will work with partner agencies and RBC regarding any events where information can be shared further and in a community setting. FIS continues to be a highly effective, proactive service which can adapt its approach to meet the needs of specific cohorts as required. Training needs to be made available to the wider workforce/partnership that provides information on the legal framework, eligibility and support available for families with no recourse by end of 2025. Some of the Brighter Futures for Children workforce have received the training however not all; this is part of the Brighter Futures for Children training programme.

PRIORITY 4: Promote good mental health and wellbeing for all children and young people, Implementation Plan narrative update

Action name	Status	Commentary (100-word max)
1. Provide early intervention for children and young people with the right help and support at the right time	Amber	Our Mental Health Support Teams (MHSTs) and our Primary Mental Health Service, alongside our Educational Psychologists, continue to promote whole school approaches to mental health, and offer a range of training and workshops to nursery, school and college staff. Impact on outcome data and the feedback from children and young people demonstrates a positive experience of these services and improved outcomes for the children. MHST is now subject to a tender process across Berkshire West. Reading (BFFC) have led a shared tender proposal to BOB ICB to maintain and integrate MHST delivery being led by the Local Authorities and expand reach and effectiveness of the offer even further, through integration and economies of scale. We note the anxiety of school leaders about the tender process, recognising that Reading's MHST offer is highly effective in a regional and national context, and there is concern that a move of provider would reduce the effectiveness of the offer. The outcome of the tender will be clear on 1 st May 25. We will update H&WBB at this point.
2. Support settings and communities in being trauma informed and using a restorative approach	Green	Through the development of new SEND resources for schools' significant guidance on managing social and emotional ill health needs at ordinarily available (OAP at universal level) and in Graduated Responses (GR) to children with more significant needs in partnership between BFFC and ICB leaders. These resources were launched successfully in October 2024 and have been well received.
3. Coproduction and collaboration with children and young people, families,	Green	Co-production continues to progress, and parents/caregivers and young people have been working closely with BFFC to co-produce the new guidance for schools and the wider system in the OAP and GR resources, which includes emotional health specific guidance for schools' staff, early years settings and the wider partnership. Co-production has included senior leaders for children's services in BFFC sitting alongside children, young people and

communities and faith groups to shape future mental health services and in delivering transformation of mental health and emotional wellbeing services.		<p>parents/carers to listen to their experiences, an EDI cultural humility approach has been taken to these conversations and associated child level audit activity.</p> <p>Reading has recently been highlighted as an area of national best practice for investment in, and the effectiveness of, coproduction by the government commissioned national review, led by Safe Lives. Reading education leaders will be contributing this good practice to a national webinar in Spring 2025</p>
4. Develop an easy to navigate local mental health and emotional wellbeing offer for children, young people, parents, carers and professionals/practitioners We will work together to reduce the number of rough sleepers and improve their mental and physical health through improved access to local services.	Amber	<p>There is current early system consideration of whether a partnership emotional health triage system would be of benefit to Reading's children in line with national best practice, early scoping discussions are underway. Following Rapid Review learning there is an urgency to progress this area and additional resource will need to be identified to undertake this work.</p> <p>Design of the interagency EMH Triage arrangements has commenced and we have received good support from the voluntary sector and wider statutory partners in this co-design (see narrative above).</p> <p>Working towards June 2025 for readiness around target.</p>
5. Identify and provide services for targeted populations i.e. the most vulnerable children and young people to ensure equality of access to support and services	Green	The targeting of BFFC resources is currently subject to review, following the strategic system analysis associated with SEND developments. Proposals for the focussing of Primary Mental Health Team resource and capacity are currently out for consultation.
6. Recovery after Covid-19/ adolescent mental health	Green	The initial impact of the EBSA team (funded until March 2024) demonstrates that of 39 young people (aged 11-16y) and 36 have returned to education, at an average cost of £6400 per child. MHST and Primary Mental Health Offers and wider Family Help have been updated to respond to post Covid emotional health needs. The children's attendance and mental health continues to be tracked for longitudinal impact. Further consideration is being given to embedding targeted EBSA advice in school surgeries, alongside activity to reduce the likelihood of suspensions and responding promptly to challenges with school attendance, through targeted support of the Educational Psychology Service, in close consultation with the Strategic Leads for Emotional Health & Well-Being and SEND in BFFC. Updates on this will be brought back to H&WBB.
7. Local transformation plan	Green	In place and embedded in BOB ICB strategic planning

PRIORITY 5: Promote good mental health and wellbeing for all adults, Implementation Plan narrative update

