

READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	17 January 2020		
REPORT TITLE:	Health and Wellbeing Dashboard and Action Plan - January 2020		
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ORGANISATION:	Reading Borough Council		

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report presents an update on delivery against the Health and Wellbeing Action Plan (Appendix A), alongside the Health and Wellbeing Dashboard (Appendix B), which sets out local trends in a format previously agreed by the Board. Taken together, these documents 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 documents give 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 progress to date against the 2017-20 Reading Health and Wellbeing Strategy Action Plan as set out at Appendix A.
- 2.2 That the Health and Wellbeing Board notes performance as set out in the dashboard at Appendix B, and in particular the following performance measures which have been updated since the dashboard was last brought to the Board:
 - Estimated dementia diagnosis rate (aged 65+) has been updated with monthly snapshots.
 - % of those eligible for an NHS health check who were offered and received a health check
 - % new mothers smoking at time of delivery
 - Number of dementia friends
 - % of children overweight or obese (Reception and Year 6)

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. The updated Health and Wellbeing Action Plan is presented to the Board in full twice a year.

4. CURRENT POSITION (January 2020)

Priority 1 - supporting people to make healthy lifestyle choices

- 4.1 A greater or similar proportion of Reading's population continues to make healthy lifestyle choices. There are more people than average whose weight is within the recommended range; a greater number than average who meet criteria for being physically active; and a smaller proportion of adults who smoke. Smoking amongst those in routine and maintenance professions in Reading appeared to increase slightly in the last quarter, but the change was too small to be considered reliable.
- 4.2 Despite fluctuations in the proportion of primary school children classified as overweight or obese, these figures have stayed close to the England average. Four Let's Get Going programmes have been commissioned for 2019-20 with a mix of term-time and holiday provision to enable a comparison of performance. The Eat4Health service has now been re-instated, and widely promoted. Data collected through the National Child

Measurement Programme over the last 10 years has now been mapped for the first time, and will be used to inform future decisions to support the healthy weight agenda, including commissioning decisions about future programmes and the development of more holistic plans to encourage healthy weight. A comprehensive review of services and support available which impact on healthy weight and physical activity is being undertaken by Wokingham BC on behalf of the 3 Berkshire West authorities to inform future priorities.

- 4.3 Reading is unlikely to meet local or national targets for the delivering NHS health checks to eligible residents (those aged 40-74 without certain specified diagnoses). The health check assesses people's risk of stroke, heart disease, kidney disease, diabetes and dementia, and leads to targeted advice. In the second quarter of 2019-20, the proportion of the eligible population who were offered or received a health check continues to be below target and below the England average. However, the proportion of people invited for a health check who go on to receive one continues to be slightly above the England average.
- 4.4 RBC commissioned a Dental Epidemiology Survey from Public Health England to be undertaken in the 2018/19 academic year. Full results will be available to inform the development of a local oral health strategy early in 2020.
- 4.5 Over the 2019 summer months, a Train the Trainer programme was completed in preparation for a Making Every Contact Count (MECC) rollout so as to engage the wider workforce in promoting healthier lifestyles.

Priority 2 - Reducing loneliness and social isolation

- 4.6 RBC chairs a local Steering Group to support an all age approach to reducing loneliness and social isolation. The Group commissioned a study by the University of Reading to develop local understanding and identify solutions relevant to different groups of residents, and this was published in October 2019. There has now been a thorough refresh of the local Action Plan so as to address the report's recommendations.
- 4.7 The results from the 2018/19 Adult Social Care survey were published in November and tell us that a higher proportion of respondents to the survey than previously have reported that they have as much social contact than they would like (47.1% compared to 41.4% the previous year). Furthermore, a larger proportion of respondents in Reading reported as much social contact as they would like compared with elsewhere in England. Currently, national indicators which facilitate tracking progress in reducing loneliness and social isolation only refer to people known to Adult Social Care, although the Steering Group's remit is much wider. The Government plans to introduce measures into wider surveys - as signalled in *A Connected Society: a Strategy for Tackling Loneliness* (published October 2018) - but this has not yet been implemented. The Reading Steering Group will start to collate data to provide a broader local perspective from early 2020.
- 4.8 The multi-agency Steering Group brings partners together to promote understanding of the health benefits of social connection, and to develop and raise awareness of services which support this. The Group oversees initiatives focused on employment, volunteering, transport and community development and which target groups of residents at risk of isolation as well as the broader population

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

- 4.9 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 is 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 fell very slightly, but not significantly enough to bring it in line with the national average.