Action name	Status	Commentary (100 word max)
1. Raise mental health awareness and promote wellbeing	Green	This action is now business as usual but there is more to do. The Public Health Communications contract with Blue Lozenge continues to have mental health and wellbeing and suicide prevention in the communication strategy for 2025. An upcoming example in the coming quarter will be Mental Health week in the month of May.
2. Address social factors that create risks to mental health and wellbeing, including social isolation and loneliness	Green	This action has become part of business as usual through the Reading Community Health Champions network and the Mental Health and Wellbeing Network. Further opportunity to establish a primary prevention approach to mental health and wellbeing is included in a proposal for the commissioning specifications for the mental health investment in Closing the Gap 2.
3. Focus targeted support on groups at greater risk of experiencing mental health challenges, loneliness and social isolation and health inequalities in order to support early identification and intervention	Green	This action falls within the scope of the Mental Health and Wellbeing Network's oversight of the implementation of priority 5. It has also become part of business as usual through the Reading Community Health Champions network. The Public Health team are working hard to establish a new operating model that will place the Community Health Champions network on a sustainable footing.
4. Foster more collaborative working across health, care and third sector services to recognise and address mental health support needs	Green	Collaboration is the basis of the Mental Health and Wellbeing Network's oversight function for the implementation of Health and Wellbeing Strategy Priority Area 5. The agenda for the quarterly meetings considers and plan effective collaboration between existing and newer partners.
5. Develop and support peer support initiatives, befriending and volunteer schemes, particularly recognising the impact of Covid-19 on smaller voluntary sector groups	Green	Work with smaller voluntary sector groups continues through the Reading Community Health Champions Network. Befriending and Volunteer schemes from part of the offer from partners across the Mental Health and Wellbeing Network.
6. Build the capacity and capability across the health and social care workforce to prevent mental health problems and promote good mental health	Green	This action is business as usual, progressed through the Mental Health and Wellbeing Network. Opportunities to invite new partners from the Voluntary Community and Social Enterprise sector are continually under discussion following the annual conference and workshop activities. The commissioning of Closing the Gap 2 includes a proposal to reallocate a significant proportion of the investment towards a public mental health approach that achieves a balanced approach between primary prevention and the support for those with mental illness and poor mental health and wellbeing.
7. Support people affected by Covid-19 with their mental wellbeing and associated loneliness and isolation	Green	This action has become part of business as usual through the Reading Community Health Champions network and the Mental Health and Wellbeing Network. Loneliness and isolation have been under consideration by a Mental Health and Wellbeing network task and finish group that has now concluded and will be taking findings to the next meeting of the Mental Health and Wellbeing Network.
8. Develop local metrics to measure progress linked to Reading Mental Health Needs Assessment	Amber	With the recent appointment of a permanent dedicated Senior Public Health Analyst for our small Public Health team in Reading the work to review and develop the Joint Strategic Needs Assessment can start in partnership with our colleagues in West Berkshire. The final draft of the mental health needs assessment is in the final stages of preparation, subject to capacity within the team. It is hoped that support for the new public health and wellbeing team operating model will be agreed in Q1 or Q2 of 2025/26.