- 4.10 The Future in Mind plan covering the whole of Berkshire West is refreshed annually, and was last updated in October 2019. Building resilience in young people is a strong unpinning to the current plan, including work in schools, communities and with the voluntary sector, and the ongoing promotion of #littlebluebookofsunshine, developed by young people. The local Future in Mind plan seeks to develop a whole system approach to supporting young people, and 491 professionals from the Reading area received training in Psychological Perspectives in Education and Primary Care (PPEP) in 2018-19. This increased the confidence and skills of a wide range of partners to address mental health issues with young people. The number of children seen by local youth counselling organisations continues to increase. However, waiting times for Berkshire Healthcare's Child and Adolescent Mental Health Service (CAMHS) team are increasing, in line with the national trend.

Priority 4 - Reducing deaths by suicide

- 4.11 At the time of the latest release the mortality rate for suicide and undetermined intent for local authority areas the rate in Reading was in line with the national average and average for local authority areas with similar levels of deprivation, and showed continuing improvement in line with targets. However, more current national data, which is not yet available at local level, suggests a recent increase. Local intelligence is being used to determine whether this is likely to be reflected in Reading.
- 4.12 Both the Berkshire-wide and Reading locality Suicide Prevention Action Plans have now been refreshed, to include responses to the findings of a Berkshire Suicide Audit covering inquest findings for the period 2014-18. This has highlighted the links between financial difficulties and increased suicide risk, leading to a review of RBC's procedures around Council Tax debt in line with the national Samaritans / Citizens Advice Council Tax Protocol. The link between workplace stress and increased suicide risk is reflected in RBC's refreshed Time to Change Action Plan to encourage conversations about mental wellbeing within the workplace. Other issues which may indicate increased suicide risk, including relationship breakdown and a history of self-harm, are due to be addressed in 2020, linked to a review of Suicide Prevention training. Some patterns emerge from this which help indicate who faces a greater risk of death by suicide and what services or points of contact might be the most effective ways of offering support.
- 4.12 A pilot service across Berkshire to support people bereaved by suicide was launched in July 2019, and funding has now been secured to continue the service as part of a BOB STP scheme through to May 2020. A Phase I evaluation is in progress.

Priority 5 - Reducing the amount of alcohol people drink to safer levels

- 4.14 The proportion of people receiving alcohol treatment who successfully completed treatment increased over the last two quarters. The proportion is slightly better than the average for England. Alcohol-related hospital admissions, after a steady increase over the last few years, fell back below England and statistical neighbour averages in 2017/18.
- 4.15 There is an action plan to use education and campaigns to promote responsible drinking, to create responsible market behaviour through licensing measures and partnership

approaches, and to encourage people into treatment as necessary. The action plan will be reviewed and refreshed early in 2020.

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

- 4.16 The borough has an active Dementia Friendly Reading Steering Group (formerly the Reading Dementia Action Alliance) bringing organisations together across sectors to raise awareness and understanding of dementia. The approach is a comprehensive one, and involves learning from people living with dementia and other partners to promote equity of access to a range of services so that people are able to access and stay part of their community. The Group leads on delivering Dementia Friends sessions to secure individual commitments to taking action on dementia, and agreed a revised stretch target after exceeding the previous local target. There are already over 8,400 Dementia Friends, but the Group has now increased its focus on engaging local businesses - such as Broad Street Mall, The Oracle, Thames Water and Visa. The Group's successes in this area have been recognised by the achievement of the Alzheimer's Society 'dementia friendly town' award.
- 4.17 Taking action on dementia was selected as a priority for the current Health and Wellbeing Strategy part because of low diagnosis rates in parts of the borough, indicating low awareness and recognition of the benefits if a diagnosis. The estimated diagnosis rate for people aged 65+ with dementia is reported monthly and in the last year has gradually risen above the target of 67.7%, to a peak of 71% of cases diagnosed in July, falling slightly in October to 69.7%, compared to 68.4% in England.
- 4.18 The Dementia Action Alliance organised an event to mark Dementia Action Week 2019, promoting the benefits of physical activity, singing and social engagement. This attracted over 100 people living with dementia, and showcased the benefits of community connections, volunteering and services to support people to live well with dementia. A dementia friendly 'what's on' booklet was produced to mark the event. The Dementia Action Alliance is now developing a signposting pathway for all stages of dementia. This will be a comprehensive guide to maintaining relationships, employment and finances as well as finding equipment and services to support people with dementia and their carers.
- 4.19 The Dementia Action Alliance is working in partnership with St Luke's and The Oaks care home to develop a dementia friendly café on site. This service will be available to the wider community supported by Reading College Health and Social Care Students. Over 130 students are now dementia friends and ongoing work is being completed with the college, to establish itself as a dementia friendly organisation. The DAA has also developed a relationship with the Whitley Community Hub/Café to establish Reading's first dementia friendly community hub and safe space for those living with or caring for dementia to go and feel safe, understood and supported. The DAA continues to support the Southcote Memory café and reports that the group is now well established and self-sufficient. The DAA is also working with Reading Sports and Leisure to develop a dementia friendly sports programme including swimming, archery and other activities - due to launch early 2020.

Priority 7 - Increasing take up of breast and bowel screening and prevention services

- 4.20 Locally set targets for breast and bowel cancer screening have been met. Coverage in Reading is in line with the England average and the average for local authorities with similar levels of deprivation. Volunteer cancer champions have been successful in driving up screening rates where previously these were low for particular practice areas, and in supporting a range of awareness-raising activities and events.

- 4.21 45 Cancer awareness and education sessions have been organised at community level, targeting a range of groups at risk of health inequalities, and the South Reading Cancer Educator has delivered 24 cancer education and awareness sessions.

Priority 8 - Reducing the number of people with tuberculosis (TB)

- 4.22 Although the incidence of 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).
- 4.23 There is an ongoing programme of awareness-raising around screening and treatment via public events, engagement with community groups and targeted sessions to reach higher risk groups. Latent TB awareness leaflets have been shared with different voluntary sector organisations and groups in Reading, and made available in different languages including Hindi, Punjabi and Urdu. Reading's ongoing work in this area has been acknowledged by Public Health England and by TB Control Boards.
- 4.24 Key information on active and latent TB and a map of high risk countries has been made available on the Reading Services Guide and on the Reading JSNA profile to facilitate public access to TB information. 'Did Not Attend' rates for TB screening appointments have reduced substantially during 2018-19 following changes in the follow up process with invited patients and implementation of an evening clinic.

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

- 5.1 The 2017-20 Health and Wellbeing Strategy and accompanying Action Plan draw on the findings of the Joint Strategic Needs Assessment (JSNA) for Reading to identify priorities. The Strategy complements plans for health and social care integration, and supports the drive towards co-commissioning across the Health and Wellbeing Board's membership. The 2017-20 strategy also incorporates wellbeing responsibilities towards residents with current or emerging care and support needs so as to be comprehensive and Care Act compliant.
- 5.2 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. COMMUNITY & STAKEHOLDER 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 and a draft of the proposed Strategy was made available for consultation between 10th October and 11th December 2016. The indicators included in this report reflect those areas highlighted during the development of the strategy and included in the final version.
- 6.2 Delivery of the Health and Wellbeing Action Plan is through a range of multi-agency forums which bring together representatives of the Health and Wellbeing Board with other local partners. These are referred to in the appended update.

7. LEGAL IMPLICATIONS

- 7.1 The Health and Social Care Act (2012) gives duties to local authorities and clinical commissioning groups (CCGs) to develop a Health and Wellbeing Strategy and to take account of the findings of the JSNA in the development of commissioning plans. In addition, the Council has a duty under the Care Act (2014) to develop a clear framework for ensuring it is meeting its wellbeing and prevention obligations under the Care Act.

8. EQUALITY IMPACT ASSESSMENT

- 8.1 An Equality Impact Assessment is not required in relation to the specific proposal presented to the Board through this report. However, the Health and Wellbeing Strategy and Action Plan are vehicles for addressing health inequalities, and accordingly delivery is expected to have a differential impact across groups, included those with protected characteristics. This differential impact should be positive, and so delivery of the Action Plan supports the discharge of Health and Wellbeing Board members' Equality Act duties.

9. FINANCIAL IMPLICATIONS

- 9.1 There are no new financial implications arising from this report. 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.

10. APPENDICES

APPENDIX A - Health and Wellbeing Action Plan update November 2019

APPENDIX B - Health and Wellbeing dashboard November 2019