APPENDIX B - KEY INDICATORS FOR EACH PRIORITY AREA

WHB Strategy 2021/30 Priority Name	Indicator Name (with link to the datasheet)	Data Source	Link to the data	Update frequency	Time periods
PRIORITY 1: Reduce the differences in health between different groups of people	1.1 Disease prevalence in all registered population, compared with prevalence in registered population in the most deprived areas (quintiles 1 & 2)	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Monthly	December 2022, June 2023, October 2023
	1.2 Proportion of all registered patients who have had a health check, compared with the proportion of those who have had a health check in the most deprived areas (quintiles 1 & 2)	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Quarterly	2022/23
	1.3 Proportion of current smokers in all population and in the most deprived (quintiles 1 & 2)	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Monthly	Oct-23
	1.4 Proportion of overweight and obese population in all areas and in the most deprived (quintiles 1 & 2)	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Monthly	Oct-23
PRIORITY 2: Support individuals at high risk of bad health outcomes to live healthy lives	2.1 Inequality in life expectancy at birth by gender - Slope index of inequality (years)	OHID - Public Health Outcomes Framework	Public Health Outcomes Framework - OHID (phe.org.uk)	Annually	2010/12 to 2018/2020
	2.3 Dementia diagnosis rate in people aged 65+ as a percentage of those estimated to have dementia (%)	NHS Digital and OHID Fingertips	Primary Care Dementia Data - NHS Digital	Monthly	May 2021 to July 2023
	2.4 Number and rate of people sleeping rough (annual snapshot)	Department for Levelling Up, Housing and Communities	Tables on rough sleeping - GOV.UK (www.gov.uk)	Annually	2010 to 2022
	2.5 Proportion of supported working-age adults with learning disabilities in paid employment (%)	OHID Fingertips - Learning Disability Profiles	Learning Disability Profiles - Data - OHID (phe.org.uk)	Annually	2014/15 to 2019/2020
PRIORITY 3: Help families and children in early years	3.1 School readiness	Department for Education	https://explore-education-statistics.service.gov.uk/find-statistics/early-years-foundation-stage-profile-results/2021-22	Annually	2012/13 to 2021/22
	3.2 Hospital admissions caused by unintentional and deliberate injuries in children (0-4 years)	OHID - Child and Maternal Health	Public health profiles - OHID (phe.org.uk)	Annually	2021/22
	3.3 Proportion of children aged 2-2 1/2 yrs receiving ASQ-3 as part of the Healthy Child Programme or improved review	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2015/16 to 2020/21
	3.4 Percentage of 2-year-olds achieving at least 'expected' in communication and language in the Early Years Foundation Stage Profile	Department for Education	Early years foundation stage profile results: 2018 to 2019 - GOV.UK (www.gov.uk)	Annually	2012 to 2022
	3.5 Proportion of take up of targeted 2 year old funding for eligible children	Early Years Team	The data can be requested from Rebecca Gisson (rebecca.gisson@brighterfuturesforchildren.org) or Lorna McGifford (Lorna.McGifford@brighterfuturesforchildren.org)	Term	Summer term 2019 to Summer term 2023
	3.6 Health Visiting (Antenatal numbers seen, New birth visits within 14 days, 6-8 weeks review uptake % with 8 weeks, 6-8 weeks breastfeeding % recorded, 8-8 weeks breastfeeding % at all, 1 year review uptake %, 15 months review uptake %, 2.5 years review uptake %)	Health Visitors	Berkshire West PH Hub - Home (sharepoint.com)	Quarterly	Q1 2020 to Q1 2023
PRIORITY 4: Promote good mental health and wellbeing for all children and young people	4.1 School pupils with social, emotional, and mental health needs	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2014 to 2021
	4.2 Children in care	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2011 to 2021
	4.3 Looked after children whose emotional well-being is a cause for concern	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2014-21
	4.4 Number of referrals to the Mental Health Service Team (MHST)	Brighter Futures for Children	The contacts for this data are: ross.jockey@brighterfuturesforchildren.org or deborah.hunter@brighterfuturesforchildren.org	Quarterly	FY 2022/23 and Q1&4 2023/24
	4.5 Children and young people engaged with MHST who have moved toward their goals	Brighter Futures for Children	The contacts for this data are: ross.jockey@brighterfuturesforchildren.org or deborah.hunter@brighterfuturesforchildren.org	Quarterly	FY 2022/23 and Q1&4 2023/24
	4.6 Percentage of children and young people working with the Primary Mental Health Team who have moved towards their goals	Brighter Futures for Children	The contacts for this data are: ross.jockey@brighterfuturesforchildren.org or deborah.hunter@brighterfuturesforchildren.org	Quarterly	FY 2022/23 and Q1&4 2023/24
PRIORITY 5: Promote good mental health and wellbeing for all adults	5.1 Number of people diagnosed with SM	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Monthly*	2022/23
	5.2 Number of people diagnosed with depression	Frimley Local Insights (Connected Care)	Connected Care System Insights - Power BI	Monthly*	2022/23
	5.3 Number of drug and alcohol outreach support to the street homeless population	Intensive and Engaging Rough Sleeper Service (IAE)	The contact for this data is Sally Andersen (sally.andersen@reading.gov.uk)	Quarterly	Q1-Q4 2022/23
	5.4 Self-reported well-being (happiness/energy/satisfaction/worthwhile)	OHID - Common Mental Health Disorders	Common Mental Health Disorders - OHID (phe.org.uk)	Annually	2011 to 2022
	5.5 Loneliness: percentage of people who feel lonely often, always, or some of the time	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2019/20
	5.6 Gap in employment rate between those with a physical or mental health long-term condition (aged 16-64) and the overall employment rate Gap 2021/22 - percentage points	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2013/14 to 2021/22
	5.7 Fuel poverty (low-income low energy efficiency methodology)	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2019 to 2021
	5.8 Unemployment rate (% of working age population claiming out of work benefits)	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2021/22
	5.9 Adults in contact with secondary mental health services who live in stable and appropriate accommodation	OHID - Public Health Profiles	Public health profiles - OHID (phe.org.uk)	Annually	2021/22